

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No. 1545-0047
2012
 Open to Public Inspection

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.

A For the 2012 calendar year, or tax year beginning 07-01-2012, 2012, and ending 06-30-2013

B Check if applicable:
 Address change
 Name change
 Initial return Terminated Amended return Application pending

C Name of organization: GREENWICH HOUSE INC
 Doing Business As:
 Number and street (or P.O. box if mail is not delivered to street address): 224 WEST 30TH STREET NO 302
 Room/suite:
 City or town, state or country, and ZIP + 4: NEW YORK, NY 10001
 E Telephone number: (212) 991-0003
G Gross receipts \$ 11,300,519

F Name and address of principal officer:
 ROY LEAVITT
 224 WEST 30TH STREET NO 302
 NEW YORK, NY 10001

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: WWW.GREENWICHHOUSE.ORG

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)

H(c) Group exemption number ▶ **K** Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: 1902 **M** State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities: GREENWICH HOUSE WAS FOUNDED IN 1902 AS A SETTLEMENT HOUSE TO HELP GREENWICH VILLAGE'S GROWING IMMIGRANT POPULATION ADJUST TO LIFE IN NEW YORK CITY. ALTHOUGH NEEDS OF THE CITY CONTINUE TO CHANGE, THE MISSION OF GREENWICH HOUSE REMAINS CONSTANT: TO HELP INDIVIDUALS AND FAMILIES LEAD MORE FULFILLING LIVES BY OFFERING SOCIAL AND HEALTH SERVICES, CULTURAL AND EDUCATION PROGRAMS, AND OPPORTUNITIES FOR CIVIC INVOLVEMENT TO NEW YORKERS OF ALL AGES AND BACKGROUNDS. EACH YEAR, GREENWICH HOUSE PROVIDES NEARLY 12,000 NEW YORKERS WITH SOCIAL, MEDICAL AND CULTURAL PROGRAMS, ALL AIMED AT PROVIDING PERSONAL GROWTH AND ENRICHMENT.

2 Check this box

3 Number of voting members of the governing body (Part VI, line 1a)	21
4 Number of independent voting members of the governing body (Part VI, line 1b)	20
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	232
6 Total number of volunteers (estimate if necessary)	318
7a Total unrelated business revenue from Part VIII, column (C), line 12	14,953

Net unrelated business taxable income from Form 990-T, line 34 **7b** 6,787

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	5,230,902	4,402,000
	9 Program service revenue (Part VIII, line 2g)	5,398,655	5,062,450
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	53,261	31,743
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	843,305	916,301
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,526,123	10,412,494
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,804,801	7,119,824
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 425,521		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,392,777	3,962,523
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,197,578	11,082,347	
19 Revenue less expenses. Subtract line 18 from line 12	-671,455	-669,853	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	7,034,319	6,650,996
		Beginning of Current Year	End of Year

21 Total liabilities (Part X, line 26)	4,192,939	4,147,403
22 Net assets or fund balances. Subtract line 21 from line 20	2,841,380	2,503,593

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: ROY LEAVITTE, EXECUTIVE DIRECTOR/CEO
Date: 2014-05-02
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: FREDERICK H ROTHMAN
Preparer's signature: FREDERICK H ROTHMAN
Date: self employed
Check if self employed
PTIN: P01275277
Firm's name: LOEB & TROPER LLP
Firm's EIN: 13-1517563
Firm's address: 655 THIRD AVENUE 12TH FLOOR
Phone no. (212) 867-4000

NEW YORK, NY 10017
May the IRS discuss this return with the preparer shown above? (see instructions) Yes No
For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2012)
Form 990 (2012) Page 2

Part III
Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: GREENWICH HOUSE WAS FOUNDED IN 1902 AS A SETTLEMENT HOUSE TO HELP GREENWICH VILLAGE'S GROWING IMMIGRANT POPULATION ADJUST TO LIFE IN NEW YORK CITY. ALTHOUGH NEEDS OF THE CITY CONTINUE TO CHANGE, THE MISSION OF GREENWICH HOUSE REMAINS CONSTANT: TO HELP INDIVIDUALS AND FAMILIES LEAD MORE FULFILLING LIVES BY OFFERING SOCIAL AND HEALTH SERVICES, CULTURAL AND EDUCATION PROGRAMS, AND OPPORTUNITIES FOR CIVIC INVOLVEMENT TO NEW YORKERS OF ALL AGES AND BACKGROUNDS. EACH YEAR, GREENWICH HOUSE PROVIDES NEARLY 12,000 NEW YORKERS WITH SOCIAL, MEDICAL AND CULTURAL PROGRAMS, ALL AIMED AT PROVIDING PERSONAL GROWTH AND ENRICHMENT.

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 organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code:) (Expenses \$ 9,227,758 including Revenue \$ 5,441,556) AFTER A LEASE CANCELLATION AND A CONSTRUCTION PROJECT, GREENWICH H I T'S MUCH NEEDED METHADONE MAINTI TREATMENT PROGRAM (MMTP) FOR NEA THE CLINIC, WHICH SERVES CLIENTS O' SUBSTANCE ABUSE, WAS CLOSED, UNAE NEW CLIENTS WHILE USING TEMPORAR' BETH ISRAEL HOSPITAL. THE PROGRAM OPENED WITH A GOAL TO REACH FULL C PRIMARY OBJECTIVE OF MMTP IS TO HEI OVERCOME ADDICTION TO NARCOTICS I SUBSTANCES. IN ADDITION, THE PROGF MEDICAL CARE, PSYCHIATRIC EVALUATI FAMILY AND GROUP COUNSELING, KEY E PROGRAM (KEEP), AND VOCATIONAL SEI
4b	(Code:) (Expenses \$ including grants) THE AIR CONDITIONING SYSTEM AT THE HOUSE POTTERY WAS UPGRADED IN FYI MADE THE FACILITIES MORE COMFORTA STUDENTS, FACULTY AND VISITORS, PAI DURING THE WARMER MONTHS. THIS UI ALLOWED FOR PROGRAM EXPANSION DI TERM.
4c	(Code:) (Expenses \$ including grants) GREENWICH HOUSE SUCCESSFULLY INT AFTER SCHOOL PROGRAM, TAKEN OVER CLOSING CHILDREN'S AID SOCIETY AT I CENTER IN ORDER TO MAINTAIN THIS V. COMMUNITY RESOURCE. THE PROGRAM 75 STUDENTS IN ITS FIRST YEAR OF OPI POPULAR CLASSES SUCH AS ARCHITECT AND PHOTOGRAPHY BEING WELL SUBSC GREENWICH HOUSE ALSO GRANTED TUI TO APPROXIMATELY 25% OF THE PARTIC BASED ON FINANCIAL NEED, MAKING TR AVAILABLE TO A DIVERSE POPULATION (LARGELY FROM THE NEIGHBORHOOD PU
4d	Other program services (Describe i (Expenses \$ including grants of \$)
4e	Total program service expenses

Form 990 (2012) Part IV Checklist of Required Schedules Page 3

	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	Yes
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Yes
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
No 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	5
4 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	6	
5 No Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		

6		7		No		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		8		No		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				Yes		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, VII, VIII, IX, or X as applicable.	
11a		a		Yes		Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	
11b		b		No		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.	
11c		c		No		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.	
11d		d		Yes		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.	
11e		e		Yes		Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	
11f		f		Yes		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.	
12a		a		Yes		Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	
12b		b				Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	
13		13		No		14a	
14a		14a		No		Did the organization maintain an office, employees, or agents outside of the United States?	
14b		b		No		Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	
15		15		No		16	
16		16		No		Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	
17		17		No		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.	
18		18		No		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).	
19		19		Yes		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.	
20a		20a		No		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		20a		No		Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b Form 990 (2012) Page 4

Form 990 (2012) Part IV Checklist of Required Schedules (continued)

21

Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

21 No 22

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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 No

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 Yes 24a

Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25

24a No b

Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

24b 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 d

Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

24d 25a

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 No

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

No 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

No 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

No 27 No 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):

a

A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

28a No

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

28b No

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 No

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

29 Yes 30

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

30 Yes 31

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

31 No 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 No 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 No 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** Yes

35a

Did the organization have a controlled entity within the meaning of section 512(b)(13)? **35a** Yes

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** Yes

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**

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 **38**

37 No **38** No
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 Yes Form **990** (2012)

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

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable **1a** 74

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable **1b** 0

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? **1c**

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** 232

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**

2b Yes Did the organization have unrelated business gross income of \$1,000 or more during the year?

3a Yes **b** If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O

3b Yes **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** No

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? **5a**

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? **5b** No

c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? **5c**

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 as charitable contributions? **6a**

No **b** If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **6b**

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? **7a**

Yes **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? **7b** Yes **c**

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? **7c** No

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? **7e**

No **f** Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7f** No **g**

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as **g**

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**

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, **g**
 **8** **g**
Sponsoring organizations maintaining donor advised funds.

a

Did the organization make any taxable distributions under section 4966? **9a**

b Did the organization make a distribution to a donor, donor advisor, or related person? **9b**

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. **13a**

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** No

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O **14b**

Form 990 (2012)

Part VI Check if Schedule O contains a response to any question in this Part VI
Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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	21		
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 O.		b		
Enter the number of voting members included in line 1a, above, who are independent	1b	20		
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	2	Yes	
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			
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No	6
Did the organization have members or stockholders?				6
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			
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		No	8
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		Yes	
b Each committee with authority to act on behalf of the governing body?	8b			
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			

9 No

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

10a Did the organization have local chapters, branches, or affiliates? **10a**

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

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 **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a**

Did the organization have a written conflict of interest policy? If "No," go to line 13 **12a** Yes

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? **12b** Yes

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**

13 Did the organization have a written whistleblower policy? **13** Yes **14**

Did the organization have a written document retention and destruction policy? **14**

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 **15a** Yes

b Other officers or key employees of the organization **15b** Yes

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**

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status to such arrangements? **16b**

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **18** Upon request Other (explain in Schedule O)

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) **19** available for public inspection. Indicate how you made these available. Check all that apply.

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **ROY LEAVITT 224 WEST 30TH STREET SUITE 302 NEW YORK NY 10001 (212) 991-0003** Form **990** (2012) Page **7**

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

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

- List all of the organization's current officers, directors, trustees, key employees, or highest compensated employees within the organization's tax year.
- List all of the organization's 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 or any related organization.
- 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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
(1) EDWARD ADLER VICE CHAIR	.50	X		X			0	0	
(2) ELISSA L KRAMER CHAIR	.50	X		X			0	0	
(3) GEORGE A DAVIDSON VICE CHAIR	.50	X		X			0	0	
(4) JAN-WILLEM VAN DEN DORPEL SECRETARY	.50	X		X			0	0	
(5) SAMIR H HUSSEIN TREASURER	.50	X		X			0	0	
(6) ROY L LEAVITT EXECUTIVE DIRECTOR/CEO	30.00 5.00	X		X		150,133	25,022	30,352	
(7) MARY ANN EDDY BOARD MEMBER	.50	X				0	0	0	
(8) JANE R CROTTY BOARD MEMBER	.50	X				0	0	0	
(9) ALISON									

Own website Another

BERKE..... BOARD MEMBER	.50	X									0	0	0
(10) DIANE C KOEPPEL..... BOARD MEMBER	.50	X									0	0	0
(11) KATHLEEN A MUNDY..... VICE CHAIR	.50	X									0	0	0
(12) PATRICIA M PAZ..... BOARD MEMBER	.50	X									0	0	0
(13) ROBERT F WRIGHT..... BOARD MEMBER	.50	X									0	0	0
(14) SOOHYUNG KIM..... BOARD MEMBER	.50	X									0	0	0
(15) CHRISTOPHER KIPLOK..... BOARD MEMBER	.50	X									0	0	0
(16) JOAN RAPPOPORT ROSENFELD..... BOARD MEMBER	.50	X									0	0	0
(17) LAURA VALEROSO..... BOARD MEMBER	.50	X									0	0	0

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Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
(18) PAMELA C SCOTT..... BOARD MEMBER	.50	X					0	0	0
(19) MYRNA CHAO..... BOARD MEMBER	.50	X					0	0	0
(20) CHRISTINE GRYGIEL- WEST..... BOARD MEMBER	.50	X					0	0	0
(21) MARK S RUDD..... BOARD MEMBER	.50	X					0	0	0
(22) TANYA JACOBS..... CFO	30.00 5.00			X			108,142	18,023	12,792
(23) ANDREA S NEWMAN..... DIRECTOR OF DEVELOPMENT	35.00				X		116,025	0	11,672
(24) MICHAEL SIEGELL..... MEDICAL DIRECTOR	35.00				X		137,875	0	11,880
(25) GAIL REID..... DIRECTOR OF BEHAVIORAL HEALTH SERVICES	35.00				X		108,180	0	32,790

1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)					620,355		43,045		99,486

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

No 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 **Yes**

3 **No 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 **5**

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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description services
THOMPSON HINE LLP 335 MADISON AVENUE 12TH FLOOR NEW YORK NY 100174611	LEGAL

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

Form 990 (2012)

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Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a	-		
	b Membership dues 1b	-		
	c Fundraising events 1c	240,755		
	d Related organizations 1d	-		
	e Government grants (contributions) 1e	3,493,067		
	f All other contributions, gifts, grants, and similar amounts not included above 1f	668,178		
	g Noncash contributions included in lines 1a-1f:\$	70,854		
	h	4,402,000		
Total. Add lines 1a-1f ▶				
Program Service Revenue	Business Code			
	2a SOCIAL SERVICES AND CLIENT FEES	621400	3,021,375	3,021,375
	b PROGRAM TUITION	611600	2,041,075	2,041,075
	c			
	d			
	e			
	f All other program service revenue .			
g	5,062,450			
Total. Add lines 2a-2f ▶				
Other Revenue	3	31,682		31,682
Investment income (including dividends, interest, and other similar amounts) ▶				
4				
Income from investment of tax-exempt bond proceeds . . ▶				
5				
Royalties ▶				
6a Gross rents	(i) Real	684,178		
	(ii) Personal			
	b Less: rental expenses	116,093		
	c Rental income or (loss)	568,085		568,085
d	568,085			
Net rental income or (loss) ▶				
7a Gross amount from sales of assets other than investment and other property	(i) Securities	655,512		
	(ii) Other			
	b	655,451		
	c	61		
d	61			61
Net gain or (loss)				
8a Gross income from fundraising events (not including \$240,755 of contributions reported on line 1c). See Part IV, line 18 a		56,860		
	b Less: direct expenses b	116,481		
	c	-59,621		-59,621
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					
Miscellaneous Revenue					
11a <u>MGT. FEE- REL. EX. ORGANIZATION</u>		561000	379,106	379,106	
b <u>POTTERY SALES</u>		611710	14,953		14,953
c <u>OTHER INCOME</u>		900099	13,778		13,778
d All other revenue					
e					
Total. Add lines 11a-11d		407,837			
12					
Total revenue. See Instructions.		10,412,494	5,441,556	14,953	553,985

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

(A) Total expenses (B) Program service expenses (C) Management and general expenses

1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	406,655	516,624	109,969	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(d)(3)(B)				
7 Other salaries and wages	5,586,742	189,263	302,254	6,078,259
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	105,124	12,379	2,893	120,396
9 Other employee benefits				
10 Payroll taxes	41,596	404,545	7,490	355,459
11 Fees for services (non-employees):				
a Management				
b Legal	41,582	86,811	175	45,054
c Accounting	73,058	73,058		
d Lobbying	29,997	29,997		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	116,138	855,104	7,565	731,401
12 Advertising and promotion		20,124	185	19,939
13 Office expenses	98,857	1,123,107	39,458	984,792
14 Information technology	978	9,120	290	7,852

15	Royalties			
16	Occupancy	1,141,909	732,476	
	358,310 51,123			
17	Travel	65,281	64,652	
	62 567			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials			
19	Conferences, conventions, and meetings			
20	Interest	77,004	77,004	
21	Payments to affiliates			
22	Depreciation, depletion, and amortization		95,652	
	91,586 13 4,053			
23	Insurance		183,845	
	136,385 42,280 5,180			
24	Other expenses. Itemize expenses not covered 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.)			
a	BAD DEBT	110,017	110,017	
b				
c				
d				
e	All other expenses	91,494	69,306	
	17,900 4,288			
25	Total functional expenses. Add lines 1 through 24e	11,082,347	9,227,758	
		1,429,068	425,521	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).			

Part X Balance Sheet

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

Assets	1	Cash <input type="checkbox"/> non-interest-bearing		1		
	2	Savings and temporary cash investments	499,801	2	332,542	
	3	Pledges and grants receivable, net	1,200,946	3	1,316,150	
	4	Accounts receivable, net	498,499	4	413,030	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6	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 instructions). Complete Part II of Schedule L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges	97,334	9	72,127	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		10a	6,476,517	
	b	Less: accumulated depreciation	3,869,313	2,721,544	10c	2,607,204
	11	Investments—publicly traded securities	1,802,115	11	1,558,521	
	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	214,080	15	351,422		
16	Total assets. Add lines 1 through 15 (must equal line 34)	7,034,319	16	6,650,996		

(A) Begin of year

Liabilities 17 Accounts payable and accrued expenses 663,738 17 588,885

18	Grants payable		18	
19	Deferred revenue	1,657,165	19	1,786,576
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	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	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties	1,202,654	24	1,102,560
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule	669,382	25	669,382
26	Total liabilities. Add lines 17 through 25	4,192,939	26	4,147,403

Net Assets or Fund Balances Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34.

27	Unrestricted net assets	739,068	27	430,007
28	Temporarily restricted net assets	666,051	28	637,325
29	Permanently restricted net assets	1,436,261	29	1,436,261
30	Capital stock or trust principal for current funds		30	
31	Paid-in or capital surplus, or land, building or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	2,841,380	33	2,503,593
34	Total liabilities and net assets/fund balances	7,034,319	34	6,650,996

Form 990 (2012)

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Part XI Reconciliation of Net Assets

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

1 Form 990, Special Condition Description:			
2	Total revenue (must equal Part VIII, column (A), line 12)		10,412,494
2	Total expenses (must equal Part IX, column (A), line 25)		11,082,347
3	Revenue less expenses. Subtract line 2 from line 1		-669,853
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		2,841,380
5	Net unrealized gains (losses) on investments		302,725
6	Donated services and use of facilities		13,387
7	Investment expenses		
8	Prior period adjustments		
9	Other changes in net assets or fund balances (explain in Schedule O)		15,954
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))		2,503,593

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

Financial Statements and Reporting

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?
 No Yes

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis

Were the organization's financial statements audited by an independent accountant?
 No Yes
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

Separate basis Consolidated basis Both consolidated and separate basis

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?

c		
2c	Yes	

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

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?

		3a
3a	Yes	

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

3b	Yes
-----------	-----

Additional Data

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Form **990** (2012)

Software ID:
Software Version:

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

Department of the Treasury
Internal Revenue Service

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



Name of the organization
GREENWICH HOUSE INC

Employer identification number

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: _____
- 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 to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box 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 - Non-functionally integrated

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).

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

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) **Yes**

No and (iii) below, the governing body of the supported organization? **11g(i)**

(ii) A family member of a person described in (i) above? **11g(ii)**

(iii) A 35% controlled entity of a person described in (i) or (ii) above? **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 col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

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

Section A. Public Support Check 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. (c) 2010 (d) 2011 (e) 2012 (f) Total

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3						
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).						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4.						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).						
11 Total support (Add lines 7 through 10).						
12 Gross receipts from related activities, etc. (see instructions)					12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box

Section A. Completion of Public Support Percentage ▶

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2011 Schedule A, Part II, line 14 **15**

16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

b 33 1/3% support test—2011. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box

17a 10% facts-and-circumstances test—2012. If the organization did not check the 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—2011. If the organization did not check the box on line 13, 16a, or 16b, 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 lines 13, 16a, 16b, 17a, or 17b, check this box and see instructions in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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

Section A. Public Support Check 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. (c) 2010 (d) 2011 (e) 2012 (f) Total

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,999,010	3,254,557	4,167,635	5,230,902	4,402,000	22,054,104
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.	8,500,436	9,173,630	7,992,025	5,398,655	5,062,450	36,127,196
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.	13,499,446	12,428,187	12,159,660	10,629,557	9,464,450	58,181,300
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						0
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.						0
c Add lines 7a and 7b.						0
8 Public support (Subtract line 7c from line 6.)						58,181,300

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6.	13,499,446	12,428,187	12,159,660	10,629,557	9,464,450	58,181,300
10 Gross income from interest,						

10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	660,298	890,160	733,062	724,462	715,860	3,723,842
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.	660,298	890,160	733,062	724,462	715,860	3,723,842
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.			7,830	9,323	6,787	23,940
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	274,521	308,196	239,355	262,613	392,884	1,477,569
13	Total support. (Add lines 9, 10c, 11, and 12.)	14,434,265	13,626,543	13,139,907	11,625,955	10,579,981	63,406,651

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check the box and **stop here.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15
	91.760 %	
16	Public support percentage from 2011 Schedule A, Part III, line 15	16
	91.960 %	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17
	5.870 %	
18	Investment income percentage from 2011 Schedule A, Part III, line 17	18
	5.610 %	

19a 33 1/3% support tests—2012. 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

33 1/3% support tests—2011. 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

~~**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).

Facts And Circumstances Test

Explanation

SCHEDULE A, PART IV, SUPPLEMENTAL INFORMATION: SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME: MANAGEMENT FEE OF \$379,106 CHARGED TO BARROW STREET BY GREENWICH HOUSE. MISCELLANEOUS INCOME OF \$13,778

Additional Data Return to Form

Software ID:
Software Version:

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

OMB No. 1545-0047

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

2012

Name of the organization GREENWICH HOUSE INC

Employer identification number

Organization type (check one):

Filers of: Section: Form 990 or 990-EZ [] 501(c)() (enter number) organization

Check if your organization is covered by the General Rule or a Special Rule (a)(1) nonexempt charitable trust not treated as a private foundation. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

[] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one or more contributors for the purpose of the General Rule and a Special Rule. See instructions.

Special Rules

[] 501(c)(3) taxable private foundation

[] For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Cat. No. 30613X

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization GREENWICH HOUSE INC

Employer identification number

13-5562204

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Table with 4 columns: (a) No., (b) Name, address, and ZIP + 4, (c) Total contributions, (d) Type of contribution. Includes rows for RESTRICTED contributions.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there are noncash contributions)
		\$	Person <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there are noncash contributions)
		\$	Person <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there are noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization
GREENWICH HOUSE INC
Employer identification number
13-5562204

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---------------------	---	--	-------------------

\$

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Page 4

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Page 4

Name of organization GREENWICH HOUSE INC	Employer identification number 13-5562204
--	---

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he
---------------------	---------------------	-----------------	-----------------------------------

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or more for the year. (Enter this information once. See instructions.) ▶ \$
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he
---------------------	---------------------	-----------------	-----------------------------------

Transferee's name, address, and ZIP 4 (e) Transfer of gift Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he
---------------------	---------------------	-----------------	-----------------------------------

Transferee's name, address, and ZIP 4 (e) Transfer of gift Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he
---------------------	---------------------	-----------------	-----------------------------------

Transferee's name, address, and ZIP 4 (e) Transfer of gift Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he
---------------------	---------------------	-----------------	-----------------------------------

Transferee's name, address, and ZIP 4 (e) Transfer of gift Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Additional Data

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Software ID:
Software Version:

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

OMB No. 1545-0047

2012

Open to Public Inspection

- If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign and Lobbying Activities): Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c)(3) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.
- If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying): Complete Parts I-B and C below. Do not complete Part I-A.
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete I-B and C below. Do not complete Part I-A.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete I-B and C below. Do not complete Part I-A.
- If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 48 (Proxy Tax): Complete Part III.
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization
GREENWICH HOUSE INC

Employer identification number

Part I-A

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. **2**

Political expenditures ▶ **3** Yes No No \$

Volunteer hours Yes No

Part I-B

Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ **2** Yes No \$

Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ **3** \$

If the organization incurred a section 4955 tax, did it file Form 4720 for this year? **4a**

Was a correction made? **b**

If "Yes," describe in Part IV.

Part I-C

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ **2** \$

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ **3** \$

Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b. ▶ **4** \$

Did the filing organization file **Form 1120-POL** for this year? **5**

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part III.

(A) Name	(B) Address	(C) EIN	(D) Amount paid from filing organization's funds. If none, enter -0-	(E) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and limited control provisions apply. **Limits on Lobbying Expenditures**
(The term "expenditures" means amounts paid or incurred.)

1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	
c	Total lobbying expenditures (add lines 1a and 1b)	
d	Other exempt purpose expenditures	
e	Total exempt purpose expenditures (add lines 1c and 1d)	
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	

If the amount on line 1c, column (c) or (b) is the lobbying nontaxable amount for

If the amount on line 1e, column (a) or (b) is: the lobbying nontaxable amount is:

Not over \$500,000 20% of the amount on line 1e.

Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.

Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.

Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.

Over \$17,000,000 \$1,000,000.

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a. If zero or less, enter -0-

i Subtract line 1f from line 1c. If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?
 Yes No

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2012

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h))

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	No	Yes	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	No		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	No		
c Media advertisements?	No		
d Mailings to members, legislators, or the public?	No		
e Publications, or published or broadcast statements?	No		
f Grants to other organizations for lobbying purposes?	No		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	No		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	No		
i Other activities?	Yes		29,997
j Total. Add lines 1c through 1i			29,997
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Yes

No		
1	Were substantially all (90% or more) dues received nondeductible by members?	1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

1	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid) .	
a	Current year	2a
b	Carryover from last year	2b
c	Total	2c
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5	Taxable amount of lobbying and political expenditures (see instructions)	5

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES:	PART II-B, LINE 1:	THE LOBBYING FOCUSED ON OBTAINING FUNDS FOR PROGRAMS AND CAPITAL IMPROVEMENTS.

Schedule C (Form 990 or 990EZ) 2012

Additional Data

Return to Form

Software ID:
Software Version:

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047 2012 Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization GREENWICH HOUSE INC

Employer identification number

Part I

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 acco

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 private inurement or private inurement?

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).

- Preservation of land for public use (e.g., recreation or education)
Preservation of an historically important land area
Protection of natural habitat
Preservation of a certified historic structure
Preservation of open space

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.

Table with 2 columns: Description and Held at the End of. Rows 2a, 2b, 2c, 2d.

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Yes No

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? 6

7 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

8 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

9 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)?

10 In Part XIII, 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.

11 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 1a

12 Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1b

13 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 the following information: (i)

14 Revenues included in Form 990, Part VIII, line 1. \$

15 Assets included in Form 990, Part X. \$ 2

16 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

17 Revenues included in Form 990, Part VIII, line 1. \$

18 Assets included in Form 990, Part X. \$

19 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Form 990) 2012

Page 2

Schedule D (Form 990) 2012 Page 2

Part III

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

21 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):

- Public exhibition
Loan or exchange programs
Scholarly research
Other ...

22 Preservation for future generations 4

23 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5

24 During the year, did the organization solicit or receive donations of art, historical treasures or other similar

Part IV ~~to be sold to raise funds rather than to be maintained as part of the organization's collection?~~

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.
 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1a
 Yes No b

If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c	
Beginning balance	
1c	
d	
Additions during the year	
1d	
e	
Distributions during the year	
1e	
f	
Ending balance	
1f	

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

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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 y
1a	Beginning of year balance	1,753,989				
	1,806,881	1,569,601	1,435,961	1,087,066		
b	Contributions		300	348,895		
c	Net investment earnings, gains, and losses			254,027		
	-52,892	237,280	133,340			
d	Grants or scholarships					
e	Other expenditures for facilities and programs			122,780		
f	Administrative expenses					
g	End of year balance	1,885,236				
	1,753,989	1,806,881	1,569,601	1,435,961		

2
 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a
 Board designated or quasi-endowment ▶ _____
b
 Permanent endowment ▶ 76.180 %
c
 Temporarily restricted endowment ▶ 23.820 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) unrelated organizations Yes No
3a(i) No
(ii) related organizations 3a(ii) No
b
 If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4
 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI
Land, Buildings, and Equipment. See Form 990, Part X, line 10.
 Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumula depreciat

1a	Land		
b	Buildings	3,558,952	1,988,849
	1,570,103		
c	Leasehold improvements	1,190,223	1,146,446
	43,777		
d	Equipment	775,949	717,990
	57,959		
e	Other	951,393	16,028
	935,365		

b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	116,093	
e	Add lines 2a through 2d			2e
	116,093			
3	Subtract line 2e from line 1			3
	11,082,347			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b			4c
	0			
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5
	11,082,347			

Part XIII
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, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS:	PART V, LINE 4:	GREENWICH HOUSE'S PERMANENTLY RESTRICTED NET ASSETS CONSIST OF ENDOWMENT FUND ASSETS TO BE HELD IN PERPETUITY. THE INCOME FROM THE ASSETS CAN BE USED TO SUPPORT GREENWICH HOUSE'S CHILDREN'S SERVICES, GENERAL OPERATING, LEADERSHIP AWARDS, AND MUSIC SCHOOL PROGRAMS.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48:	PART X, LINE 2:	GREENWICH HOUSE HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. PERIODS ENDING JUNE 30, 2010 AND SUBSEQUENT REMAIN SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES.
PART XI, LINE 2D - OTHER ADJUSTMENTS:		CHANGE IN BENEFICIAL INTEREST 15,954. EXPENSES RELATING TO RENTAL INCOME ACTIVITY 116,093.
PART XII, LINE 2D - OTHER ADJUSTMENTS:		EXPENSES RELATING TO RENTAL INCOME ACTIVITY 116,093.

Schedule D (Form 990) 2012

Additional Data

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Software ID:
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Revenue			
			297,615
2	Less: Contributions . .		
		189,337	
		51,418	
		240,755	
3	Gross income (line 1 minus line 2) . . .		
		30,690	
		26,170	
		56,860	
Direct Expenses	4	Cash prizes . . .	
5	Noncash prizes . .		
		58,431	
		58,431	
6	Rent/facility costs . .		
		14,027	
		28,800	
		42,827	
7	Food and beverages .		
		12,423	
		12,423	
8	Entertainment . . .		
9	Other direct expenses .		
		998	
		1,802	
		2,800	
10	Direct expense summary. Add lines 4 through 9 in column (d)		116,481
11	Net income summary. Combine line 3, column (d), and line 10.		-59,621

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.

Line	(a) Bingo
	(b) Pull tabs/Instant bingo/progressive bingo

Rever

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 ___

7

Direct expense summary. Add lines 2 through 5 in column (d)

8

Net gaming income summary. Combine lines 1 and 7 in column (d)

9

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

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

If "No," explain:

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

If "Yes," explain:

Indicate the percentage of gaming activity operated in: No

13 Indicate the percentage of gaming activity operated in:

13a	a The organization's facility
13b	b An outside facility

Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Yes No

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ __ and the amount of gaming revenue retained by the third party ▶ \$ __.

b

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** Yes No

a

Mandatory distributions:

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? **b**

Enter the amount of distributions required under state law 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).

Part	Form Reference	Explanation

Software ID:

Software Version:

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047
2012
Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
GREENWICH HOUSE INC

Employer identification number

Part I
Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/>	First-class or charter travel	<input type="checkbox"/>	Housing allowance or residence for personal use
<input type="checkbox"/>	Travel for companions	<input type="checkbox"/>	Payments for business use of personal residence
<input type="checkbox"/>	Tax identification and gross-up payments	<input type="checkbox"/>	Health or social club dues or initiation fees
<input type="checkbox"/>	Discretionary spending account	<input type="checkbox"/>	Personal services (e.g., maid, chauffeur, chef)

If any of the boxes in 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?		
		2	

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

<input type="checkbox"/>	Independent compensation consultant	<input checked="" type="checkbox"/>	Compensation survey or study
<input type="checkbox"/>	Form 990 of other organizations	<input checked="" type="checkbox"/>	Approval by the board or compensation committee

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:

<input type="checkbox"/>	a Receive a severance payment or change-of-control payment?		4a
<input type="checkbox"/>	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b
<input type="checkbox"/>	c Participate in, or receive payment from, an equity-based compensation arrangement?		4c

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

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:

<input type="checkbox"/>	a The organization?		5a
<input type="checkbox"/>	b Any related organization?		5b

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:

<input type="checkbox"/>	a The organization?		6a
<input type="checkbox"/>	b Any related organization?		6b

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.

<input type="checkbox"/>	7	No
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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.

<input type="checkbox"/>	9	No
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For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

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. (A) Base compensation (B)(i)-(iii) for each individual is reported on Form 990, Part VII, (C) Bonus and other reportable compensation (D) Other reportable compensation (E) Total of (B) and (D) (F) Total of (B) and (D) (G) Compensation reported as deferred in prior Form 990

		(i)	(ii)	(iii)				
		Base compensation	Bonus & incentive compensation	Other reportable compensation				
(1) ROY L LEAVITTE EXECUTIVE DIRECTOR/CEO	(i)	148,775	0	1,358	0	26,016	176,149	0
	(ii)	24,796	0	226	0	4,336	29,358	0

Schedule J (Form 990) 2012

Part III Supplemental Information

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

Additional Data

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Software ID:
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SCHEDULE M
(Form 990)

Noncash Contributions

OMB No. 1545-0047

2012

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**

Department of the Treasury
Internal Revenue Service

Open to Public Inspection

Name of the organization
GREENWICH HOUSE INC

Employer identification number
13-5562204

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	4	9,150	SELLING PRICE
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		1,700	SELLING PRICE
5 Clothing and household goods	X		46,901	SELLING PRICE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	20	12,423	SELLING PRICE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (HEALTH, BEAUTY)	X	1	80	SELLING PRICE
26 Other ▶ (JEWELRY)	X	1	600	SELLING PRICE
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? **30a** Yes No

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? **31**

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **32a** Yes No

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also, complete this part for any additional information.

METHOD FOR DETERMINING NUMBER OF CONTRIBUTIONS:	NUMBER OF CONTRIBUTIONS	NUMBER OF ITEMS RECEIVED	COMBINATION OF BOTH	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS OF CONTRIBUTIONS:

Software ID:
Software Version:

efile Public Visual Render | ObjectID: 201421339349305557 - Submission: 2014-05-13 | TIN: 13-5562204

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection
2012

Name of the organization
GREENWICH HOUSE INC

Employer identification number

13-5562204	Identifier	Return Reference	Explanation
		FORM 990, PART VI, SECTION A, LINE 2	GEORGE DAVIDSON AND CHRIS KIPLOK ARE RESPECTIVELY PARTNER AND SENIOR COUNSEL IN THE SAME LAW FIRM.
		FORM 990, PART VI, SECTION B, LINE 11	THE CHIEF FINANCIAL OFFICER REVIEWED THE RETURN PRIOR TO SUBMISSION
		FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY. THE CHAIR OF THE BOARD OF DIRECTORS AND THE EXECUTIVE DIRECTOR/CEO REVIEW THE ANSWERS TO DETERMINE IF A CONFLICT EXISTS. ANY MEMBER WITH A CONFLICT OF INTEREST IS EXCLUDED FROM DISCUSSIONS AND VOTING ON ANY MATTER PERTAINING TO THE MEMBER'S CONFLICT OF INTEREST.
		FORM 990, PART VI, SECTION B, LINE 15	THE GREENWICH HOUSE' INC. BOARD OF DIRECTORS ANNUALLY REVIEWS THE SALARY OF THE EXECUTIVE DIRECTOR AT ITS ANNUAL MEETING IN OCTOBER. TO DETERMINE SALARY, IT REVIEWS PUBLISHED SALARY SURVEYS CONDUCTED ON COMPARABLE NONPROFIT ORGANIZATIONS AND OTHER WIDELY AVAILABLE PUBLISHED SALARY DATA. THESE DELIBERATIONS ARE DONE IN EXECUTIVE SESSION, WITHOUT THE EXECUTIVE DIRECTOR/CEO PRESENT AND RECORDED BY THE CHAIR OF THE HUMAN RESOURCES COMMITTEE OF THE BOARD OF DIRECTORS. THE GREENWICH HOUSE BOARD OF DIRECTORS ANNUALLY REVIEWS THE SALARIES OF ALL EMPLOYEES EARNING \$85,000 OR MORE. TO DETERMINE SALARY, IT REVIEWS PUBLISHED SALARY SURVEYS CONDUCTED ON COMPARABLE NONPROFIT ORGANIZATIONS AND OTHER WIDELY AVAILABLE PUBLISHED SALARY DATA. THESE DELIBERATIONS ARE DONE IN EXECUTIVE SESSION, WITH THE EXECUTIVE DIRECTOR/CEO PRESENT, AND RECORDED BY THE CHAIR OF THE HUMAN RESOURCES COMMITTEE OF THE BOARD OF DIRECTORS. SALARIES WERE LAST REVIEWED IN OCTOBER 2012.
		FORM 990, PART VI, SECTION C, LINE 19	AUDITED FINANCIAL STATEMENTS ARE AVAILABLE AT GREENWICH HOUSE, INC. WEBSITE.
CHANGES IN NET ASSETS OR FUND BALANCES:	FORM 990, PART XI, LINE 9:		CHANGE IN VALUE OF BENEFICIAL INTEREST IN REMAINDER TRUST 15,954.
	FORM 990, PART XII, LINE 2C:		THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

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Cat. No. 51056K

Schedule O (Form 990 or 990-EZ) 2012

Additional Data

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization GREENWICH HOUSE INC

Employer identification number 13-5562204

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Table with 6 columns: (a) Name, address, and EIN; (b) Primary activity; (c) Legal domicile; (d) Total income; (e) End-of-year assets; (f) Direct controlling entity.

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

Table with 7 columns: (a) Name, address, and EIN; (b) Primary activity; (c) Legal domicile; (d) Exempt Code section; (e) Public charity status; (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity?

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Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

Table with 11 columns: (a) Name, address, and EIN; (b) Primary activity; (c) Legal domicile; (d) Direct controlling entity; (e) Predominant income; (f) Share of total income; (g) Share of end-of-year assets; (h) Disproportionate allocations; (i) Code V/UBI amount; (j) General or managing partner; (k) Percentage ownership.

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

Table with 8 columns: (a) Name, address, and EIN; (b) Primary activity; (c) Legal domicile; (d) Direct controlling entity; (e) Type of entity; (f) Share of total income; (g) Share of end-of-year assets; (h) Percentage ownership.

Schedule R (Form 990) 2012

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Table with 2 columns: Question (1a-1q) and Yes/No response.

