# Form **990**

Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

and ending

OMB No. 1545-0047

Open to Public Inspection

Α	For ti	ne 20	012 calendar year, or tax year beginning and	ending									
В	Check applica	if ible:	C Name of organization		D Employer identifica	ation number							
Г	Add	ress	ALL OUR KIN, INC										
F	Nam chai	10	Doing Business As		06-15	39280							
F	Initia retu	aĺ	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	***************************************							
F	Terr	nin-	PO BOX 8477		(203)	772-2294							
F	atec Ame retu	anded			G Gross receipts \$	1,550,336.							
F		lica-	NEW HAVEN, CT 06530		H(a) is this a group reti								
	pen	ding	F Name and address of principal officer:PAIGE MACLEAN		for affiliates?	Yes X No							
			PO BOX 8477, NEW HAVEN, CT 06530		H(b) Are all affiliates inclu								
<u> </u>	Tax-e	xem	pt status: X 501(c)(3) 501(c) ( )	or 527	- ' '	st. (see instructions)							
			▶ WWW.ALLOURKIN.ORG		H(c) Group exemption	•							
			ganization: X Corporation Trust Association Other ▶	L Year	of formation: 1999 M								
	art I		ummary										
	4	<u> </u>		NING.	SUPPORTING A	ND							
Activities & Governance		1 Briefly describe the organization's mission or most significant activities: TRAINING, SUPPORTING AND SUSTAINING COMMUNITY CHILD CARE PROVIDERS IN ORDER TO ENSURE THAT											
nai	2		neck this box										
8	3		imber of voting members of the governing body (Part VI, line 1a)			11							
Ö	4		umber of independent voting members of the governing body (Part VI, line 1b)			11							
oğ Ç	5 5		tal number of individuals employed in calendar year 2012 (Part V, line 2a)			23							
iie	6		tal number of volunteers (estimate if necessary)			10							
o <u>ti</u> v	7		tal unrelated business revenue from Part VIII, column (C), line 12			0.							
₹			of unrelated business taxable income from Form 990-T, line 34			0.							
_		<i>D</i> : 10	A difficultied backfileds taxable free from the first own ode 1, files of 1, miles of 1, m		Prior Year	Current Year							
	. 8	Co	ontributions and grants (Part VIII, line 1h)	ļ	968,907.	1,537,649.							
Revenie	9		ogram service revenue (Part VIII, line 2g)	1	56,854.	12,540.							
ē	10		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		139.	147.							
å	11		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.							
	12		ital revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	i i	1,025,900.	1,550,336.							
	13		ants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.							
	14		enefits paid to or for members (Part IX, column (A), line 4)	0.	0.								
,,	۱		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		497,613.	636,408.							
Exnenses	16		ofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.							
a			otal fundraising expenses (Part IX, column (D), line 25) 71,0										
Ž LL	[ ] 17		her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		443,565.	497,907.							
			otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	,	941,178.	1,134,315.							
			evenue less expenses. Subtract line 18 from line 12		84,722.	416,021.							
7	89	110	svende less expenses. Cabhatt line 10 nomhrie 12	B	eginning of Current Year	End of Year							
Net Assets or	20	To	otal assets (Part X, line 16)	F	342,332.	777,143.							
ASS	21		otal liabilities (Part X, line 26)		37,062.	55,852.							
Net	22		et assets or fund balances. Subtract line 21 from line 20		305,270.	721,291.							
	art		Signature Block			, a = , a / a /							
٠			es of perjury, I declare that I have examined this return, including accompanying schedule	es and stater	nents, and to the best of my	knowledge and belief, it is							
			and complete. Declaration of preparer (other than officer) is based on all information of w			morriougo ana comor, no							
	,	J.,	A	,,,,,, p,,,,									
-Si	gn		Signature of officer	1	Date ,								
	ere		PAIGE MACLEAN, PRESIDENT Much VIII	VIII ec	11/1/20	A013							
1 10	<b></b>		Type or print name and title	Same	<del>' /* J                                  </del>								
		P	rint/Type preparer's name Preparer's signature	$0 \wedge 1$	Date Check	PTIN							
Pa	ıid	- 1	OHN F ONOFRIO, CPA JOHN F ONOFREO,	CPA	07/10/13 self-employed								
	eparei		irm's name KIRCALDIE RANDALL/& MCNAB/LLC	·	Firm's EIN	06-0415530							
	e Only		irm's address 605 WASHINGTON AVENUE		111111 0 4.01								
50		`	NORTH HAVEN, CT 06473-1187		Phone no. (2	203) 239-4478							
М	ay the		discuss this return with the preparer shown above? (see instructions)		[ + HOHO HO. \ Z	X Yes No							
	2001 1			ions		Form <b>990</b> (2012)							
40	I	~ · · · · ·	,,,,,,,	~		, will www (CU IC)							

232002 12-10-12

# Form 990 (2012) ALL OUR KIN, Part IV Checklist of Required Schedules

the organization described in section SO1(x)(s) or 4947(x)(1) (other than a private foundation)?  1				Yes	No
2 X S Ibit the organization required to complete Schedule 6, Sett 1 section 501(c)(3) organizations. Did the organization apage in libbity in patients on behalf of or in opposition to candidates for public office? If "Yas," complete Schedule 6, Part I S S S S S S S S S S S S S S S S S S	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Use the organization engage in direct or indirect political campaign activities on behalf of or in apposition to candidates for public office? If "Yes," camplete Schedule C, Part I    4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) section in effoot during the tax year? If "Yes," complete Schedule C, Part II    5 Is the organization a section 501(e)(4), 501(c)(6), 601(c)(6), 601(c)(		If "Yes," complete Schedule A			
Section 50 (Pi/Si) cransmatchins. Did the organization engage in lobbying activities, or have a section 50 (Pi) election in effect during the tax year? If Yes, "complete Schedule C, Part II   X   X   Section 50 (Pi/Si) organization as action 50 (Pi/Si) (Si) or 50 (Pi/Si) or 50 (Pi/Si) organization that receives membership dues, assessments, or similar amounts as defined in Prevenue Procedure 98-19? If Yes, "complete Schedule C, Part III   X   X   Section 50 (Pi/Si) or 50 (Pi/Si) or 50 (Pi/Si) organization that receives membership dues, assessments, or similar amounts as defined in Prevenue Procedure 98-19? If Yes, "complete Schedule C, Part III   S   X   X   Section 50 (Pi/Si) organization maintain any donor advised funds or any similar funds or accounts If Yes, "complete Schedule D, Part II   S   X   X   Section 50 (Pi/Si) organization receive or hold a conservation easement, including assessments to preserve open space, the environment, historical actuactures? If Yes, "complete Schedule D, Part II   S   X   X   X   X   X   X   X   X   X	2		2	X	
4 Section 50 (6/3) organizations. Did the organization engage in lobbying activities, or have a section 501 (ii) election in effect during the tax year? If "Yes," complete Schedule C, Part II set organization a section 501 (ii)(6), 501 (ii)(6), 601 (ii)(6), 601 (iii)(6), 601 (iii)(	3			į	
during the tax year? If "Yes," complete Schedule C, Part II   X   S   Is the organization a section SO (19(4), 50 10(5), or SO 10(6), o			3		<u>X</u>
Is the organization a section 601(c)(6), 501(c)(6), or 601(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part III	4				
smilar amounts as defined in Revonue Procedure 98-197 if "Yes," complete Schedule C, Part III of 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 II of the organization receive or hold a conservation essement, including assuments to preserve open space, the environment, historic land areas, or historic structures II "Nes," complete Schedule D, Part III of the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III of the organization report an amount in Part X, line 21, for escrow or outstodial 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 of the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-indowments? If "Yes," complete Schedule D, Part IV of the organization report an amount for Investments - program related in Part X, line 107 If "Yes," complete Schedule D, Part VI of the organization report an amount for investments - program related in Part X, line 107 If "Yes," complete Schedule D, Part VII of the organization report an amount for investments - program related in Part X, line 107 If "Yes," complete Schedule D, Part VIII of the organization report an amount for the assets in Part X, line 107 If "Yes," complete Schedule D, Part XIII of the organization report an amount for the assets in Part X, line 107 If "Yes," complete Schedule D, Part XIII of the organization report an amount for the assets in Part X, line 107 If "Yes," complete Schedule D, Part XIII of the organization report an amount for the assets in Part X, line 107 If "Yes," complete Schedule D, Part XIII of the organization separ			4		<u>X</u>
6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I Pid 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.  9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a oustodian for amounts not listed in Part X, or provide credit courseling, debt management, oredit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  10 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a oustodian for amounts not listed in Part X, or provide credit courseling, debt management, oredit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI.  10 Did the organization or sonser to any of the following questions is "Yes," then complete Schedule D, Part VI, If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  11 Did the organization report an amount for linestments - organizated in Part X, line 10? If "Yes," complete Schedule D, Part VII.  12 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.  2 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 XIII.  2 Did the organization report an amount for to 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 XIII.  2 Did the organization in cluded in consolidated financial statements for the tax year include a footnote that D, D, Part X X Y.  2 Did the organization separate or	5				
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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 III.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  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.  10 Did the organization, directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.  11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V.  12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  13 Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  14 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.  15 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 XIII.  16 Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization is separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X III.  17 Did the organization and program service activities outside the United States? If "Yes," complete Schedule D, Part X III.  18 Did the o	6	·			
Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  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, in erectic counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  If If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V, II, VIII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II  Did the organization report an amount for investments other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for investments other securities 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  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 VIII  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 VIII  Did the organization report an amount for other labilities 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 VIII  Did the organization report an amount for other labilities 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 VIII III X  Did the organization report an amount for other lab		·	6		<u>X</u>
B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III    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    10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V    11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V    12 Did the organization report an amount for linvestments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII    13 Did the organization report an amount for investments - program related in Part X, line 16? If "Yes," complete Schedule D, Part VII    14 Did the organization report an amount for other assets 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 VII    15 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 VII    16 Did the organization report an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part XII    17 Did the organization included in consolidated financial statements for the tax year include a footnote that addresses the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII    28 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule P, Part X I and XII is optional 1    29 Did the organization propers as ex	7				7.7
Schedule D, Part III 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 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IVI, 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 12 Did the organization report an amount for investments - organ 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 13 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 VIII 14 Did the organization report an amount for other liabilities 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 X 11 Did the organization's liability for uncertain tax positions under FIN 84 [Sch 70/1] If "Yes," complete Schedule D, Part X 11 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11 Did the organization as achord described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule D, Part X 11 Did the organization have aggregate revenues or expenses of more than \$1,000 from grantmaking, fundraishing, business, investment, and program service activities outside the United States? 13 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			7		χ_
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 9 X 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V 1, If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 1 11 If X 2 10 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 11 X 2 10 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 VII 11 X 11 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 X 11 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 11 X 12 Did 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 X and XII is optional 12b X 12b X 12b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outlets the United States? If "Yes," complete	8		_		3.7
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_	Schedule D, Part III	8		
B	9				
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V   11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, IVII, VIII, III, X, 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   11b X   11b V   11b					v
endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, X, or X as applicable.  2 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  2 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  2 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  3 Did the organization report an amount for other labilities 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 VIII  4 Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X  5 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's islability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  5 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII  6 Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional  7 Did the organization maintain an office, employees, or agents outside of the United States?  8 Did the organization maintain an office, employees, or agents outside of the United States?  9 Did the organization maintain an office, employees, or agents outside of the United States?  1 Did the organization report on Part X, column (A), line 3, more than \$5,000 of grants or assistance to any organization or	40	, , , , , , , , , , , , , , , , , , , ,	9		- 22
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.  2 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  2 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  2 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 VII  3 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 X III III III III III III III III III	10		10		v
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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  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  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X	17		17		x
1c and 8a? If "Yes," complete Schedule G, Part II  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  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X	12	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines	<u>'</u>		
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  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X	30		18		х
complete Schedule G, Part III  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X	10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. line 9a? If "Yes."		İ	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			19		Х
	20a				
		If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		103	140
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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			ĺ
	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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			1
	Schedule K. If "No", go to line 25	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) 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
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, highest 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? 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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	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	ļ	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	ļ	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	ļ	X
35a		35a	<u> </u>	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	ļ	ļ
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	<b> </b>	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	<del> </del>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	<u> </u>	

orm	990 (2012) ALL OUR KIN, INC 06-1539	280	P	age 5
Par				
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 29			
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	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 23			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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)?	4a		X
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.			
5а		5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C		5c		
6a				3,7
	any contributions that were not tax deductible as charitable contributions?	6a		X
b		C		
-	were not tax deductible?	6b		-
7	Organizations that may receive deductible contributions under section 170(c).	7-		х
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?	7a 7b		_A
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		
С	to file Form 8282?	7c		x
ئە		10		- 22
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	The state of the s	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	_	ļ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а				
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	1		
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	•	13a	<u> </u>	ļ
	Note. See the instructions for additional information the organization must report on Schedule O.			
b				
	organization is licensed to issue qualified health plans	4		

14b Form **990** (2012)

Х

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

ALL OUR KIN, INC

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			X						
Sect	tion 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									
	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 in Schedule 0.									
b	Enter the number of voting members included in line 1a, above, who are independent									
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?									
4	The state of the s									
5										
6	Did the organization have members or stockholders?	6		X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	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, 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						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
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?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a		12a	X							
b		12b		X						
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c		X						
13	Did the organization have a written whistleblower policy?	13	X							
14	Did 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?									
а	The organization's CEO, Executive Director, or top management official	15a	X							
b	Other officers or key employees of the organization	15b	X	ļ						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			1						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			3,5						
	taxable entity during the year?	16a		X						
þ	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	<u> </u>	<u></u>						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed CT									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	эle							
	for public inspection. Indicate how you made these available. Check all that apply.									
	X Own website X Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	d finai	ncial							
	statements available to the public during the tax year.	*								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who person of the									
	IULIANA SCHEIR, IB & CO. ACCOUNTING AND BOOKKEEPING - (203) 891	- 12	08							
23200	1111 HARTFORD TURNPIKE, NORTH HAVEN, CT 06473									

12-10-12

### 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.

(A)	(B)		(C Posi	<b>)</b>			(D)	(E)	(F)	
Name and Title	Average	(do	not c	tion more	than	one	Reportable	Reportable	Estimated	
	hours per	box	unle: cer an	ss pei	rson i	is bot	h an	compensation	compensation	amount of
	week				John	17.0.41	100,	from the	from related organizations	other
	(list any hours for	direct				_		1	(W-2/1099-MISC)	compensation from the
	related	se or	stee			nsate		(W-2/1099-MISC)	(11 2) 1000 111100)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	adwo				and related
	below	idua	tution	55	Кеу етрюуее	esto	je je			organizations
	line)	皇	Insti	Officer	Key	Highest compensated employee	쥰			
(1) TIM GRIBBLE	2.00								_	_
TREASURER		X		X				0.	0.	0.
(2) P. MARIE GIBSON	1.00							_	_	_
NETWORK REPRESENTATIVE		X				ļ		0.	0.	0.
(3) SUSAN STONE	1.00								_	_
DIRECTOR		X						0.	0.	0.
(4) KIM RINEHART	1.00							_		_
DIRECTOR		X						0.	0.	0.
(5) MARJORIE S ROSENTHAL	1.00									_
DIRECTOR		X					_	0.	0.	0.
(6) CARLA M HORWITZ	2.00	l								_
DIRECTOR		X	ļ			-	ļ	0.	0.	0.
(7) PAIGE MACLEAN	2.00								_	
PRESIDENT	4 00	X		Х		-	_	0.	0.	0.
(8) JOHN WARECK	1.00									
DIRECTOR	4 00	X			<u> </u>	-	<u> </u>	0.	0.	0.
(9) LOUISE ABATE	1.00	۱.,							_	_
NETWORK REPRESENTATIVE	0.00	X				-	-	0.	0.	0,
(10) SARAH BOONE	2.00	-		77				0.	0.	0.
SECRETARY	1 00	X	<del> </del>	Х				0.		0.
(11) MAGALIS MARTINEZ	1.00	x				ł	ĺ	0.	0.	0.
DIRECTOR	1.00	14						<b>V</b> •	V •	
(12) JASON PRICE	1.00	x						0.	0.	0.
DIRECTOR	1.00	<u>^</u>	-					V •	V •	0.
(13) ANIKA SINGH LEMAR	1.00	X						0.	0.	0.
DIRECTOR	45.00	127			┢	1	$\vdash$			
(14) JESSICA SAGER	43.00	1			x			70,500.	0.	0.
EXECUTIVE DIRECTOR (15) JANNA WAGNER	45.00	T			1	1	<u> </u>	,0,500.		0,
CHIEF KNOWLEDGE AND LEARNING OFFICER		1			x			70,500.	0.	0.
CHILL MONDEDGE AND DESCRIPTION OFFICER					† <del></del>	1	1	, , , , , , , , , ,		
		1								
	h	-1	1	1	1	1	1	ř.	1	1

Part VII   Section A. Officers, Directors, True (A)   Name and title	(B) Average hours per week (list any hours for related organizations below	tee or director glo xxx op)	not el	(C Posi heck i ss pel d a d	ition more rson lrecto		one h an tee)	( <b>D)</b> Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	C	(F) Estimate amount of other compensations from the organization and relater	of tion e ion ed
	line)	Indiv	insti	Officer	Key e	High	Form					
		_										
1b Sub-total							<b>L</b>	141,000.				0.
c Total from continuation sheets to Part \ d Total (add lines 1b and 1c)								141,000.	C			0.
2 Total number of individuals (including but compensation from the organization	not limited to th	1086	liste	ed al	bov	e) wl	no r	eceived more than \$100	0,000 of reportable			0
										r	Yes	No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for										. 3	3	х
4 For any individual listed on line 1a, is the sand related organizations greater than \$15	•								the organization		1	х
5 Did any person listed on line 1a receive or	accrue compe	nsal	ion i	from	any	y uni	relat	ted organization or indiv				v
rendered to the organization? If "Yes," con Section B. Independent Contractors											5	X
<ol> <li>Complete this table for your five highest of the organization. Report compensation for</li> </ol>										nsatio	on from	
(A) Name and busines								(B) Description of s		Com	(C) pensatio	 n
rano and scomos		TA.	ON	<u> </u>								
									·			
					,, ,							
2 Total number of independent contractors	-	not i	imite	ed to		_	ste	d above) who received r	nore than			***************************************
\$100,000 of compensation from the orga	nization 🕨	***************************************				0				Fo	rm <b>990</b> (	2012

			Check if Schedule O conta	ains a response :	to any question ir	this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ants	1 :	—- а	Federated campaigns	1a					
ran		b	Membership dues	1b					
S E		C	Fundraising events						
ii ii			Related organizations						
S,E	,		Government grants (contribut	***************************************	502,340.				
E S			All other contributions, gifts, gran						
the sta			similar amounts not included above		035,309.				
ξÖ			Noncash contributions included in lines						
a Q		•	Total. Add lines 1a-1f			L,537,649.			
			, , , , , , , , , , , , , , , , , , ,		Business Code				
ø	2	а	CONFERENCES		611710	12,540.	12,540.		
r Vic		b							
Se		c		·					
am		d		•					
ogr R		е							
ď		1	All other program service reve	nue					
		g	Total. Add lines 2a-2f		<b>▶</b>	12,540.		· · · · · · · · · · · · · · · · · · ·	
	3		Investment income (including	dividends, intere	est, and		4		
			other similar amounts)			147.			147.
	4		Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5		Royalties		<b>&gt;</b>				
				(i) Real	(ii) Personal				
	6	a	Gross rents						
		b	Less: rental expenses						
	1		Rental income or (loss)						
	1		Net rental income or (loss)						
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory						
		b	Less: cost or other basis						
			and sales expenses						
			Gain or (loss)						
	į.		Net gain or (loss)						
ne	8	а	Gross income from fundraisin	- :					
/en			including \$	of					
æ			contributions reported on line	•					
Other Revenue Contributions, Gifts, Gran  Revenue and Other Similar Amount on the contributions of the contribution of the contributions of the contribution of			Part IV, line 18		1 1				
₹			Less: direct expenses						
			Net income or (loss) from fund	_	·····				
	9	а	Gross income from gaming ad Part IV, line 19						
		<u>.</u>	Less: direct expenses						
			Net income or (loss) from gan						
	40		Gross sales of inventory, less	•					
	טו	a	and allowances						
		h	Less: cost of goods sold						
			Net income or (loss) from sale		. 1		· ·		
	-		Miscellaneous Reven		Business Code				
	11	2	Miscella 10003 10001						
	' '	b							
		C							
		4	All other revenue						
		4	Total. Add lines 11a-11d						
	12		Total revenue. See instructions.			1,550,336	12,540.	0	. 147.
2320 12-10	09			egyerini ya ili afiyi					Form <b>990</b> (2012)

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 to any question in this Part IX (B) Program service (C) Management and (**D)** Fundraising Do not include amounts reported on lines 6b, Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 ... Benefits paid to or for members ..... Compensation of current officers, directors, 141,000. 141,000 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) 240,730 94,696. 49,663. 385,089 Other salaries and wages \_\_\_\_\_ 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 64,531 52,915 11.616. Other employee benefits 45,788. 33,224 8,242. 4,322. Payroll taxes 10 Fees for services (non-employees): 11 Management b Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 150 150. 12 Advertising and promotion Office expenses 13 1,613. 7,330. 5,717. 14 Information technology Royalties ..... 15 16 Occupancy 21,690. 21,690 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 49,998 49,998. Conferences, conventions, and meetings 19 20 .,,...... Payments to affiliates \_\_\_\_\_ 21 22 Depreciation, depletion, and amortization ..... 16,609. 16.609 Insurance 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 0. 130,051 0 130,051. a CHILD CARE EHS 0. 84,550 0 84,550. OUTSIDE SERVICES 8,856. 40,256. 31,400. 0. RENT 38,513. 0. 38,513. 0 d EDUCATIONAL MATERIALS 70,482. 17,054. 108,760. 21,224 e All other expenses 71,039. 917,029. 146,247 Total functional expenses. Add lines 1 through 24e 1.134.315. 25 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)

**Balance Sheet** Part X Check if Schedule O contains a response to any question in this Part X (A) Beginning of year End of year 141,649. 621,616. 1 Cash - non-interest-bearing 100,258. 59,996. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 107,142. 15,102. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 3,229. 10,769. 4ssets 7 Notes and loans receivable, net 8 Inventories for sale or use 6,099. 0. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 20,776. basis. Complete Part VI of Schedule D \_\_\_\_\_\_ 10a 20,776. 20,776. 10c b Less: accumulated depreciation 10b 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 2,000. 10,063. 15 Other assets. See Part IV, line 11 15 342,332. 777,143. Total assets. Add lines 1 through 15 (must equal line 34) 16 2,062. 15,852. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of 40,000. 35,000. 25 37,062. 55,852. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 721,291. 305,270. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds ...... 32 32 305,270 721,291. 33 Total net assets or fund balances 33 777,143. 342,332 Total liabilities and net assets/fund balances Form 990 (2012)

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	990 (2012) ALL OUR KIN, INC	06-153	<u> 9280</u>	Pag	ge <b>12</b>
Par	Tt XI Reconciliation of Net Assets				·····
	Check if Schedule O contains a response to any question in this Part XI				
		1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,55	<u>0,3</u>	<u> 36.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,13		
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>21.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30	5,2	70.
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 in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	72	1,2	91.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question 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 in Schedule	Ο.			
2a			. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				
	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	Х	
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	Separate basis Consolidated basis X Both consolidated and separate basis				ļ
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
•	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				

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

232012