Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Open to Public Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

A F	For the	lpha 2023 calendar year, or tax year beginning $$ SEP $$ $$ $$ $$ $$ $$ $$ $$ $$ $$	nding ${f A}$	UG 31, 20	024			
3 (Check if applicable	C Name of organization		D Employer id		tion number		
	Addres change	FRIENDS OF THE CHILDREN- NEW YORK						
	Name change			06-159	97902	2		
	Initial return Final return/	1325 5TH AVENUE	loom/suite	E Telephone no 646 – 53		587		
	termin ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$		3,054,3	38.		
	Ameno	NEW TORK, NI 10029		H(a) Is this a gre	oup retu			
	Applic tion pendir	F Name and address of principal officer: KAPION KELES		for subordi	inates?	Yes X	No	
		SAME AS C ABOVE		H(b) Are all subordi			No	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	1 '		t. See instruction:	S	
	Websit		1 Veer	H(c) Group exe			NTV	
P	art I	organization: X Corporation Trust Association Other Summary	L Year	of formation: 20	O O M S	State of legal domici	116: TA T	
•	_	Briefly describe the organization's mission or most significant activities: IMPAC	TING	GENERATIO)NAT.	CHANGE B	v	
Se	'	EMPOWERING YOUTH WHO ARE FACING THE GREATE						
Activities & Governance	2	Check this box if the organization discontinued its operations or dispose						
Ver	3				3		25	
ဗ	4	Number of independent voting members of the governing body (Part VI, line 1b)					25	
δ, Ø	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			5		40	
iţi	6	Total number of volunteers (estimate if necessary)			6		46	
Ę	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a		0.	
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			7b		0.	
				Prior Year		Current Year		
Revenue	1	Contributions and grants (Part VIII, line 1h)		3,978,64		2,372,2		
	1	Program service revenue (Part VIII, line 2g)		C 1:	0.		0.	
Rev		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,13		57,8		
_	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		50,53		201,1		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,035,29		2,631,2		
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.		$\frac{0}{0}$	
	4-	Benefits paid to or for members (Part IX, column (A), line 4)		2,395,35		3,040,0		
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)		4,333,3	0.	3,040,0	0.	
Expenses	h	Total fundraising expenses (Part IX, column (D), line 25) 438, 14	7.		•			
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,418,73	30.	1,807,3	37.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,814,08		4,847,3		
		Revenue less expenses. Subtract line 18 from line 12		221,23		-2,216,0		
70,	3		Be	ginning of Current		End of Year		
t Assets or	20	Total assets (Part X, line 16)		7,972,68	30.	5,745,0	73.	
ASS	21	Total liabilities (Part X, line 26)		3,577,8	72.	3,566,3		
25	22	Net assets or fund balances. Subtract line 21 from line 20		4,394,80	08.	2,178,7	13.	
	art II	Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedules a				nowledge and belief,	, it is	
rue	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	ch preparer	has any knowledge	-			
		Signature of officer		I Date				
Sig				Date				
Her	е	RAMON REYES, EXECUTIVE DIRECTOR Type or print name and title						
			10	Date Ch	ıeck	PTIN		
aio	i	Print/Type preparer's name TODD D. MASSINGER TODD D. MASSINGER		if	lf-employed	P0007588	3	
	parer	Firm's name HOFFMAN, STEWART & SCHMIDT, PC	1			-0743240	-	
	Only	Firm's address 3 CENTERPOINTE DRIVE, SUITE 300		T IIIII 3 EI	.			
	,	LAKE OSWEGO, OR 97035-8663		Phone no	0.503	-220-5900		
۷a۱	y the IF	RS discuss this return with the preparer shown above? See instructions		,		X Yes	No	
	_							

. u.	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	IMPACTING GENERATIONAL CHANGE BY EMPOWERING YOUTH WHO ARE FACING THE
	GREATEST OBSTACLES THROUGH RELATIONSHIPS WITH PROFESSIONAL MENTORS
	12+ YEARS, NO MATTER WHAT.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4-	revenue, if any, for each program service reported. (code:) (Expenses \$ 3,810,187 • including grants of \$) (Revenue \$
4a	(Code:) (Expenses \$3,810,187. including grants of \$) (Revenue \$) FRIENDS OF THE CHILDREN IS A NATIONAL NONPROFIT WITH THE MISSION OF
	IMPACTING GENERATIONAL CHANGE BY EMPOWERING YOUTH WHO ARE FACING THE
	GREATEST OBSTACLES THROUGH RELATIONSHIPS WITH PROFESSIONAL MENTORS -
	12+ YEARS, NO MATTER WHAT. OUR SUCCESSFUL MODEL IS NOW IN 21 LOCATIONS
	AROUND THE COUNTRY AND IN CORNWALL U.K. 83% OF OUR YOUTH RECEIVE A HIGH
	SCHOOL DIPLOMA OR GED, 98% OF OUR YOUTH WAIT TO BECOME PARENTS UNTIL
	AFTER THEIR TEENS, 93% OF OUR YOUTH REMAIN FREE FROM JUVENILE JUSTICE
	SYSTEM INVOLVEMENT, AND 92% OF OUR YOUTH GO ON TO ENROLL IN
	POST-SECONDARY EDUCATION, SERVE OUR COUNTRY, OR ENTER THE WORKFORCE.
41:	
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
70	(Code:) (Lixberines #
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 3 , 810 , 187 •

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_ <u> </u>		 -
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		
8	, ,			x
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		₩
	If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			٠,,
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1.0		<u> </u>
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
13		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		1
16		16		X
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		37	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	\vdash
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

Form 990 (2023) FRIENDS OF THE CHILDREN- NEW YORK
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L. Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			,,
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Pai	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
ı al	Charle if Calcabilla O contains a vaccassa ou mate to conviling in this Port V			
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
.	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
		-		
b c	Enter the Harmon of Fernica W Ze included of the Fernica Section of the Capping and	1		
С	(acceptable of vision in the American vision of American vision vision of American vision vision of American vision visi	1c	Х	
	(gambling) winnings to prize winners?	l IC	22	

Form 990 (2023) FRIENDS OF THE CHILDREN- NEW YORK

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				169	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 40			
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
			3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a				37
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country				
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad				Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction for the line Form 2006 T2		5b		Λ
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		5c		
oa	and a stable which a stable to the stable and		6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contribution	one or gifte	- Oa		
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		O.D		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		Х
	Tellor III II I	vicco provided to the payor.	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?	<u>'</u>	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
			9a		
			9b		
10	Section 501(c)(7) organizations. Enter:	اما			
	Initiation fees and capital contributions included on Part VIII, line 12	10a	-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	11a			
a h	Gross income from other sources. (Do not net amounts due or paid to other sources against	114	-		
b	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	•	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	u		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b	4		
С	Enter the amount of reserves on hand	13c			
			14a		_X_
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				7.7
	excess parachute payment(s) during the year?		15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.	·	-		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X
17	If "Yes," complete Form 4720, Schedule O.	tivitios			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes." complete Form 6069		17		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 25 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 25 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? Х 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Other officers or key employees of the organization Х 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website ___ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION - 646-516-6587 1325 5TH AVE, NEW YORK, NY

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average	Pos (do not check		(C) osition ck more than one person is both an			(D) Reportable	(E) Reportable	(F) Estimated	
	hours per week (list any hours for related organizations below	stee or director	nostitutional trustee	Officer Officer	irecto	Highest compensated employee	tee)	compensation from the organization (W-2/1099-MISC/ 1099-NEC)	compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	amount of other compensation from the organization and related organizations
(1) GARY CLEMONS	line) 40.00	lnd	lns	0#	Ke	E W	För			
EXECUTIVE DIRECTOR (FORMER)	40.00	1		Х				210,000.	0.	10,104.
(2) JAMES ISELIN	2.00			Ė				220,0000		10/1010
DIRECTOR		Х						0.	0.	0.
(3) BRIAN E. SCHARTZ	2.00									
VICE-CHAIR		X				Ĺ		0.	0.	0.
(4) JAMES I. MCCLAMMY	2.00									
VICE-CHAIRPERSON		X		X				0.	0.	0.
(5) RONALD S. ZUVICH	2.00									
TREASURER		Х		Х				0.	0.	0.
(6) ELISABETH WADSWORTH	2.00									_
SECRETARY		X		X				0.	0.	0.
(7) CANDACE M. ARTHUR	2.00	l								
DIRECTOR		Х						0.	0.	0.
(8) EFFIE BLASSBERGER	2.00									•
DIRECTOR	2 00	Х						0.	0.	0.
(9) RANDY CHAO	2.00	. ,								•
DIRECTOR (10) KENNERY CHEN	2 00	Х						0.	0.	0.
(10) KENNETH CHEN	2.00	Х						0.	0.	•
(11) KARN S. CHOPRA	2.00	Λ						0.	0.	0.
CO-CHAIRPERSON	2.00	Х		Х				0.	0.	0.
(12) HECTOR DELRAZO	2.00	Λ						0.	0.	<u></u>
DIRECTOR	2.00	х						0.	0.	0.
(13) RYAN PRESTON DAHL	2.00							•	•	•
DIRECTOR	2,00	х						0.	0.	0.
(14) ALIYA HAIDER	2.00								•	
DIRECTOR		Х						0.	0.	0.
(15) MELISSA HOBLEY	2.00							-	-	
DIRECTOR		Х						0.	0.	0.
(16) RASMIA KIRMANI-FRYE	2.00									
DIRECTOR		Х						0.	0.	0.
(17) PETER W, KOLP	2.00									
DIRECTOR		Х						0.	0.	0.

332007 12-21-23 Form **990** (2023)

	or ind c						W		00 1331	JUZ Fage U
Geetion A. Onicers, Directors, Trustees, Key Employees, and Trighest Compensated Employees (COMMIDEA)										
(A) Name and title	(B) Average	P (do not che			C) ition			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	box	, unle	ss pe	rson i	s both or/trus	n an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) MATTHEW LANDY	2.00									
DIRECTOR		Х						0.	0.	0.
(19) ANDREW LITCHMAN	2.00									
VICE-CHAIRPERSON		Х		X				0.	0.	0.
(20) PATRICK D. MCGRATH	2.00									
CO-CHAIRPERSON		Х		X				0.	0.	0.
(21) CHRISTOPHER ROLLINS	2.00									
DIRECTOR		Х						0.	0.	0.
(22) JOAN D. ROSENTHAL	2.00									
DIRECTOR		Х						0.	0.	0.
(23) JOHN SINGH	2.00								_	_
DIRECTOR		Х					4	0.	0.	0.
(24) MARTHA UCKO	2.00									_
DIRECTOR		Х						0.	0.	0.
(25) SAIMA MEYER	2.00								_	_
DIRECTOR		Х	L					0.	0.	0.
(26) DANIEL SCHAPIRO DIRECTOR	2.00	x						0.	0.	0.
4b Outstand				-		1		210,000.	0.	10,104.
1b Subtotal								0.	0.	0.
c Total from continuation sheets to Part V								210,000.	0.	10,104.
d Total (add lines 1b and 1c)						ماريد (•	_	10,104.
2 Total number of individuals (including but r compensation from the organization	iot iirriited to tri	ose	liste	u at	oove) WI	io re	eceived more than \$100,	,000 of reportable	1
										Yes No
3 Did the organization list any former officer	, director, truste	ee, k	еу е	empl	loye	e, or	hig	hest compensated emp	loyee on	
line 1a? If "Yes," complete Schedule J for s			-	-	•		-		-	3 X
4 For any individual listed on line 1a, is the si										

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person

Section B. Independent Contractors

\$100,000 of compensation from the organization

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address N	IONE	(B) Description of services	(C) Compensation			
							
2	2 Total number of independent contractors (including but not limited to those listed above) who received more than						

III ∣ S∙	tatement	of R	evenue
----------	----------	------	--------

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					lanction revenue	business revenue	sections 512 - 514
S S	1 a	Federated campaigns 1a					
au au							
تِ ق		Fundraising events 1c	769,256.				
ifts r A		Related organizations 1d	,				
nia G		Government grants (contributions) 1e	111,413.				
Sin		All other contributions, gifts, grants, and					
e ți	•		491 572.				
음	~	Noncash contributions included in lines 1a-1f	491,572. 19,321.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Total. Add lines 1a-1f		2,372,241.			
0 10		Total. Add lines 1a-11	Business Code	2/3/2/2111			
	2 a		Buomoso Godo				
/ice							
er ne	b				_		
m S	C						
gra Re	d						
Program Service Revenue	e	All III					
ъ.	Ť	All other program service revenue					
-	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends, intere		47 207			47 207
	_	other similar amounts)		47,297.			47,297.
	4	Income from investment of tax-exempt bond p	roceeds				
	5	Royalties	(") D				
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)	<u></u>				
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 111,118.					
	b	Less: cost or other basis					
ne		and sales expenses					
Revenue	С	Gain or (loss) 7c 10,516.					
Re	d	Net gain or (loss)		10,516.			10,516.
ther	8 a	Gross income from fundraising events (not	ľ				
₹		including \$ 769,256. of					
		contributions reported on line 1c). See					
		Part IV, line 188a	521,154.				
	b	Less: direct expenses8b	322,484.				
	С	Net income or (loss) from fundraising events		198,670.			198,670.
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities	<u></u>				
	10 a	Gross sales of inventory, less returns					
		and allowances 10a	1				
	b	Less: cost of goods sold 10k					
		Net income or (loss) from sales of inventory					
,			Business Code				
ons	11 a	MISCELLANEOUS REVENUE	624110	2,528.	2,528.		
and and	b						
Miscellaneous Revenue	С						
disc. B	d	All other revenue					
2		Total. Add lines 11a-11d		2,528.			
	12	Total revenue. See instructions		2,631,252.	2,528.	0.	256,483.

FRIENDS OF THE CHILDREN- NEW YORK 06-1597902 Page **10** Form 990 (2023) Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. Program service expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 205,768. 144,038. 20,576. 41,154. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 2,302,265. 2,079,851. 128,789. 93,625. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 274,772. 254,554. 10,279. 9,939. Other employee benefits 9 230,476. 257,205. 13,848. 12,881. 10 Payroll taxes 11 Fees for services (nonemployees): Management 57,489. 57,489. Legal 63,394. 63,394. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 406,814 180,602. 135,610. 90,602. column (A), amount, list line 11g expenses on Sch 0.) 65,315. 54. 6,439. 58,822. Advertising and promotion 12 45,713. 23,327. 21,870. 516. 13 Office expenses 84,897. 2,438. 71,937. 10,522. Information technology 14 Royalties 15 238,101. 299,535. 537,636. 16 Occupancy 37,285. 9,366. 23,797. 4.122. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 41,613. 41,613. Depreciation, depletion, and amortization 22 24,791. 24,791. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 141,583. 129,804. 1,314. 10,465. STAFF DEVELOPMENT CHILDREN'S ACTIVITIES 112,100. 112,100. 87,319. 87,319. INDIRECT EVENT EXPENSES 45,143. 45,143. d FRIENDS' **EXPENSES** 56,245. -450,758. 479,672. 27,331. e All other expenses _ 4,847,347. 3,810,187. 599,013. 438,147. Total functional expenses. Add lines 1 through 24e 25

Check here

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

Form 990 (2023)
Part X Balance Sheet

Pai	τX	Balance Sneet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	800,690.	1	5,056.		
	2	Savings and temporary cash investments			1,094,954.	2	292,352.
	3	Pledges and grants receivable, net	2,269,923.	3	1,660,307.		
	4	Accounts receivable, net	12,381.	4	1,720.		
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe		6			
ß	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	D '1			105,586.	9	157,756.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	543,649.			
	b		160,345.	370,625.	10c	383,304.	
	11	Investments - publicly traded securities			64,465.	11	0.
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	3,254,056.	15	3,244,578.		
	16	Total assets. Add lines 1 through 15 (must equ			7,972,680.	16	5,745,073.
	17	Accounts payable and accrued expenses	232,607.	17	173,176.		
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subs					
ja B		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X	3,345,265.	05	3,393,184.
	00	of Schedule D			3,543,203.	25	3,566,360.
	26	Total liabilities. Add lines 17 through 25		e X	3,311,012.	26	3,300,300.
S		Organizations that follow FASB ASC 958, che and complete lines 27, 28, 32, and 33.	eck ner	e 🔼			
nce	27				2,028,394.	27	497 841.
ala	28	Net assets with donor restrictions	2,366,414.	28	497,841. 1,680,872.		
B	20	Organizations that do not follow FASB ASC 9			2/300/111		2700070720
튎		and complete lines 29 through 33.	, ciic	sck liefe			
<u></u>	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or e				30	
Ass	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			4,394,808.	32	2,178,713.
Z	33	Total liabilities and net assets/fund balances			7,972,680.	33	5,745,073.
	- 55	Total habilities and het assets/fully balances			.,5,2,000	JJ	000

Form **990** (2023)

Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,63		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,84		
3	Revenue less expenses. Subtract line 2 from line 1	3 -	2,21		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,39	4,8	08.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,17	8,7	13.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		
			Form	990	(2023)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization FRIENDS OF THE CHILDREN- NEW YORK 06-1597902 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section B. Total Support Subtract line 5 from line 4.	Sec	tion A. Public Support						
membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 8 Public support. Servicities from the 4 Solos income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from inmilar sources 9 Net income from mirrelated business activities, whether or not the business is regularly carried on the sale of capital assets (Epplain in Part VI) 10 Other income. Do not include gain or loss from the sale of capital assets (Epplain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 Tirels years, if the Form 900 recovers and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2023 line 8, column (f), divided by line 11, column (f) 15 Public support percentage for 2023 line 8, column (f), divided by line 11, column (f) 16 33 1/3% support test - 2023. If the organization oid not check to box on line 13, fisa, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization leasts the facts and circumstances test. The organization of partical form meets the facts-and-circumstances test. The organization of gainization leasts the facts and circumstances test. The organization of gainization least be facts and circumstances test. The organization of gainization least line facts and circumstances tests. The o	Caler	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
include any "unusual grants.") 7 Tax revenues levied for the organization is benefit and either paid to or expended on its behalf 7 The value of services or facilities furnished by a governmental unit to the organization without change 7 Total. Add lines 1 through 3 8 The portion of total contributions by each person (other than a governmental unit to publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 8 Public support, Selvised time 6 them time 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business a activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 7 First 5 years. If the Form 990 is for the organization did not check the box on line 13, and line 14 is 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the facts and circumstances test. The organization of long the organization meets the facts and circumstances test. The organization of long the organization meets the facts and circumstances test. The organization of long the organization meets the facts and circumstances test. The organization of long the organization meets the facts and circumstances test. The organization of long the organization meets the facts and circumstances test. The organization of long the organization meets the facts and circumstances test. The organization of long the organization of long the organization meets the facts and circumstances test. The organization of long the organization of long the organization of long to the organization of long	1	Gifts, grants, contributions, and						
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Schedule A (Form 990) 2023 FRIENDS OF THE CHILDREN- NEW Y-Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sed	etion A. Public Support	clow, picase comp	nete i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		,,	,			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8 Sec	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(4) 2010	(5) 2020	(0) 2021	(u) LULL	(6) 2020	(i) rotal
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>		1		
14	First 5 years. If the Form 990 is for the	•		·	•	. , . ,	. —
	check this box and stop here		<u> </u>				
	ction C. Computation of Publi						
	Public support percentage for 2023 (I		•	column (f))		15	%
	Public support percentage from 2022					16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20)23 (line 10c, colun				17	%
18	Investment income percentage from	2022 Schedule A,	Part III, line 17			18	<u>%</u>
19a	33 1/3% support tests - 2023. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization quali	fies as a publicly s	supported organiz	ation	
b	33 1/3% support tests - 2022. If the	•			•	·	
20	line 18 is not more than 33 1/3%, che						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Par	t IV	Supporting Organizations (continued)			
	_			Yes	No
11	Has th	he organization accepted a gift or contribution from any of the following persons?			
а	A pers	son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c b	elow, the governing body of a supported organization?	11a		
b	A fam	ily member of a person described on line 11a above?	11b		
С	A 35%	6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail	in Part VI.	11c		
Sect	tion E	3. Type I Supporting Organizations			
				Yes	No
		ne governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did th	ne organization operate for the benefit of any supported organization other than the supported			
	organi	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	now providing such benefit carried out the purposes of the supported organization(s) that operated,			
_	supen	vised, or controlled the supporting organization.	2		
Sect	tion C	C. Type II Supporting Organizations			
				Yes	No
		a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed			
	the su	pported organization(s).	1		
Seci	tion L	D. All Type III Supporting Organizations			
				Yes	No
1		ne organization provide to each of its supported organizations, by the last day of the fifth month of the			
		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organi	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	•	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
	-	ason of the relationship described on line 2, above, did the organization's supported organizations have a			
		cant voice in the organization's investment policies and in directing the use of the organization's			
		ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
Sact	suppo	orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations	3		
		k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	•		
a		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.		- 1	
с 2		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in ties Test. Answer lines 2a and 2b below.	struction	yes	No
		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
		upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		e supported organization(s) to which the organization was responsive: If Yes, then in Yes theretiy			
		he organization was responsive to those supported organizations, and how the organization determined			
			2a		
b		nese activities constituted substantially all of its activities. ne activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		If the reasons for the organization's position that its supported organization(s) would have engaged in			
		activities but for the organization's position that its supported organization(s) would have engaged in	2b		
		t of Supported Organizations. Answer lines 3a and 3b below.			
		ne organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must		·	
Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or	6		
7	maintenance of property held for production of income (see instructions) Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):		<u> </u>	
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):	4		
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	amarganey temporary raduction (see instructions)	ا ۾ ا		

___ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023

d Excess from 2022e Excess from 2023

Schedule A	(Form 990) 2023	FRIEND	S OF THE	E CHILDE	REN- NEW	YORK	06-1597902	Page 8
Part VI	Part IV, Section A, lines 1	, 2, 3b, 3c, 4b, lines 2 and 3;	4c, 5a, 6, 9a, Part IV, Sectio	9b, 9c, 11a, 1 n E, lines 1c, 2	1b, and 11c; P 2a, 2b, 3a, and	art IV, Section I 3b; Part V, line	ne 17a or 17b; Part III, line 12; B, lines 1 and 2; Part IV, Section 1; Part V, Section B, line 1e; Par	C,
	(See instructions.)				•			
		4						
				>				

332028 12-21-23 Schedule A (Form 990) 2023

Schedule B

(Form 990)

Schedule of Contributors

2022

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

2023

OMB No. 1545-0047

06-1597902 FRIENDS OF THE CHILDREN- NEW YORK Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** J For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2023)

FRIENDS OF THE CHILDREN- NEW YORK

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FRIENDS OF THE CHILDREN- NATIONAL 44 NE MORRIS ST. PORTLAND, OR 97212	\$120,300.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PINKERTON FOUNDATION 610 FIFTH AVE., SUITE 316 NEW YORK, NY 10020	\$150,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	QUEST FOUNDATION P.O. BOX 339 DANVILLE, CA 94526	\$120,000.	Person X Payroll
(a)	(b)	(c)	(d)
No4_	Name, address, and ZIP + 4 KARN CHOPRA 103 EDGEWOOD AVE LARCHMONT, NY 10538	Total contributions \$ 75,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	KIRKLAND AND ELLIS 601 LEXINGTON AVE NEW YORK, NY 10022	\$\$0,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	ARDIAN FOUNDATION 20, PLACE VENDOME PARIS, FRANCE 75001	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

FRIENDS OF THE CHILDREN- NEW YORK

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7	WEINTRAUB FAMILY FOUNDATION 1632 1ST AVE #140 NEW YORK, NY 10028	\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8	ICHIGO FOUNDATION 829 EAST 15TH STREET BROOKLYN, NY 11230	\$ 85,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9	BETH NEUMANN 299 PARK AVENUE, 30TH FL NEW YORK, NY 10171	\$50,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
10	VANGUARD CHARITABLE 45 LIBERTY BLVD, SUITE 220 MALVERN, PA 19355	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	WEIL, GOTSHAL & MANGES LLP 767 FIFTH AVENUE NEW YORK, NY 10153	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 12	Name, address, and ZIP + 4 ROPES & GRAY 1211 AVENUE OF THE AMERICAS NEW YORK, NY 10036	Total contributions \$ 50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

FRIENDS OF THE CHILDREN- NEW YORK

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
13	HONORABLE MIRIAM SHEARING 9103 ALTA DR. UNIT 1107	\$	Person X Payroll Noncash (Complete Part II for
	LAS VEGAS, NV 89145-8557		noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
14	MICHAEL AND MICHELLE FABIAN		Person X Payroll
	65 W 95TH ST, #7AB	\$ 51,750.	Noncash
	NEW YORK, NY 10025-6759		(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>15</u>	MATTHEW LANDY AND NIRUPAMA RAO 130 E 95TH ST NEW YORK, NY 10128-1705	\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
16	DEPARTMENT OF YOUTH AND COMMUNITY DEVELOPMENT 2 LAFAYETTE STREET, 19TH FLOOR NEW YORK, NY 10007	\$92,867.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 17	Name, address, and ZIP + 4 BRIAN SCHARTZ AND LEAH CHARLESWORTH 322 VALLEY FARM RD	Total contributions \$ 163,700.	Person X Payroll Noncash (Complete Part II for
	MILLBROOK, NY 12545-5305		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	JIM MCCLAMMY		Person X Payroll
	96 OLD INDIAN RD	\$ 50,100.	Noncash
	WEST ORANGE, NJ 07052		(Complete Part II for noncash contributions.)

FRIENDS OF THE CHILDREN- NEW YORK

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	RYAN DAHL 12 KENT RD WINNETKA, IL 60093	\$ 75,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	CANDACE ARTHUR 3 MARION ST GREENVALE, NY 11548	\$ 60,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

FRIENDS OF THE CHILDREN- NEW YORK

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
323/153 12-26			Schedule B (Form 990) (2023)

Page 4 Schedule B (Form 990) (2023) Name of organization **Employer identification number** FRIENDS OF THE CHILDREN- NEW YORK 06-1597902 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

FRIENDS OF THE CHILDREN- NEW YORK

Employer identification number 06-1597902

Pal	organizations waintaining bonor Advised organization answered "Yes" on Form 990, Part IV, line		Complete if the			
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor	advised funds			
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds ca	n be used only			
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purp	pose conferring			
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form	990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).				
	Preservation of land for public use (for example, recreat	tion or education) Preservat	on of a historically important land area			
	Protection of natural habitat	Preservat	on of a certified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the				
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic stru	ucture included on line 2a	2c			
d	Number of conservation easements included on line 2c acqui	ired after July 25, 2006, and not				
	on a historic structure listed in the National Register		2d			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated b	y the organization during the tax			
	year					
4	Number of states where property subject to conservation eas	ement is located				
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspection, handlin	g of			
	violations, and enforcement of the conservation easements it	holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing	conservation easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing con-	servation easements during the year			
8	Does each conservation easement reported on line 2d above	•				
	and section 170(h)(4)(B)(ii)?					
9	In Part XIII, describe how the organization reports conservation	•				
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial st	atements that describes the			
Dai	organization's accounting for conservation easements. 't III Organizations Maintaining Collections of	Art Historical Transuras o	r Other Similar Assets			
ı a	Complete if the organization answered "Yes" on Form		Other Ommar Assets.			
12			ent and halance sheet works			
Ia	a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public					
	service, provide in Part XIII the text of the footnote to its finan		•			
h	If the organization elected, as permitted under FASB ASC 95					
b	art, historical treasures, or other similar assets held for public					
	provide the following amounts relating to these items.	oxidation, education, or research in	Taranoranio or public scryice,			
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
2	If the organization received or held works of art, historical trea	scures or other similar assets for fin				
~	the following amounts required to be reported under FASB A	•	anolal galli, provide			
•	Revenue included on Form 990, Part VIII, line 1	_	\$			
	Assets included in Form 990, Part V		\$			

Par	t III	Organizations Maintaining C	ollections of Ar	t, Historica	Treasures, or	Other	Similar	Assets	(contin	ued)	
3	Using	g the organization's acquisition, accessi	on, and other record	s, check any o	the following that	make sig	gnificant u	se of its			
	collec	ction items (check all that apply).									
а		Public exhibition	c	l Loan o	r exchange progra	ım					
b		Scholarly research	6								
С		Preservation for future generations									
4	Provi	de a description of the organization's co	ollections and explain	n how they furt	ner the organizatio	n's exem	pt purpos	se in Part	XIII.		
5		ig the year, did the organization solicit o									
	to be	sold to raise funds rather than to be ma	aintained as part of t	he organization	's collection?				Yes		No
Par	tΝ	Escrow and Custodial Arran							ne 9, or		
		reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the	e organization an agent, trustee, custodi	an, or other intermed	diary for contrib	outions or other as	sets not i	ncluded				
	on Fo	orm 990, Part X?							Yes		No
b		es," explain the arrangement in Part XIII									
									Amount	i	
С	Begir	nning balance					1c				
d	Addit	tions during the year					1d				
		butions during the year									
f		ng balance					1f				
2a		ne organization include an amount on F					y?	\square	Yes		No
		es," explain the arrangement in Part XIII.									
Par	t V	Endowment Funds Complete if	the organization ans	swered "Yes" o	n Form 990, Part I	V, line 10).				
			(a) Current year	(b) Prior ye	ar (c) Two year	s back	(d) Three y	ears back	(e) Four	years	back
1a	Begir	nning of year balance				· ·					
b	Cont	ributions									
С	Net in	nvestment earnings, gains, and losses									
d	Gran	ts or scholarships									
е	Othe	r expenditures for facilities	`								
	and p	programs									
f	Admi	nistrative expenses									
g	End o	of year balance									
2	Provi	de the estimated percentage of the curr	rent year end balance	e (line 1g, colui	nn (a)) held as:						
а	Board	d designated or quasi-endowment		%							
b	Perm	anent endowment	%								
С	Term	endowment	%								
		percentages on lines 2a, 2b, and 2c sho									
3a	Are th	here endowment funds not in the posse	ssion of the organiza	ation that are h	eld and administer	ed for the	9		г		
	-	nization by:								Yes	No
		Inrelated organizations?							3a(i)	\longrightarrow	
									3a(ii)	\longrightarrow	
b		es" on line 3a(ii), are the related organiza			e R?				3b		
4	Desc	ribe in Part XIII the intended uses of the		wment funds.							
Par	t VI	Land, Buildings, and Equipm				5					
		Complete if the organization answere	d "Yes" on Form 990	<u> </u>	T	•					
		Description of property	(a) Cost or c	, ,	Cost or other	٠,	cumulate	ed	(d) Book	< value	Э
			basis (investr	ment) l	pasis (other)	dep	reciation				
		ings			455 222	-	E 0 . 0 .				
		ehold improvements			455,928.	1	50,95			4,97	
		oment			59,070.		9,38	37.	49	9,68	33.
е	Othe	r			28,651.				28	3,65	ol.

Schedule D (Form 990) 2023

383,304.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Schedule D (Form 990) 2023 FRIENDS	OF THE CHILDREN-	NEW YORK	06-1597902 Page 3
Part VII Investments - Other Securiti	es		-
Complete if the organization answere	d "Yes" on Form 990, Part IV, line	11b. See Form 990, Part X, lin	ne 12.
(a) Description of security or category (including name of	security) (b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col.	(B))		
Part VIII Investments - Program Rela	ted.	•	
Complete if the organization answere	d "Yes" on Form 990, Part IV, line	11c. See Form 990, Part X, lir	ne 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col.	(B))		
Part IX Other Assets			
Complete if the organization answere	d "Yes" on Form 990, Part IV, line	11d. See Form 990, Part X, lii	ne 15.
	(a) Description		(b) Book value
(1) RIGHT OF USE ASSET			3,244,578.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, lin	e 15. col. (B))		3,244,578.
Part X Other Liabilities			<u> </u>
Complete if the organization answere	d "Yes" on Form 990, Part IV, line	11e or 11f. See Form 990, Pa	art X, line 25.
1. (a) Description of liabilit	у		(b) Book value
(1) Federal income taxes	-		
(2) OPERATING LEASE LIABIT	LITIES		3,393,184.
(3)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(5)			
(7)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

3,393,184.

(8) (9)

6	_1	5	9'	79	U	2	Page 4

Par	t XI	Reconciliation of Revenue per Audited Financial Statem	nents With Reven	ue per Return	9-
		Complete if the organization answered "Yes" on Form 990, Part IV, line 13	2a.		
1	Total r	evenue, gains, and other support per audited financial statements		1	2,631,252.
2	Amour	nts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net un	realized gains (losses) on investments	2a		
b	Donate	ed services and use of facilities	2b		
С	Recov	eries of prior year grants	2c		
d	Other	(Describe in Part XIII.)	2d		
е	Add lir	nes 2a through 2d		2e	0.
3	Subtra	ct line 2e from line 1		3	2,631,252.
4		nts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investr	ment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other	(Describe in Part XIII.)	4b		
С	Add lir	nes 4a and 4b		4c	0.
5	Total r	evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	2,631,252.
Pa	rt XII	Reconciliation of Expenses per Audited Financial States		nses per Retur	n
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12			
1	Total e	expenses and losses per audited financial statements		1	4,847,347.
2		nts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donate	ed services and use of facilities	2a		
b	Prior y	ear adjustments	2b		
С	Other	osses	2c		
d		(Describe in Part XIII.)			_
е		nes 2a through 2d			0.
3	Subtra	act line 2e from line 1		3	4,847,347.
4		nts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investr	ment expenses not included on Form 990, Part VIII, line 7b			
b		(Describe in Part XIII.)	4b		_
С	Add lir	nes 4a and 4b			<u>0.</u> 4,847,347.
_		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.)		5	

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part X, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA PERSCRIBE A RECOGNITION AND MEASURMENT PROCESS FOR ACCOUNTING FOR UNCERTAIN TAX POSITIONS, AND PROVIDE GUIDANCE ON VARIOUS RELATED MATTERS SUCH AS INTEREST, PENALTIES, AND REQUIRED DISCLOSURES. MANAGEMENT BELIEVES THE ORGANIZATION DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS. THE ORGANIZATION FILES INFORMATIONAL RETURNS. GENERALLY, THE RETURNS ARE SUBJECT TO EXAMINATION BY INCOME TAX AUTHORITIES FOR THREE YEARS FROM THE FILING OF A RETURN. INTEREST OR PENALTIES ASSESSED BY TAXING AUTHORITIES, IF ANY, WOULD BE INCLUDED WITH MANAGEMENT AND GENERAL EXPENSES.

Schedule D (Form 990) 2023 Part XIII Supplemental Inf	FRIENDS OF THE	CHILDREN- N	NEW YORK	06-1597902	Page 5
Part XIII Supplemental Inf	ormation (continued)				

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization Employer identification number 06-1597902 FRIENDS OF THE CHILDREN- NEW YORK Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations е Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С g In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List 6	events with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					4	(add col. (a) through
				RUN/WALK		col. (c))
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	1,227,294.	58,691.	4,425.	1,290,410.
	2	Less: Contributions	769,256.			769,256.
	3	Gross income (line 1 minus line 2)	458,038.	58,691.	4,425.	521,154.
	4	Cash prizes				
v	5	Noncash prizes				
beuse	6	Rent/facility costs	77,667.		3,940.	81,607.
Direct Expenses	7	Food and beverages	69,747.			69,747.
Ö		Entertainment	171,130.			171,130.
		Other direct expenses	O in a discount (all)			322,484.
	11	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from line				198,670.
Pa				990, Part IV, line 19, or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a.			•	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
3eve						
_	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct I	4	Rent/facility costs				
	5	Other direct expenses				
		Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	En	ter the state(s) in which the organization condu	ete gaming activities:			
		the organization licensed to conduct gaming ac				Yes No
		No," explain:				
		•				
		ere any of the organization's gaming licenses re	•		/ear?	Yes No
b	If "	Yes," explain:				
	_					

Scn	edule G (Form 990) 2023 FRIENDS OF THE CHILDREN - NEW YORK 06-1	<u>. 59 /</u>	902	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	L No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
	n outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
152	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	□ No
	boos the organization have a contract with a time party from whom the organization received gaming revenue:	. —		
b	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
c	: If "Yes," enter name and address of the third party:			
_	, in 155, since the data dedicate of the time party).			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Divertor/efficer			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	I Is the organization required under state law to make charitable distributions from the gaming proceeds to			
а	retain the state gaming license?		Yes	☐ No
h	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
~	organization's own exempt activities during the tax year \$			
Pa	Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III	t III. lin	es 9. 9	9b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	•	,	, ,

332083 09-13-23 Schedule G (Form 990) 2023

Schedule G	(Form 990) Supplemental Inform	FRIENDS	OF '	THE	CHILDREN-	NEW	YORK	06-1597902	Page 4
Part IV	Supplemental Infor	mation _{(cont}	inued)						
-									
-									
-									
	<u> </u>								
-									

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FRIENDS OF THE CHILDREN- NEW YORK

Employer identification number 06-1597902

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	X	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		v
	The organization?	5a		X
D	Any related organization?	5b		
_	If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
6				
	contingent on the net earnings of:	60		х
	The organization?	6a		X
D	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	6b		A
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
'	not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
3		8		x
9	Initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	J		
3	Regulations section 53.4958-6(c)?	9		
	10gaiations 300tion 30.4300 0[0]:	9		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		compensation			other deferred ben	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) GARY CLEMONS	(i)	210,000.	0.	0.	0.	10,104.	220,104.	0.	
EXECUTIVE DIRECTOR (FORMER)	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
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	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

FRIENDS OF THE CHILDREN- NEW YORK

Employer identification number 06-1597902

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
RELATIONSHIPS WITH PROFESSIONAL MENTORS 12+ YEARS, NO MATTER WHAT.
FORM 990, PART VI, SECTION B, LINE 11B:
EXECUTIVE DIRECTOR AND BOARD TREASURER REVIEW THE FORM 990. TREASURER
OVERSEES PROCESS FOR FINANCE COMMITTEE. A COPY OF THE APPROVED FORM 990 IS
PROVIDED TO ALL BOARD MEMBERS PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
BOARD MEMBERS ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST ANNUALLY
AT THE YEAR-END BOARD MEETING.
FORM 990, PART VI, SECTION B, LINE 15:
THE EXECUTIVE DIRECTOR COMPENSATION IS REVIEWED BY THE BOARD CHAIR AND
EXECUTIVE COMMITTEE ON PERFORMANCE ACCORDING TO ACCOUNTABILITIES. PAST
SALARY DATA AS WELL AS COMPARABLE SALARY DATA IS PROVIDED TO THOSE
INDIVIDUALS FOR PURPOSES OF DETERMINING COMPENSATION.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATIONS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.
FORM 990, PART XII, LINE 2C:
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to:

NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

2023

Open to Public Inspection

1.General Information

Torriboar rear beginning	g (mm/dd/yyyy) 09/01/	2023 and Ending (mm/dd/yyyy) 08/31/	2024		
Check if Applicable:	Name of Organization:	CUTIDDEN NE	I VODV	Employer Identification Number (EIN): 06-1597902		
Address Change						
Name Change	Mailing Address: 1325 5TH AVENU	NY Registration Number: 06-84-89				
Initial Filing						
I —	Final Filing City / State / ZIP: Telephone: Amended Filing NEW YORK, NY 10029 646 516-65					
Amended Filing						
Reg ID Pending	Website: FRIENDSNEWYORK	ORG		Email:		
Check your organization's	<u> </u>					
registration category:	7A only EPTL	only X DUAL (7A &		Confirm your Registration Category in the Charities Registry at www.charitiesNYS.com .		
2. Certification						
See instructions for certif	ication requirements. Imprope	r certification is a violation	of law that may be subject	to penalties. The certification requires		
two signatories.						
We certify under p	enalties of perjury that we revi	iewed this report, including	all attachments, and to the	best of our knowledge and belief,		
they ar	e true, correct and complete ir	n accordance with the laws	of the State of New York ap	oplicable to this report.		
			RAMON REYE			
President or Authorized	Officer:		EXECUTIVE	DIRECTOR		
	Signature		Print Name			
			RONALD S.	ZUVICH		
Chief Financial Officer of	Treasurer:		TREASURER			
	Signature		Print Nam	e and Title Date		
3. Annual Reporting	- Evenntion					
o. Allitual neboluli	a Exemplion					
Check the exemption(s) t	hat apply to your filing. If your			gory (7A or EPTL only filers) or both		
Check the exemption(s) to categories (DUAL filers) the	hat apply to your filing. If your nat apply to your registration,	complete only parts 1, 2, a	nd 3, and submit the certific	ed Char500. No fee, schedules, or		
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CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

368451 04-01-23 1019 Page 1

^{*}The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4: If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants	(PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
Check the financial attachments you must submit with your CHAR500: X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Condisclosure and will not be available for public review.	tributors). Schedule B of public charities is exempt from
Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue filing year. We have included an IRS Form 990-EZ for state purposes only.	e exceeded \$25,000 and/or our assets exceeded \$25,000 in the
f you are a 7A only or DUAL filer, submit the applicable independent Certified Public. Review Report if you received total revenue and support greater than \$250,000 X Audit Report if you received total revenue and support greater than \$1,000,000 If the fiscal year begins before that date, an Audit Report is required if total reve No Review Report or Audit Report is required because total revenue and support We are a DUAL filer and checked box 3a, no Review Report or Audit Report is re-	and up to \$1,000,000 and the fiscal year begins on or after July 1, 2021. enue and support is greater than \$750,000 ort is less than \$250,000
Calculate Your Fee	
For 7A and DUAL filers, calculate the 7A fee: \$0, if you checked the 7A exemption in Part 3a \$\overline{X}\$ \$25, if you did not check the 7A exemption in Part 3a	Is my Registration Category 7A, EPTL, DUAL or EXEMPT? Organizations are assigned a Registration Category upon registration with the NY Charities Bureau: 7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")
For EPTL and DUAL filers, calculate the EPTL fee: \$0, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is less than \$50,000	EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY. DUAL filers are registered under both 7A and EPTL.
\$50, if the NET WORTH is less than \$250,000 \$50, if the NET WORTH is \$50,000 or more but less than \$250,000 \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000 \$\overline{X}\$\$ \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000 \$1500, if the NET WORTH is \$50,000,000 or more	EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration Exemption for Charitable Organizations . These organizations are not required to file annual financial reports but may do so voluntarily.
	Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com .
Send Your Filing	Where do I find my organization's NET WORTH?

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005

Need Assistance?

www.CharitiesNYS.com Visit:

Call: (212) 416-8401

Email: Charities.Bureau@ag.ny.gov

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

CHAR500

Schedule 4b: Government Grants www.CharitiesNYS.com

2023

Open to Public Inspection

If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities. Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information

Name of Organization:	NY Registration Number:
FRIENDS OF THE CHILDREN- NEW YORK	06-84-89

2. Government Grants

Name of Government Agency	Amount of 0	Grant
1. US TREASURY DEPARTMENT	1.	18,546.
2. DEPARTMENT OF YOUTH AND COMMUNITY DEVELOPMENT	2.	92,867.
3.	3.	
4.	4.	
5.	5.	
6.	6.	
7.	7.	
8.	8.	
9.	9.	
10.	10.	
11.	11.	
12.	12.	
13.	13.	
14.	14.	
15.	15.	
Total Government Grants:	Total:	111,413.

FR1ENDS of the CH1LDREN

New York

FINANCIAL STATEMENTS

Year Ended August 31, 2024

with

Independent Auditors' Report

Table of Contents

	Page
Independent Auditors' Report	1 - 2
Financial Statements	
Statement of Financial Position	3
Statement of Activities	4
Statement of Functional Expenses	5
Statement of Cash Flows	6
Notes to Financial Statements	7 - 15



Charles W. Chiampou, CPA, JD Robert J. Travis, CPA Kelly G. Besaw, CPA, CVA Eugene G. Kershner, CPA D. Scott Sutherland, CPA Jon K. Pellish, CPA Eric D. Colca, CPA, CVA, CEPA Michael Schaffstall, CPA Garret R. Alexin, CPA Karen M. Antonelli, CPA, CCIFP Brian Maze, CPA

Andrew L. Neyman, CPA, MBA Gina M. McDonough, CPA Jennifer N. Aceti, CPA Matthew J. DeVincentis, CPA, MBA Laura J. Markle, CPA Adam J. Ferrante, CPA Thomas R. Schwartz, CVA, CEPA Katie L. Sivic, CPA Zachary J. Wagner, CPA Greggory P. Gallson, CVA Meagan K. Fitzgerald, CPA Valerie T. Kaufman, CPA, SHRM-SCP

Independent Auditors' Report

The Board of Directors Friends of the Children - New York

Opinion

We have audited the accompanying financial statements of Friends of the Children - New York (Friends -New York), which comprise the statement of financial position as of August 31, 2024, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Friends - New York as of August 31, 2024, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Friends - New York, and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Friends - New York's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Friends - New York's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Friends - New York's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Report on Summarized Comparative Information

Chiampon Travis Beson & Kersl UP

We have previously audited Friends - New York's 2023 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated May 21, 2024. In our opinion, the summarized comparative information presented herein, as of and for the year ended August 31, 2023, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Amherst, New York May 14, 2025

Statement of Financial Position

August 31, 2024 (With Comparative Amounts for 2023)		2024		2023
ASSETS				
Cash and cash equivalents	\$	297,408	\$	1,895,644
Investments		-		64,465
Contributions receivable - net (Notes 4, 8, and 9)		1,660,307		2,269,923
Other receivables		1,720		12,381
Prepaid expenses and deposits		157,756		105,586
Property and equipment - net (Note 5)		383,304		370,625
Operating right-of-use assets (Note 10)		3,244,578		3,254,056
Total assets	<u>\$</u>	5,745,073	\$	7,972,680
LIABILITIES AND NET Liabilities:	T ASSETS			
Accounts payable and accrued expenses	\$	14,433	\$	116,224
Accrued payroll liabilities	Ψ	158,743	4	116,383
Operating lease liabilities (Note 10)		3,393,184		3,345,265
Total liabilities		3,566,360		3,577,872
Net assets:				
Without donor restrictions		497,841		2,028,394
With donor restrictions (Note 6)		1,680,872		2,366,414
Total net assets		2,178,713		4,394,808
Total liabilities and net assets	<u>\$</u>	5,745,073	\$	7,972,680

Statement of Activities

Year Ended August 31, 2024 (With Comparative Totals for 2023)

	Without Donor With Donor			tal
Public support and revenue:	Restrictions	Restrictions	2024	2023
Contributions:				
Individuals	\$ 453,517	\$ 37,304	\$ 490,821	\$ 446,609
Foundations	650,116	943	651,059	2,526,481
Corporations	208,871	1,200	210,071	183,298
	1,312,504	39,447	1,351,951	3,156,388
Contributions and grants from				
Friends of the Children -				
National (Note 9)	120,300	-	120,300	53,000
Government grants	92,867	-	92,867	-
Donated nonfinancial assets	19,321	-	19,321	-
Investment return	56,853	-	56,853	1,410
Other revenue	22,034	-	22,034	2,115
Special event income	951,888	338,522	1,290,410	1,242,485
Less direct expenses	(322,484)		(322,484)	(422,698)
Net proceeds from special events	629,404	338,522	967,926	819,787
Net assets released from				
restriction (Note 6)	1,063,511	(1,063,511)		
Total public support and revenue	3,316,794	(685,542)	2,631,252	4,032,700
Expenses:				
Program services	3,810,187	-	3,810,187	2,913,788
Administrative	599,013	-	599,013	500,037
Development	438,147		438,147	400,255
Total expenses	4,847,347		4,847,347	3,814,080
Change in net assets	(1,530,553)	(685,542)	(2,216,095)	218,620
Net assets, beginning of year	2,028,394	2,366,414	4,394,808	4,176,188
Net assets, end of year	\$ 497,841	\$ 1,680,872	\$ 2,178,713	\$ 4,394,808

Statement of Functional Expenses

Year Ended August 31, 2024 (With Comparative Totals for 2023)

	Program			Indirect	Total		
	Services	Administrative	Development	Costs	2024	2023	
Salaries and related							
expenses:							
Salaries and wages	\$ 2,219,903	\$ 148,796	\$ 133,641	\$ -	\$ 2,502,340	\$ 1,941,648	
Payroll taxes and benefits	489,016	24,697	23,958		537,671	453,702	
Total salaries and related							
expenses	2,708,919	173,493	157,599	-	3,040,011	2,395,350	
Children's activities	112,100	-	-	-	112,100	61,430	
Friends' expenses	45,143	-	-	-	45,143	33,462	
Family, community and							
school support	25,780	-	-	-	25,780	21,838	
Travel and meetings	9,366	13,160	4,122	10,637	37,285	41,441	
Professional expenses (Note 9)	102,591	235,635	64,609	14,417	417,252	573,313	
Staff development	10,465	128,164	1,314	1,640	141,583	53,179	
Chapter affiliation fees	-	-	-	-	-	12,800	
Supplies	18,263	3,052	75	16,728	38,118	23,940	
Payroll, banking, and online							
donation fees	78,011	6,441	25,993	-	110,445	89,240	
Information technology							
and communications	2,438	6,581	10,522	65,356	84,897	46,901	
Business insurance	-	-	-	24,791	24,791	20,632	
Equipment rental and purchase	2,138	-	-	26,099	28,237	57,895	
Depreciation and amortization	-	-	-	41,613	41,613	6,233	
Postage and printing	5,064	1,573	441	517	7,595	4,735	
Occupancy	238,101	-	-	299,535	537,636	362,356	
Marketing and communication	54	184	58,822	6,255	65,315	9,335	
Indirect event expenses	-	-	87,319	-	87,319	-	
Development consulting fee	-	-	-	-	-	-	
Miscellaneous		275	1,952		2,227	-	
	3,358,433	568,558	412,768	507,588	4,847,347	3,814,080	
Allocation of indirect costs	451,754	30,455	25,379	(507,588)			
Total expenses	\$ 3,810,187	\$ 599,013	\$ 438,147	\$ -	\$ 4,847,347	\$ 3,814,080	

Statement of Cash Flows

Year Ended August 31, 2024 (With Comparative Totals for 2023)	2024	2023
Cash flows from operating activities:		
Change in net assets	\$(2,216,095)	\$ 218,620
Adjustments to reconcile change in net assets to net		
cash provided (used) by operating activities:		
Realized and unrealized gains on investments	(10,515)	(304)
Depreciation and amortization	41,613	6,233
Loss on disposal of property and equipment	220	-
Change in discount on contributions receivable	(943)	34,745
Amortization of right of use assets	314,430	170,684
Donated investments	(36,138)	(64,161)
Changes in:		
Contributions receivable	610,559	(209,035)
Employee retention credit receivable	· -	326,400
Other receivables	10,661	(1,910)
Prepaid expenses and deposits	(52,170)	12,905
Accounts payable and accrued expenses	(101,791)	44,866
Accrued payroll liabilities	42,360	(80,266)
Net cash provided (used) by operating activities	(1,397,809)	458,777
Cash flows from investing activities:		
Proceeds from sale of investments	111,118	-
Additions to property and equipment	(54,512)	(356,661)
Net cash provided (used) by investing activities	56,606	(356,661)
Cash flows from financing activities:		
Principal payments on lease liabilities	(257,033)	(79,475)
Net cash used by financing activities	(257,033)	(79,475)
Net increase (decrease) in cash and cash equivalents	(1,598,236)	22,641
Cash and cash equivalents, beginning of year	1,895,644	1,873,003
Cash and cash equivalents, end of year	\$ 297,408	\$ 1,895,644
Supplemental disclosure of non-cash activities: Right of use assets obtained through operating lease liabilities	\$ 304,952	\$ 3,424,740

Notes to Financial Statements

1. Nature of Activities and Summary of Significant Accounting Policies

Friends of the Children - New York (Friends - New York) commits to standing alongside our community's youth as they work to overcome barriers to their success. Each child receives 1:1 support and guidance from a salaried, professional mentor (called a Friend), from kindergarten through high school graduation - 12½ years, no matter what. Friends work collaboratively with high-priority youth and their caregivers to set and achieve individualized goals, as well as advocate for them in the school, child welfare, healthcare, and other systems that impact them.

Youth in the Friends program face considerable challenges, including placement in the foster care system, under-resourced neighborhood schools, homelessness, hunger, and disparities in access to, and quality of, health care. Despite these barriers, program youth enter adulthood with a strong foundation for continuing achievement: 83 percent graduate high school or earn a GED, 93 percent avoid the juvenile justice system, and 98 percent avoid teen parenting.

Summary of Significant Accounting Policies - The significant accounting policies followed by Friends - New York are described below to enhance the usefulness of the financial statements to the reader.

Basis of Presentation - Net assets and all balances and transactions are presented based on the existence or absence of donor-imposed restrictions. Accordingly, the net assets of Friends - New York, and changes therein, are classified and reported as follows:

Net assets without donor restrictions - Net assets not subject to donor-imposed stipulations.

Net assets with donor restrictions - Net assets subject to donor-imposed stipulations that will be met either by actions of Friends - New York and/or the passage of time. These donor restrictions are temporary in nature or perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity. Generally, the donors of these assets permit Friends - New York to use all or part of the income earned on related investments for general or specific purposes. Friends - New York's net assets with donor restrictions consist solely of restrictions that are temporary in nature.

Expenses are reported as decreases in net assets without donor restrictions. Gains and losses on investments and other assets or liabilities are reported as increases or decreases in net assets without restrictions unless their use is restricted by explicit donor stipulation or by law. Expirations of temporary restrictions on net assets (i.e., the donor-stipulated purpose has been fulfilled and/or the stipulated time period has elapsed) are reported as net assets released from restrictions.

Notes to Financial Statements - Continued

1. Nature of Activities and Summary of Significant Accounting Policies - Continued Summary of Significant Accounting Policies - Continued

Use of Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from these estimates. Estimates are used in the financial statements for, among other things, the calculation of depreciation and amortization expense, determination of any required allowance for potentially uncollectible receivables, and functional allocation of certain expenses.

Cash and Cash Equivalents - Friends - New York considers all highly liquid debt instruments with an original maturity of three months or less to be cash equivalents.

Investments - Investments are carried at fair value. Net investment activity, which consists of the realized gains or losses and the unrealized appreciation or depreciation of those investments as well as interest and dividend income, is reported in the statement of activities.

Contributions Receivable - Contributions receivable are recognized when unconditionally promised by a donor. Once recorded, these receivables are evaluated by management for potential collection problems and an allowance for uncollectible receivables may be recorded. Management considers a variety of factors in determining the allowance for uncollectible receivables, including length of time accounts are past due, the donor's ability to pay, and the economy as a whole. Management does not believe an allowance for uncollectible contributions receivables is necessary at August 31, 2024.

Property and Equipment - All acquisitions of property and equipment in excess of \$1,000 and all expenditures for repairs, maintenance, renewals, and significant improvements that materially prolong the useful lives of assets are capitalized. Property and equipment is recorded at cost or estimated fair value at date of donation. Depreciation and amortization are calculated using the straight-line method over the estimated useful lives of the assets, which range from five to seven years.

Contribution Recognition - Friends - New York recognizes contributions when cash, securities or other assets; an unconditional promise to give; or a notification of a beneficial interest is received. Conditional promises to give - that is, those with a measurable performance or other barrier and a right of return - are not recognized as revenue until the conditions on which they depend have been met. Contributions of assets other than cash are recorded at their estimated fair value. Contributions to be received after one year are discounted at an appropriate discount rate commensurate with the risk involved. Amortization of the discount is recorded as additional contribution revenue in accordance with donor-imposed restrictions, if any, on the contributions. Grants are considered available for unrestricted use unless specifically restricted by the donor.

Contributions received with donor-imposed restrictions that are met in the same year as received are reported as revenue in the net asset class without donor restrictions.

Notes to Financial Statements - Continued

1. Nature of Activities and Summary of Significant Accounting Policies - Continued Summary of Significant Accounting Policies - Continued

Contribution of Long-Lived Assets - Friends - New York reports gifts of furniture and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

Gifts of long-lived assets with donor-imposed restrictions that are met in the same year as received are reported as revenue in the net asset class without donor restrictions.

Grant Revenue - Friends - New York's grant revenue includes amounts derived from Friends of the Children - National (Friends - National) and other pass through grants which are conditioned upon the satisfaction of barriers (typically specific performance requirements and/or the incurrence of allowable qualifying expenses). Amounts received are recognized as revenue when Friends - New York has satisfied the related barrier. At August 31, 2024, Friends - New York had \$266,000 in available award balances.

Conditional grants whose conditions are satisfied in the same reporting period in which the funding is received are reported as an increase in net assets without donor restrictions.

Donated Nonfinancial Assets and Services - Donations of materials, supplies, and other assets are recorded as support at their estimated fair value at the date of donation. Such donations are reported as support without donor-imposed restrictions unless the donor has restricted the donated assets to a specific purpose.

Friends - New York receives donated services from unpaid volunteers who assist in a range of fundraising and program activities. Significant services received that create or enhance a non-financial asset or require specialized skills Friends - New York would have purchased if not donated are recognized as contributions at their estimated fair value of the services. During the year ended August 31, 2024, Friends - New York received supplies and small equipment totaling \$19,321. These goods are valued at a good faith estimate of fair value by the donor. The goods were received without donor restrictions and the expense was allocated to the program function in the accompanying statement of functional expenses.

Income Tax Status - Income taxes are not provided for in the financial statements since Friends - New York is exempt from federal and state income taxes under Section 501(c)(3) of the Internal Revenue Code (IRC) and similar state provisions. Friends - New York is not classified as a private foundation.

Notes to Financial Statements - Continued

1. Nature of Activities and Summary of Significant Accounting Policies - Continued Summary of Significant Accounting Policies - Continued

Income Tax Status - Continued - GAAP prescribes a recognition threshold and measurement process for uncertain tax positions and also provides guidance on various related matters such as interest, penalties, and required disclosures. Management does not believe Friends - New York has any uncertain tax positions. Friends - New York files informational returns. There are currently no tax examinations in progress. Interest or penalties assessed by taxing authorities, if any, would be included with administrative expenses.

Functional Allocation of Expenses - The costs of providing the various programs and other activities of Friends - New York have been summarized on a functional basis in the statement of functional expenses. The statement of functional expenses reports certain categories of expenses that are attributable to more than one program or supporting service function. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. Expenses are allocated based on the estimates of time and effort attributable to each function.

Subsequent Events - Management has evaluated subsequent events through May 14, 2025, the date the financial statements were available to be issued.

Summarized Financial Information for 2023 - The financial statements include certain prior year summarized comparative information. Such information does not include sufficient detail to constitute a presentation in conformity with GAAP. Accordingly, such information should be read in conjunction with Friends - New York's financial statements for the year ended August 31, 2023, from which the summarized information was derived.

Reclassifications - Certain amounts in the prior year financial statements have been reclassified for comparative purposes to conform with the presentation in the current year financial statements.

2. Program and Supporting Services

Program Services - Program activities include costs of day-to-day activities with at-risk children, sustaining the children's relationships with adult role models and helping them become productive members of the community.

Supporting Services

Administrative - Administrative activities include business management, recordkeeping, budgeting, public relations, financing, and related administrative activities. These services provide the necessary developmental, organizational, and managerial support for the effective operation of the programs.

Development - Development activities include conducting fundraising and public awareness campaigns, preparing, and distributing fundraising materials, and other activities aimed at the solicitation of contributions from individuals, businesses, and foundations.

Notes to Financial Statements - Continued

3. Liquidity and Availability of Financial Resources

Friends - New York's financial assets available for general expenditure within one year of the statement of financial position date consist of the following:

	2024	2023
Financial assets at August 31: Cash and cash equivalents Investments Contributions receivable in less than one year Other receivables	\$ 297,408 - 934,886 1,720	\$ 1,895,644 64,465 1,132,945 12,381
	1,234,014	3,105,435
Amount subject to donor restrictions	(83,432)	(96,490)
Total financial assets available to meet general expenditures over the next twelve months	\$ 1,150,582	\$ 3,008,945

As part of Friends - New York's liquidity management, management has a practice to structure its financial assets to be available as general expenditures, liabilities, and other obligations come due.

4. Contributions Receivable

Contributions receivable consisted of the following at August 31:

	2024	2023
Unconditional promises expected to be collected in:		
Less than one year	\$ 934,886	\$ 1,132,945
One year to five years	800,000	1,212,500
	1,734,886	2,345,445
Discount to present value (4 percent rate used)	(74,579)	(75,522)
	\$ 1,660,307	\$ 2,269,923

Notes to Financial Statements - Continued

5. Property and Equipment

Property and equipment consisted of the following at August 31:

	2024	2023
Leasehold improvements Office furniture and equipment Computer equipment and software Construction in progress	\$ 455,928 33,555 25,515 28,651	\$ 448,491 35,443 22,622 23,716
	543,649	530,272
Less accumulated depreciation and amortization	 (160,345)	(159,647)
Net property and equipment	\$ 383,304	\$ 370,625

6. Net Assets with Donor Restrictions

Net assets with donor restrictions consisted of the following at August 31:

	2024	2023
Net assets restricted for future periods Net assets restricted as to purpose	\$ 1,597,440 83,432	\$ 2,269,924 96,490
	\$ 1,680,872	\$ 2,366,414

During the year ended August 31, 2024, Friends - New York released \$1,063,511 of net assets from donor restrictions due to the incurrence of expenses in satisfaction of the restricted purposes, or by the passage of time.

7. Retirement Plan

Friends - New York has a retirement plan pursuant to IRC Section 401(k), in which employees 21 years of age and older and with at least one year or 1,000 hours of service are eligible to participate. Employee contributions to the plan are in the form of salary deferral, and are fully vested immediately. The plan allows for discretionary employer contributions, as approved by the Board of Directors. Friends - New York made no contributions to the plan during 2024.

Notes to Financial Statements - Continued

8. Financial Instruments with Concentrations of Risk

Financial instruments that potentially subject Friends - New York to concentrations of risk consist primarily of cash and cash equivalents and contributions receivable. Friends - New York maintains balances of cash and cash equivalents that may, at times, exceed Federal Deposit Insurance Corporation limits. Concentrations of risk with respect to contributions receivable are due primarily from local business, charitable foundations, and individuals. At August 31, 2024, 70 percent of contributions receivable were from one donor.

9. Related-Party Transactions

During the year ended August 31, 2024, Friends - New York received contributions from employees and members of the Board of Directors totaling \$685,573, of which \$122,225 was included in contributions receivable at August 31, 2024.

Friends of the Children - National (Friends - National) provides Friends of the Children chapters with training, program quality monitoring, data warehousing, and operational support. For the year ended August 31, 2024, Friends - New York incurred chapter accounting fees of \$25,800 to Friends - National. Also, during the year ended August 31, 2024, Friends - New York had grant revenue from Friends - National totaling \$120,300, of which \$-0- was included in contributions receivable at August 31, 2024.

Notes to Financial Statements - Continued

10. Operating Leases

Friends - New York determines if an arrangement is a lease or a service contract at inception. A contract is determined to be or contain a lease if the contract conveys the right to control the use of an identified asset in exchange for consideration. When an arrangement is a lease, Friends - New York determines whether it is an operating or finance lease.

Leases result in recognition of ROU assets and lease liabilities on the balance sheet. ROU assets represent the right to use an underlying asset for the lease term. Lease liabilities represent the obligation to make lease payments, measured on a discounted basis. At lease inception, the lease liability is measured at the present value of the lease payments over the lease term. The ROU asset equals the lease liability, adjusted for any direct costs, prepaid or deferred rent, and lease incentives. Friends - New York has elected not to separate lease components from non-lease components, and to apply the short-term lease exception, which does not require the capitalization of leases with a term of 12 months or less. Short-term leases are recognized as expense on a straight-line basis over the term of the lease. Variable lease payments, if any, are recognized as expense in the period in which the obligation for payment is incurred. Friends - New York considers any options to extend or terminate a lease when determining the lease term, and only options that Friends - New York believes are reasonably certain to be exercised are included in the measurement of the ROU assets and lease liabilities.

Friends - New York leases its offices under operating leases with 5 to 10 year initial terms. Some leases may include renewal options which can extend the lease term. The exercise of these renewal options are generally at the discretion of Friends - New York, and only lease options that Friends - New York believes are reasonably certain to be exercised are included in the measurement of the lease assets and liabilities. The lease agreements do not include any residual value guarantees or restrictive covenants. Friends - New York has elected to use the risk-free rate of return as the discount rate as neither the rate implicit in the lease nor Friends - New York's incremental borrowing rate are readily available.

The following summarizes the line items in the statement of financial position which include amounts for operating leases as of August 31, 2024:

Operating right-of-use assets	\$ 3,244,578
Total operating lease liabilities	\$ 3,393,184

Lease expense was composed of the following for the year ended August 31, 2024:

Operating lease expense Short-term lease expense	\$ 446,799 15,561
	\$ 462,360

Notes to Financial Statements - Continued

10. Operating Leases - Continued

The following summarizes the cash flow information related to operating leases for the year ended August 31, 2024:

Cash paid for amounts included in the measurement of lease liabilities for operating leases included in	
operating cash flows	\$ 386,012
Operating lease right-of-use assets obtained in exchange	
for operating lease liabilities	\$ 304,952
Weighted average lease term and discount rate were as follows at August 31, 2024:	
operating leases	8.6
Weighted-average discount rate for operating leases	4.01%

The maturities of operating lease liabilities are as follows as of August 31, 2024:

Years Ending August 31,	Amount
2025	403,396
2026	417,311
2027	431,707
2028	452,084
2029	478,652
Thereafter	1,860,339
	4,043,489
Less present value discount	(650,305)
Operating lease liabilities	\$ 3,393,184