

EXTENSION ATTACHED

Form 990

OMB No. 1545-0047

Return of Organization Exempt From Income Tax

2010

Department of the Treasury
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)Open to Public
Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2010 calendar year, or tax year beginning , 2010, and ending

B Check if applicable:

- Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

Children's Rights, Inc.
330 Seventh Avenue, 4th Floor
New York, NY 10001

D Employer identification number

13-3801864

E Telephone number

(212) 683-2210

G Gross receipts \$ 4,957,941.

H(a) Is this a group return for affiliates? Yes No
 H(b) Are all affiliates included? Yes No
 If 'No,' attach a list. (see instructions)I Tax-exempt status 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 527

H(c) Group exemption number ►

J Website ► www.childrensrights.org

K Form of organization: Corporation Trust Association Other ► L Year of Formation: 1994 M State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Children's Rights is a national watchdog organization advocating on behalf of abused and neglected children in the United States.

2 Check this box ► <input type="checkbox"/>	if the organization discontinued its operations or disposed of more than 25% of its net assets.
3 Number of voting members of the governing body (Part VI, line 1a).	3 12
4 Number of independent voting members of the governing body (Part VI, line 1b).	4 11
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a).	5 48
6 Total number of volunteers (estimate if necessary).	6 15
7a Total unrelated business revenue from Part VIII, column (C), line 12.	7a 0.
b Net unrelated business taxable income from Form 990-T, line 34.	7b 0.

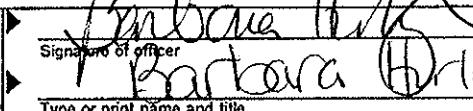
Revenue	Activities & Governance	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h).		1,357,004.	2,517,391.
9 Program service revenue (Part VIII, line 2g).		7,181,887.	2,285,040.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d).		75,218.	81,503.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).			
12 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12).		8,614,109.	4,883,934.

Expenses	Activities & Governance	Prior Year	Current Year
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3).			
14 Benefits paid to or for members (Part IX, column (A), line 4).		3,326,417.	3,944,619.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).			
16a Professional fundraising fees (Part IX, column (A), line 11e).		55,000.	
b Total fundraising expenses (Part IX, column (D), line 25) ►	1,056,883.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f).		1,323,117.	1,729,524.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).		4,704,534.	5,674,143.
19 Revenue less expenses. Subtract line 18 from line 12.		3,909,575.	-790,209.

Net Assets/Fund Balances	Activities & Governance	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16).		15,481,944.	14,746,002.
21 Total liabilities (Part X, line 26).		616,975.	650,161.
22 Net assets or fund balances. Subtract line 21 from line 20.		14,864,969.	14,095,841.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer  Barbara Hertoghs, CFO	Date 7/25/11
Type or print name and title.		

Paid Preparer Use Only	Print/Type preparer's name David C. Ashenfarb	Preparer's signature David C. Ashenfarb  9/19/11	Date 9/19/11	Check <input type="checkbox"/> if self-employed	PTIN N/A
	Firm's name ► SCHALL & ASHENFARB CPAS			Firm's EIN ► N/A	
	Firm's address ► 350 5TH AVE STE 5610 NEW YORK, NY 10118-0110			Phone no. (212) 268-2800	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 12/21/10

Form 990 (2010)

Application for Extension of Time To File an
Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ►
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I: Automatic 3-Month Extension of Time. Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only.... ►

All other corporations (including 1120-C filers), partnerships, REMCS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization Children's Rights, Inc.	Employer identification number 13-3801864
File by the due date for filing your return. See instructions.	Number, street, and room or suite number. If a P.O. box, see instructions. 330 Seventh Avenue, 4th Floor	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. New York, NY 10001	

Enter the Return code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of. ► Amy Driver

Telephone No. ► (212) 683-2210 FAX No. ► (212) 683-4015

- If the organization does not have an office or place of business in the United States, check this box..... ►

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box. ► . If it is for part of the group, check this box. ► and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15, 20 11, to file the exempt organization return for the organization named above.

The extension is for the organization's return for:

- calendar year 20 10 or
- tax year beginning _____, 20 ____, and ending _____, 20 _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.....	3a \$ 0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.....	3b \$ 0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.....	3c \$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)

05/09/2011

2010 Activity Report

Page 1

10:23 AM

Client CHILRTS - Children's Rights, Inc. EIN: 13-3801864
Federal: EFT and Payment/Refund Information - Not available until transmitted
Federal (Ext.): Even Return.....\$0

Activity

US - PASSED VALIDATION 05/09 (Current Status)

Previous Activity

Extension 13-3801864

US - ACCEPTED 05/06 (Current Status)

Previous Activity

- 05/06 Sent to the IRS
- 05/06 Received at Lacerte
- 05/06 Sent to Lacerte
- 05/06 Ready To Send
- 05/06 Passed Validation

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III.

- 1 Briefly describe the organization's mission:

See Schedule O

- 2 Did the organization undertake any significant program services during the year which were not listed on the prior

Form 990 or 990-EZ? Yes No

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
-
- No

If 'Yes,' describe these changes on Schedule O.

- 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 4,163,778, Including grants of \$) (Revenue \$ 2,285,040.)

See Schedule O

4b (Code:) (Expenses \$, including grants of \$) (Revenue \$)4c (Code:) (Expenses \$, including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)

(Expenses \$, including grants of \$) (Revenue \$)

4e Total program service expenses ► 4,163,778.

Part IV Checklist of Required Schedules

	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 X	
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 X	
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 Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8 X	
9 Did the organization report an amount in Part X, line 21; 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 term, permanent, or 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.		
a 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	
c 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 X	
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11e X	
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 X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a X	
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, XII, and XIII is optional	12b X	
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 X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? 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 assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16 X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 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 1c and 8a? If 'Yes,' complete Schedule G, Part II	18 X	
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 hospitals? If 'Yes,' complete Schedule H	20 X	
b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note, Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22	X
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	X
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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25.	24a	X
24b	b. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
24c	c. 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	
24d	d. Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d	
25a	a. Section 501(c)(3) and 501(c)(4) 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	X
25b	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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II.	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	28a	X
28a	a. A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28a	X
28b	b. A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b	X
28c	c. An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV.	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	29	X
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, Parts II, III, IV, and V, line 1.	34	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X
	a. 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.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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 in Schedule O for Part VI, lines 11 and 19? Note: All Form 990 filers are required to complete Schedule O.	38	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V.

- 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable..... **1a** 26
1b 0
- 1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings?..... **1c** X
- 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** 48
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.....
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?.....
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.....
- 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?.....
b If 'Yes,' enter the name of the foreign country: ► See Instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
- 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?.....
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?.....
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?.....
- 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?.....
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.....
- 7 Organizations that may receive deductible contributions under section 170(c).
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?.....
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?.....
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?.....
d If 'Yes,' indicate the number of Forms 8282 filed during the year..... **7d**
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.....
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.....
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?.....
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.....
- 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?..... **8** X
- 9 Sponsoring organizations maintaining donor advised funds.
a Did the organization make any taxable distributions under section 4966?.....
b Did the organization make a distribution to a donor, donor advisor, or related person?.....
- 10 Section 501(c)(7) organizations. Enter:
a Initiation fees and capital contributions included on Part VIII, line 12..... **10a**
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities..... **10b**
- 11 Section 501(c)(12) organizations. Enter:
a Gross income from members or shareholders..... **11a**
b Gross income from other sources (Do not net amounts due or paid to other sources against 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 1041?..... **12a**
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year..... **12b**
- 13 Section 501(c)(29) qualified nonprofit health insurance issuers.
a Is the organization licensed to issue qualified health plans in more than one state?.....
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**
c Enter the amount of reserves on hand..... **13c**
- 14a Did the organization receive any payments for indoor tanning services during the tax year?..... **14a** X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O..... **14b**

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 in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI.

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year.....	1a	12	
b Enter the number of voting members included in line 1a, above, who are independent.....	1b	11	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?.....	2	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.....	3	X	
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.....	4	X	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?.....	5	X	
6 Does the organization have members or stockholders?.....	6	X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?.....	7a	X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?.....	7b	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?.....	8a	X	
b Each committee with authority to act on behalf of the governing body?.....	8b	X	
9 Is there any officer, director or 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 in Schedule O.	9	X	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?.....	10a	X
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?.....	10b	
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?.....	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O		
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13.....	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?.....	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done.....See. Schedule O	12c	X
13 Does the organization have a written whistleblower policy?.....	13	X
14 Does the organization have a written document retention and destruction policy?.....	14	X
15 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?		
a The organization's CEO, Executive Director, or top management official.. See. Schedule .O.....	15a	X
b Other officers of key employees of the organization.	15b	X
If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?.....	16a	X
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?.....	16b	

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► NJ NY CT MS OK MA
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
► Barbara Hurleigh 330 Seventh Avenue, 4th Floor New York NY 10001 (212) 683-2210

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
 Check if Schedule O contains a response to any question 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 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Ex-Officio Board Member	President/Chairman	Secretary	Key Employee	Other Executive Officer	Employee of the organization			
(1) Marcia Robinson Lowry Pres./Exec. Dir.	40	X	X					233,842.	0.	53,371.
(2) Alan Myers Chairman	2	X	X					0.	0.	0.
(3) Robin Dahlberg Treasurer	2	X	X					0.	0.	0.
(4) Anne Strickland Squadro Secretary	2	X	X					0.	0.	0.
(5) James Stanton Director	2	X						0.	0.	0.
(6) Richard D. Emery Director	2	X						0.	0.	0.
(7) Lawrence J. Fox Director	2	X						0.	0.	0.
(8) Emmanuel Tchividjian Director	2	X						0.	0.	0.
(9) Daniel H. Galpern Director	2	X						0.	0.	0.
(10) Mark Lopez Director	2	X						0.	0.	0.
(11) Howard M. Maisel Director	2	X						0.	0.	0.
(12) Jordan Seaman Director	2	X						0.	0.	0.
(13) Ira Lustbader Assoc. Dir.	40				X			132,014.	0.	33,972.
(14) Susan Lambaise Assoc. Dir.	36				X			134,592.	0.	26,152.
(15) Joan Siffert Sr. Dir. of Oper.	40				X			203,088.	0.	24,259.
(16) Christopher Iseli Dir. of Comm.	40				X			114,342.	0.	21,974.
(17) Michael Bartosz Sr. Attorney	40				X			113,113.	0.	13,153.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Officer or director	Individual trustee	Key employee	Highest compensated employee			
(18)								
(19)								
(20)								
(21)								
(22)								
(23)								
(24)								
(25)								
(26)								
(27)								
(28)								
(29)								

1b Sub-total..... ► 930,991. 0. 172,881.
 c Total from continuation sheets to Part VII, Section A ► 0. 0. 0.
 d Total (add lines 1b and 1c)..... ► 930,991. 0. 172,881.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 6

- | | | |
|---|-----|----|
| | Yes | No |
| 3 | | X |
| 4 | X | |
| 5 | | X |
- 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual.....
 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual.....
 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person.....

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
Center for the Support of Fam 1107 Spring St # 2C Silver Spring, MD		178,150.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 1

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns.....	1a				
	b Membership dues.....	1b				
	c Fundraising events.....	1c 404,550.				
	d Related organizations.....	1d				
	e Government grants (contributions).....	1e				
	f All other contributions, gifts, grants, and similar amounts not included above.....	1f 2,112,841.				
	g Noncash contributions included in lns 1a-1f: \$					
	h Total. Add lines 1a-1f.....		2,517,391.			
PROGRAM SERVICE REVENUE	2a Attorneys' Fees.....	Business Code	2,267,663.	2,267,663.		
	b Program Income.....		17,377.	17,377.		
	c					
	d					
	e					
	f All other program service revenue.....					
	g Total. Add lines 2a-2f.....		2,285,040.			
	3 Investment income (including dividends, interest and other similar amounts).....		81,503.			81,503.
4 Income from investment of tax-exempt bond proceeds						
5 Royalties.....						
6a Gross Rents.....	(i) Real	(ii) Personal				
b Less: rental expenses						
c Rental income or (loss)....						
d Net rental income or (loss).....						
7a Gross amount from sales of assets other than inventory .	(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses.....						
c Gain or (loss).....						
d Net gain or (loss).						
8a Gross income from fundraising events (not including. \$ 404,550. of contributions reported on line 1c).	a	74,007.				
See Part IV, line 18	a	74,007.				
b Less: direct expenses	b	74,007.				
c Net income or (loss) from fundraising events.....						
9a Gross income from gaming activities. See Part IV, line 19.....	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory.....						
11a Miscellaneous Revenue	Business Code					
b						
c						
d All other revenue.....						
e Total. Add lines 11a-11d.....		4,883,934.	2,285,040.	0.	81,503.	
12 Total revenue. See instructions.....						

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) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22.				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	238,316	190,653	23,832	23,831
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0	0	0	0
7 Other salaries and wages.	2,936,691	2,198,593	237,247	500,851
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions).	184,701	138,991	15,187	30,523
9 Other employee benefits.	362,139	272,516	29,778	59,845
10 Payroll taxes.	222,772	167,640	18,318	36,814
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other.				
12 Advertising and promotion.				
13 Office expenses.				
14 Information technology.				
15 Royalties.				
16 Occupancy.	406,780	311,244	31,743	63,793
17 Travel.	290,897	283,350	3,065	4,482
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	38,551	29,010	3,171	6,370
23 Insurance.	15,308	8,715	6,593	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.).				
a Litigation Costs.	288,022	288,022		
b Office supplies & expense.	209,023	135,427	20,036	53,560
c Events.	123,233			123,233
d Professional fees.	97,201	7,700	40,496	49,005
e Computer support & maintenance.	96,369	68,609	7,391	20,369
f All other expenses.	164,140	63,308	16,625	84,207
25 Total functional expenses. Add lines 1 through 24f.	5,674,143	4,163,778	453,482	1,056,883
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X Balance Sheet

		(A) Beginning of year	(B) End of year
1	Cash – non-interest-bearing	244,981	7,601
2	Savings and temporary cash investments	3,869,670	12,205,636
3	Pledges and grants receivable, net	340,893	477,792
4	Accounts receivable, net	6,614,353	595,381
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part I of Schedule L.	5	
6	Receivables from other disqualified persons (as defined under section 4938(e)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations, or section 501(c)(9) voluntary employee beneficiary organizations (see instructions)	6	
A	Notes and loans receivable, net	7	
B	Inventories for sale or use	8	
C	Prepaid expenses and deferred charges	16,641	9,13,839
10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D.	763,745	
10b	b Less: accumulated depreciation	606,282	182,135
11	Investments – publicly traded securities	4,113,271	11,1,188,290
12	Investments – other securities. See Part IV, line 11	12	
13	Investments – program-related. See Part IV, line 11	13	
14	Intangible assets	14	
15	Other assets. See Part IV, line 11	15	100,000
16	Total assets. Add lines 1 through 15 (must equal line 34)	15,481,944	16,14,746,002
17	Accounts payable and accrued expenses	17	383,160
18	Grants payable	18	
19	Deferred revenue	19	
20	Tax-exempt bond liabilities	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D	21	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.	22	
23	Secured mortgages and notes payable to unrelated third parties	23	
24	Unsecured notes and loans payable to unrelated third parties	24	
25	Other liabilities. Complete Part X of Schedule D	25	233,815
26	Total liabilities. Add lines 17 through 25	26	616,975
N	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines	26	650,161
27	27 through 29 and lines 33 and 34		
28	Unrestricted net assets	27	13,209,984
29	Temporarily restricted net assets	28	374,828
Q	Permanently restricted net assets	29	885,857
R	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34		
S	Capital stock or trust principal, or current funds	30	
T	Paid-in or capital surplus, or land, building, or equipment fund	31	
U	Retained earnings, endowment, accumulated income, or other funds	32	
V	Total net assets or fund balances	33	14,095,841
W	Total liabilities and net assets/fund balances	34	14,746,002

BAA

Form 990 (2010)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI.

1 Total revenue (must equal Part VIII, column (A), line 12).....	1	4,883,934.
2 Total expenses (must equal Part IX, column (A), line 25).....	2	5,674,143.
3 Revenue less expenses. Subtract line 2 from line 1.....	3	-790,209.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).....	4	14,864,969.
5 Other changes in net assets or fund balances (explain in Schedule O)...See Schedule O.....	5	21,081.
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)).....	6	14,095,841.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII.

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
- If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?.....
- b Were the organization's financial statements audited by an independent accountant?.....
- c 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?.....
- If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:.....
- Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?.....
- b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.....

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

BAA

Form 990 (2010)

SCHEDULE A
(Form 990 or 990-EZ)

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. ► See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

Children's Rights, Inc.

Employer identification number

13-3801864

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 11, check only one box.)

- 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 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:
- 5 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).
- 7 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.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 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.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h.

a Type I b Type II c Type III – Functionally integrated d Type III – Other

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g (i)		
11g (ii)		
11g (iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

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 A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants.')...	3,121,001.	3,221,194.	2,538,092.	1,357,004.	2,517,391.	12,754,682.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.....						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge.....						0.
4 Total. Add lines 1 through 3....	3,121,001.	3,221,194.	2,538,092.	1,357,004.	2,517,391.	12,754,682.
5 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)...						3,081,193.
6 Public support. Subtract line 5 from line 4.....						9,673,489.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4.....	3,121,001.	3,221,194.	2,538,092.	1,357,004.	2,517,391.	12,754,682.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	67,980.	70,978.	77,437.	71,377.	62,172.	349,944.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.....						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).....						0.
11 Total support. Add lines 7 through 10.....						13,104,626.
12 Gross receipts from related activities, etc (see instructions).....					12	22,361,163.

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here..... ▶ **Section C. Computation of Public Support Percentage**

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)).....	14	73.8 %
15 Public support percentage from 2009 Schedule A, Part II, line 14.....	15	71.1 %

16a 33-1/3% support test - 2010. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization..... ▶ b 33-1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization..... ▶ 17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization..... ▶ b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization..... ▶ 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.... ▶

Part II Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

Section A. Public Support

Calendar year (or fiscal yr beginning in)*	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 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 organization'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.						
7a 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 Public support (Subtract line 7c from line 6).						

Section B. Total Support

Calendar year (or fiscal yr beginning in)*	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6.						
10a 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.						
11 Net income from unrelated business activities not included in 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 IV).						
13 Total support. (Add lines 9, 10, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%
19a 33-1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
b 33-1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		

Part IV Supplemental Information: Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

OMB No. 1545-0042

2010

Open to Public
Inspection

Supplemental Financial Statements

- Complete if the organization answered 'Yes' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
- Attach to Form 990. ► See separate instructions.

Employer identification number

Children's Rights, Inc.

13-3801864

Part II Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year.....		
2 Aggregate contributions to (during year).....		
3 Aggregate grants from (during year).....		
4 Aggregate value at end of year.....		

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part III Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply):	Held at the End of the Tax Year
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year:	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	\$ _____
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.
1b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 the following amounts relating to these items:
(i) Revenues included in Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- | | |
|----------------------------------------------------------------|------------------------------------------------------|
| a <input type="checkbox"/> Public exhibition | d <input type="checkbox"/> Loan or exchange programs |
| b <input type="checkbox"/> Scholarly research | e <input type="checkbox"/> Other _____ |
| c <input type="checkbox"/> Preservation for future generations | |

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

Amount
1a
1b
1c
1d

c Beginning balance.....

d Additions during the year.....

e Distributions during the year.....

f Ending balance.....

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance.....					
b Contributions.....					
c Net investment earnings, gains, and losses.....					
d Grants or scholarships.....					
e Other expenditures for facilities and programs.....					
f Administrative expenses.....					
g End of year balance.....					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- | | | |
|-----------------------------------|------------------------------|-----------------------------|
| (i) unrelated organizations | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (ii) related organizations | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land.....				
b Buildings.....				
c Leasehold improvements.....	471,742.	327,720.	144,022.	
d Equipment.....	269,554.	256,113.	13,441.	
e Other.....	22,449.	22,449.	0.	
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				157,463.

BAA

Schedule D (Form 990) 2010

Part VII Investments—Other Securities. See Form 990, Part X, line 12. N/A

(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)		
(I)		

Total. (Column (b) must equal Form 990, Part X, column (B), line 12.) ►

Part VIII Investments—Program Related. (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Total. (Column (b) must equal Form 990, Part X, column (B), line 13.) ►

Part IX Other Assets. (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) ►

Part X Other Liabilities. (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) Deferred rent	237,915.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	

Total. (Column (b) must equal Form 990, Part X, column (B), line 25.) ► 237,915.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1 Total revenue (Form 990, Part VIII, column (A), line 12)	4,883,934.
2 Total expenses (Form 990, Part IX, column (A), line 25)	5,674,143.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	-790,209.
4 Net unrealized gains (losses) on investments	21,081.
5 Donated services and use of facilities	
6 Investment expenses	
7 Prior period adjustments	
8 Other (Describe in Part XIV)	
9 Total adjustments (net). Add lines 4 through 8	21,081.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	-769,128.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1	4,940,094.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	21,081.
b Donated services and use of facilities	2b	35,079.
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	56,160.
3 Subtract line 2e from line 1	3	4,883,934.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	4,883,934.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	5,709,222.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	35,079.
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	35,079.
3 Subtract line 2e from line 1	3	5,674,143.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	5,674,143.

Part XIV Supplemental Information

Complete this part to 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 V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X-FIN 48 Footnote

The Organization has adopted the provisions of FASB ASC 740, Income Taxes, which applies to positions taken or expected to be taken in a tax return. Organizations are required to recognize the effects of tax positions if they are more likely than not of being sustained. The Organization does not believe its financial statements include any uncertain tax positions.

Part XIV Supplemental Information (continued)

Part III Fundraising Events. Complete if the organization answered 'Yes' to 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 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1 Gross receipts.....	478,557.		478,557.
	2 Less: Charitable contributions.....	404,550.		404,550.
	3 Gross income (line 1 minus line 2).....	74,007.		74,007.
DIRECT EXPENSES	4 Cash prizes.....			
	5 Noncash prizes.....			
	6 Rent/facility costs.....			
	7 Food and beverages.....			
	8 Entertainment.....			
	9 Other direct expenses.....	74,007.		74,007.
	10 Direct expense summary. Add lines 4 through 9 in column (d).....			74,007.
	11 Net income summary. Combine line 3, column (d), and line 10.....			

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
REVENUE	1 Gross revenue.....			
DIRECT EXPENSES	2 Cash prizes.....			
	3 Non-cash prizes.....			
	4 Rent/facility costs.....			
	5 Other direct expenses.....			
	6 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. Combine lines 1, column (d) and line 7.....			

9. Enter the state(s) in which the organization operates gaming activities:

a Is the organization licensed to operate gaming activities in each of these states?..... Yes No

b If 'No,' explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?..... Yes No

b If 'Yes,' explain: _____

11 Does the organization operate gaming activities with nonmembers?..... Yes 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 operated in:

a. The organization's facility 13a

b. An 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 ➤

15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?..... Yes No
b 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:

Name ► _____

Address

16. Gaming manager information:

Name: _____

Gaming manager compensation ➤ \$ _____

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b. 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 - \$

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization:

Children's Rights, Inc.

Employer identification number:
13-3801864

Part III Questions Regarding Compensation

- 1(a) Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

First-class or charter travel
 Travel for companions
 Tax indemnification and gross-up payments
 Discretionary spending account

Housing allowance or residence for personal use
 Payments for business use of personal residence
 Health or social club dues or initiation fees
 Personal services (e.g., maid, chauffeur, chef)

	Yes	No
1 b		
2	X	

- 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.....

- 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

- 3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

Compensation committee
 Independent compensation consultant
 Form 990 of other organizations

Written employment contract
 Compensation survey or study
 Approval by the board or compensation committee

4 a	X	
4 b	X	
4 c	X	

- 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment from the organization or a related organization?
- b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c Participate in, or receive payment from, an equity-based compensation arrangement?

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) and 501(c)(4) organizations must complete lines 5-9.

- 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If 'Yes' to line 5a or 5b, describe in Part III.

5 a	X
5 b	X

- 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If 'Yes' to line 6a or 6b, describe in Part III.

6 a	X
6 b	X

- 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III.

7	X
8	X

- 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.

- 9 If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2010

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 in 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 are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
Marcia Robinso 1	(i) 233,842. (ii) 0.	0.	0.	49,000.	4,371.	287,213.	0.
Ira Lustbader 2	(i) 132,014. (ii) 0.	0.	0.	8,279.	25,693.	165,986.	0.
Susan Lambaise 3	(i) 134,592. (ii) 0.	0.	0.	10,945.	15,207.	160,744.	0.
Joan Siffert 4	(i) 203,088. (ii) 0.	0.	0.	12,254.	12,005.	227,347.	0.
5	(i)						
6	(i)						
7	(i)						
8	(i)						
9	(i)						
10	(i)						
11	(i)						
12	(i)						
13	(i)						
14	(i)						
15	(i)						
16	(i)						

BAA

TEEA4102L 11/15/10

Schedule J (Form 990) 2010

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 7, and 8. Also complete this part for any additional information.

Schedule J (Form 990) 2010 Children's Rights, Inc. Part III Supplemental Information
Page 3

Rights also secured a legal victory against the efforts of child welfare officials in
 system to ensure the safety and well-being of children in its custody. Children's
 to take necessary actions to meet the legal obligation of the state-run child welfare
 dangerous and unstable situations once removed from their parents, care and failing
 violating the constitutional rights of children by routinely placing them in
 Massachusetts, on behalf of a class of 8,500 foster children in state custody, to
 year, Children's Rights launched a new legal reform effort against state officials in
 legislature unanimously repealed the challenged law. Also, in the first half of the
 success, when at the urging of state officials two weeks before trial, the state
 unconstitutional, intended with children's juvenile court hearings was a complete
 services. Children's Rights' efforts to halt implementation of a Tennessee law that
 in connection and secured a court order victory protecting those critical
 court a second time to block the closure of an important family preservation program
 neglected children in foster care. Early in the year, Children's Rights went to
 lawsuit that is headed toward trial, and took new action to protect abused and
 their objections in several systems, documented striking dangers in one form
 reform commitments against state officials who prematurely attempted to slip free of
 In 2010, Children's Rights continued to reverse the successful implementation of
 Form 990, Part III, Line 4a - Program Service Accomplishments

foster care, and adoption.
 legal action and policy initiatives to drive lasting reform in child protection.
 and neglected children in the United States. Since 1995, Children's Rights has used
 Children's Rights is a national watchdog organization advocating on behalf of abused
 Form 990, Part III, Line 1 - Organization Mission

2010 OMB No. 1545-0047 SUPPLEMENTAL INFORMATION TO FORM 990 OR 990-EZ	SCHEDULE O (Form 990 or 990-EZ) DEPARTMENT OF THE TREASURY Internal Revenue Service Form 990 or 990-EZ or to provide any additional information. Complete to provide information for responses to specific questions on Complaints to the organization for responses to specific questions on Name of the organization Employer identification number Children's Rights, Inc. 13-3801864
--------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Name of the organization

Children's Rights, Inc.

Employer identification number

13-3801864

Form 990, Part III, Line 4a - Program Service Accomplishments

decree, and similarly defeated efforts to prematurely exit from a longstanding reform lawsuit in Connecticut. In the second half of the year, significant progress in implementing court ordered child welfare reforms in Tennessee led to the renegotiation and approval of an "exit plan" that will, with compliance, allow the state to successfully end court oversight. Against continued opposition at every turn, fact-finding continued in Children's Rights' Oklahoma reform effort, with the organization documenting systemic failings in the safety and oversight of children in that foster care system. Additionally, progress reports showed sustained, significant improvements in Children's Rights efforts to improve legal representation for children in foster care in Atlanta (Fulton County), and by the end of the year, efforts were well underway toward launching a new reform lawsuit in Texas on behalf of more than 13,000 foster children trapped in that state child welfare system's "permanent foster care" program. In the policy area, Children's Rights added the experienced child welfare scholar William Meezan as the new head of the organization's policy and research operation, and the policy staff continued its work developing a series of "What Works" case studies to document successful efforts to reform public child welfare systems.

Form 990, Part VI, Line 11b - Form 990 Review Process

Management reviewed a draft of the form 990 with the audit/finance committee and provided edits to the tax preparer. After this process was performed, the form 990 was sent to the full board of directors prior to being filed with the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The organization has a "board approved" conflicts of interest policy. Each board member must fill out an annual declaration stating they had no conflicts or identifying the nature of their interested party transactions.

Name of the organization

Employer identification number

Children's Rights, Inc.

13-3801864

Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, Exec. Dir., or Top Mgmt

Each year, the executive committee reviews comparable salaries based on a recognized study and reviews the performance of the executive director to determine if the existing salary falls within these ranges. After a deliberation of this matter, a new proposed salary and benefit package is voted on. The minutes of the board of directors reflect the nature of this process.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Organizational documents are available upon request.

2010

Schedule O - Supplemental Information

Page 2

Client CHILRTS

Children's Rights, Inc.

13-3801864

7/11/11

12:04PM

**Form 990, Part XI, Line 5
Other Changes in Net Assets or Fund Balances**

Net Unrealized Gains or Losses on Investments.....	\$ 21,081.
Total	\$ 21,081.