

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the **2018** calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ACKERMAN INSTITUTE FOR THE FAMILY		D Employer identification number 13-1923959
	Doing business as		E Telephone number 212-879-4900
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	936 BROADWAY		G Gross receipts \$ 9,524,936.
	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10010		
F Name and address of principal officer: MARTHA FLING SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	

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

J Website: ▶ WWW.ACKERMAN.ORG

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: 1960 **M** State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE INSTITUTE IS DEDICATED TO THE STUDY, DIAGNOSIS AND TREATMENT OF FAMILY RELATIONSHIP PROBLEMS		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	25
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	25
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	63
	6 Total number of volunteers (estimate if necessary)	6	25
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 38	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,400,682.	1,451,839.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,973,520.	1,825,970.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	955,828.	601,319.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	280,995.	532,863.
		4,611,025.	4,411,991.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	51,238.	57,650.
	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)	2,691,559.	3,329,092.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	63,000.	93,000.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 473,441.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,678,123.	1,839,808.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,483,920.	5,319,550.	
19 Revenue less expenses. Subtract line 18 from line 12	127,105.	-907,559.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	24,852,033.	24,277,269.
	22 Net assets or fund balances. Subtract line 21 from line 20	476,950.	376,701.
	24,375,083.	23,900,568.	

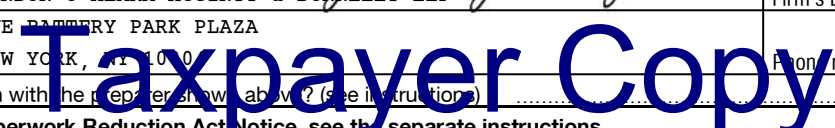
Part II Signature Block

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	Date
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name JAMES J. REILLY	Preparer's signature <i>James J. Reilly</i>	Date 5/1/2020	Check if self-employed <input type="checkbox"/>	PTIN P00183769
	Firm's name ▶ CONDON O'MEARA MCGINTY & DONNELLY LLP	Firm's EIN ▶ 13-3628255	Phone no. 212-661-7777		
	Firm's address ▶ ONE PARKWAY PARK PLAZA NEW YORK, NY 10002				

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



Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 3,207,397. including grants of \$ 57,650.) (Revenue \$ 1,089,741.) EDUCATION AND WORKSHOPS (SEE SCHEDULE O).

4b (Code:) (Expenses \$ 1,034,596. including grants of \$) (Revenue \$ 743,429.) CLINIC SERVICES (SEE SCHEDULE O).

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

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 4,241,993.

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Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and financial reporting.

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Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 covering various organizational requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question number, Yes, No. Rows 1a, 1b, 1c regarding Form 1096 and gaming winnings.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

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

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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; b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
MICHELE BURFEIND, THE ACKERMAN INSTITUTE FOR THE FAMILY, 936 BROADWAY, NEW YORK, NY 10011

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below 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	Former			
(1) MARTHA FLING CHAIRMAN	3,00	X		X				0.	0.	0.
(2) IRA SALLEN VICE CHAIR	3,00	X		X				0.	0.	0.
(3) ROBERT C. RUCKH TREASURER	3,00	X		X				0.	0.	0.
(4) ALFRED G. FELIU SECRETARY	3,00	X		X				0.	0.	0.
(5) LINDA DISHY DIRECTOR	3,00	X						0.	0.	0.
(6) HARRIET HABERT DIRECTOR	3,00	X						0.	0.	0.
(7) DAYAN KAZI DIRECTOR	3,00	X						0.	0.	0.
(8) GREGORY T. ROGERS DIRECTOR	3,00	X						0.	0.	0.
(9) LESLIE ROBERTS DIRECTOR	3,00	X						0.	0.	0.
(10) THOMAS G. KAHN DIRECTOR	3,00	X						0.	0.	0.
(11) DORIS C. KEMPNER DIRECTOR	3,00	X						0.	0.	0.
(12) DEBORAH WERNER DIRECTOR	3,00	X						0.	0.	0.
(13) JEANETTE MONNINGER DIRECTOR	3,00	X						0.	0.	0.
(14) ALICE K. NETTER DIRECTOR	3,00	X						0.	0.	0.
(15) DANIEL ROCKER DIRECTOR	3,00	X						0.	0.	0.
(16) PAULA K. OPPENHEIM DIRECTOR	3,00	X						0.	0.	0.
(17) ARTHUR MASLOW DIRECTOR	3,00	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 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	Former			
(18) CLYDE BROWNSTONE DIRECTOR	3.00	X						0.	0.	0.
(19) JEANNIE ACKERMAN CURHAN DIRECTOR	3.00	X						0.	0.	0.
(20) SHERI SANDLER DIRECTOR	3.00	X						0.	0.	0.
(21) STEPHEN SOKOLOFF DIRECTOR	3.00	X						0.	0.	0.
(22) ARNOLD SYROP DIRECTOR	3.00	X						0.	0.	0.
(23) IMKE OSTER DIRECTOR	3.00	X						0.	0.	0.
(24) NICOLE POTEAT DIRECTOR	3.00	X						0.	0.	0.
(25) JANINE WEISENBECK DIRECTOR	3.00	X						0.	0.	0.
(26) GISELLE ACEVEDO CEO/PRESIDENT	40.00			X				132,860.	0.	2,450.
1b Sub-total								132,860.	0.	2,450.
c Total from continuation sheets to Part VII, Section A								723,037.	0.	53,377.
d Total (add lines 1b and 1c)								855,897.	0.	55,827.

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 6

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
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? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

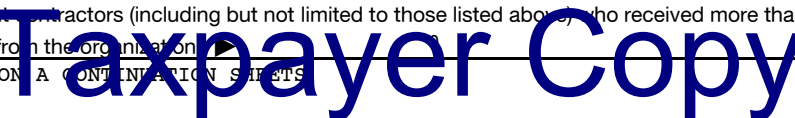
Section B. Independent Contractors

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 of services	(C) Compensation
NONE		

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

SEE PART VII, SECTION A CONTINUATION SHEETS



Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	426,807.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,025,032.				
	g Noncash contributions included in lines 1a-1f: \$		31,070.				
	h Total. Add lines 1a-1f		1,451,839.				
	Program Service Revenue	2 a TUITION AND FEES	Business Code 900099	1,147,391.	1,147,391.		
b PATIENT SERVICES		900099	678,579.	678,579.			
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			1,825,970.				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		330,187.			330,187.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	113,013.				
		(ii) Personal					
		b Less: rental expenses	0.				
		c Rental income or (loss)	113,013.				
	d Net rental income or (loss)		113,013.			113,013.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	5,179,048.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	4,907,916.				
		c Gain or (loss)	271,132.				
	d Net gain or (loss)		271,132.			271,132.	
	8 a Gross income from fundraising events (not including \$ 426,807. of contributions reported on line 1c). See Part IV, line 18	a	617,679.				
		b Less: direct expenses	205,029.				
c Net income or (loss) from fundraising events			412,650.			412,650.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a MISC. INCOME	900099	7,200.	7,200.				
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11c		7,200.				
12 Total revenue. See instructions		4,411,901.	1,833,100.	0.	1,126,982.		

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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 or note to any line 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	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	57,650.	57,650.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	505,328.	428,431.	33,883.	43,014.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,334,247.	1,978,414.	156,780.	199,053.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,876.	1,597.	123.	156.
9 Other employee benefits	313,636.	267,105.	20,521.	26,010.
10 Payroll taxes	174,005.	148,190.	11,385.	14,430.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	37,264.	30,290.	5,186.	1,788.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	93,000.			93,000.
f Investment management fees	73,858.		73,858.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	168,571.	137,023.	23,464.	8,084.
12 Advertising and promotion				
13 Office expenses	135,868.	98,493.	19,893.	17,482.
14 Information technology	83,533.	60,119.	13,497.	9,917.
15 Royalties				
16 Occupancy	261,845.	182,743.	58,829.	20,273.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	145,251.	139,236.	3,751.	2,264.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	398,644.	278,215.	89,565.	30,864.
23 Insurance	53,404.	37,271.	11,998.	4,135.
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 HONORARIUMS AND RESEARC	371,325.	370,181.	368.	776.
b CREDIT CARD/FINANCE CHA	75,680.	1,033.	74,647.	
c EQUIPMENT AND OTHER LEA	22,826.	15,931.	5,128.	1,767.
d MISCELLANEOUS	11,739.	10,071.	1,240.	428.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	5,319,550.	4,241,993.	604,116.	473,441.
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 if following SOP 8-2 (BC 9-8-7-9)



Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	500.	1	500.
	2 Savings and temporary cash investments	3,299,171.	2	2,040,086.
	3 Pledges and grants receivable, net	179,000.	3	223,100.
	4 Accounts receivable, net	136,475.	4	480,748.
	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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	118,051.	9	182,303.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 11,930,596.		
	b Less: accumulated depreciation	10b 2,261,341.	9,723,740.	10c 9,669,255.
	11 Investments - publicly traded securities	11,291,009.	11	11,571,832.
	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	104,087.	15	109,445.
16 Total assets. Add lines 1 through 15 (must equal line 34)	24,852,033.	16	24,277,269.	
Liabilities	17 Accounts payable and accrued expenses	157,920.	17	129,412.
	18 Grants payable		18	
	19 Deferred revenue	186,893.	19	83,455.
	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		24	
	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 D	132,137.	25	163,834.
	26 Total liabilities. Add lines 17 through 25	476,950.	26	376,701.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	18,652,968.	27	18,124,948.
	28 Temporarily restricted net assets	2,948,182.	28	3,001,687.
	29 Permanently restricted net assets	2,773,933.	29	2,773,933.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or 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	24,375,083.	33	23,900,568.	
34 Total liabilities and net assets/fund balances	24,852,033.	34	24,277,269.	

Form **990** (2018)

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,411,991.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,319,550.
3	Revenue less expenses. Subtract line 2 from line 1	3	-907,559.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	24,375,083.
5	Net unrealized gains (losses) on investments	5	433,044.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	23,900,568.

Part XII Financial Statements and Reporting

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

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

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

Form **990** (2018)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 VI.)						
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 section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,528,621.	1,263,109.	1,477,765.	1,400,682.	1,451,839.	7,122,016.
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	1,836,434.	1,927,233.	2,214,587.	2,315,370.	2,443,649.	10,737,273.
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	3,365,055.	3,190,342.	3,692,352.	3,716,052.	3,895,488.	17,859,289.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	356,301.	367,508.	331,050.	155,034.	134,000.	1,343,893.
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	356,301.	367,508.	331,050.	155,034.	134,000.	1,343,893.
8 Public support. (Subtract line 7c from line 6.)						16,515,396.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	3,365,055.	3,190,342.	3,692,352.	3,716,052.	3,895,488.	17,859,289.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	414,160.	455,616.	477,569.	587,054.	443,200.	2,377,599.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	414,160.	455,616.	477,569.	587,054.	443,200.	2,377,599.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,485.	8,422.	10,152.	5,076.	7,200.	39,335.
13 Total support. (Add lines 9, 10c, 11, and 12.)	3,787,700.	3,654,380.	4,180,073.	4,308,182.	4,345,888.	20,276,223.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	81.45 %
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	80.63 %

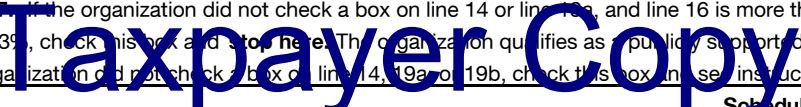
Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	11.73 %
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	11.64 %

19a 33 1/3% support tests - 2018. 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

b 33 1/3% support tests - 2017. 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

20 Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions



Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

MISC. INCOME

2014 AMOUNT: \$ 8,485.

2015 AMOUNT: \$ 8,422.

2016 AMOUNT: \$ 10,152.

2017 AMOUNT: \$ 5,076.

2018 AMOUNT: \$ 7,200.

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2018
Open to Public Inspection

Name of the organization ACKERMAN INSTITUTE FOR THE FAMILY
Employer identification number 13-1923959

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on 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 a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 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.

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

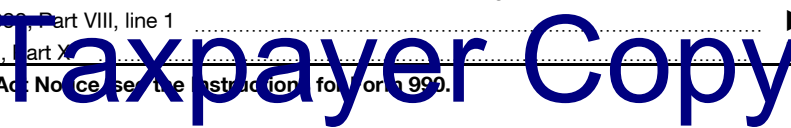
(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X



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

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

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

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

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

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

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

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

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

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

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

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

- a Board designated or quasi-endowment 56.62%, b Permanent endowment 16.80%, c Temporarily restricted endowment 26.58%

The percentages on 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, (ii) related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b.

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total.

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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SALARIES & PAYROLL TAXES PAYABLE	54,389.
(3) DEFERRED COMPENSATION	109,445.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	163,834.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	4,620,527.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	433,044.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	433,044.
3	Subtract line 2e from line 1	3	4,187,483.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	73,858.
b	Other (Describe in Part XIII.)	4b	150,650.
c	Add lines 4a and 4b	4c	224,508.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	4,411,991.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	5,095,042.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	5,095,042.
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	73,858.
b	Other (Describe in Part XIII.)	4b	150,650.
c	Add lines 4a and 4b	4c	224,508.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,319,550.

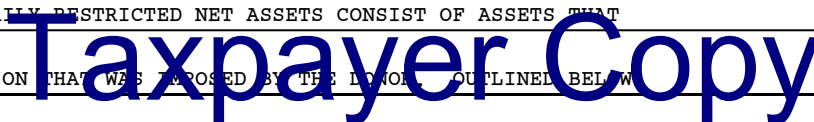
Part XIII Supplemental Information.

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.

PART V, LINE 4:

THE BOARD DESIGNATED FUND IS FUNDS SET ASIDE TO BE USED AT THE DISCRETION OF THE BOARD. WITHIN THE FUND CONSISTS OF THREE RESERVE FUNDS. THE RESERVE FUND WAS SET UP USING MONIES FROM THE SALE OF THE BUILDING. IT IS USED FOR CONDO MAINTENANCE FEES AND OTHER EXPENSES APPROVED BY BOARD. THE BUILDING RESERVE WAS SET UP FOR ALL FUTURE CAPITAL IMPROVEMENTS TO THE CONDO. THE ACCRUAL WAS ESTABLISHED WHEN THE PRICE WAS NEGOTIATED FOR THE NEW SPACE. THE CAPITAL EXPENDITURES RESERVE WAS SET UP FOR UPDATING NEW EQUIPMENT SUCH AS VIDEO AND COMPUTER EQUIPMENT IN FUTURE YEARS.

THE INSTITUTE'S TEMPORARILY RESTRICTED NET ASSETS CONSIST OF ASSETS THAT HAVE A SPECIAL RESTRICTION THAT WAS IMPOSED BY THE DONOR. OUTLINED BELOW



Part XIII Supplemental Information (continued)

IS A DESCRIPTION OF THE RESTRICTED INVESTMENT HOLDINGS, WHICH MAKES UP MAJORITY OF THE NET ASSET BALANCE.

RUTH PERL KAHN FUND: THIS IS AN ENDOWMENT SET UP IN AN INDIVIDUAL INVESTMENT ACCOUNT. THE DONOR STIPULATIONS PERMIT THE EXPENDITURE OF UP TO 5% OF THE FAIR-MARKET VALUE OF THE FUNDS TO BE USED FOR OPERATIONS.

MASLOW SCHOLARSHIP FUND: THIS IS AN ENDOWMENT SET UP IN AN INDIVIDUAL INVESTMENT ACCOUNT THAT IS RESTRICTED FOR SCHOLARSHIPS. THESE SCHOLARSHIPS ARE SOLELY FOR TRAINEES OF COLOR AND TRAINEES WORKING IN COMMUNITY AGENCIES AND SCHOOLS. THE APPLICATIONS ARE CAREFULLY REVIEWED AND DETERMINATIONS ARE MADE FINANCIAL NEEDS. WHEN THE AMOUNT OF SCHOLARSHIPS EXCEEDS 5% OF THE FAIR VALUE OF THE FUNDS A WRITTEN APPROVAL IS GRANTED.

CHALLENGE GRANT GIFT: THIS ENDOWMENT IS COMPRISED OF INVESTMENT REVENUE, RECORDED AS TEMPORARY RESTRICTED, ON WHAT IS EARNED ON \$1M CONTRIBUTED BY A DONOR THAT'S PERMANENTLY RESTRICTED. THESE EARNINGS ARE USED FOR OPERATIONS, SPECIFICALLY USED FOR CONDO MAINTENANCE.

THE PERMANENTLY RESTRICTED NET ASSETS IS AN ENDOWMENT SET UP BY THE RUTH PERL KAHN FUND.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

PROFESSIONAL FUNDRAISER	93,000.
SCHOLARSHIPS, NET WITH TUITION	57,650.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	150,650.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

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Part XIII Supplemental Information *(continued)*

PROFESSIONAL FUNDRAISER 93,000.

SCHOLARSHIPS, NET WITH TUITION 57,650.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 150,650.

Multiple horizontal lines for supplemental information.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		GALA (event type)	GENDER & FAMILY (event type)	NONE (total number)	
Revenue	1	Gross receipts	546,727.	497,759.	1,044,486.
	2	Less: Contributions	325,357.	101,450.	426,807.
	3	Gross income (line 1 minus line 2)	221,370.	396,309.	617,679.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	109,320.	95,709.	205,029.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			205,029.
11	Net income summary. Subtract line 10 from line 3, column (d)			412,650.	

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

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

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

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

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. 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 provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: BUCKLEY HALL EVENTS

(I) ADDRESS OF FUNDRAISER: 17-19 MARBLE AVENUE, PLEASANTVILLE, NY 10570

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Part IV Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

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Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	25	57,650.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

SCHOLARSHIP COMMITTEE COMPRISED OF PRESIDENT/CEO, DIRECTOR OF TRAINING,
CO-DIRECTOR OF SOCIAL WORKS & DIVERSITY AND BOARD MEMBER(S) REVIEWS THE
FINANCIAL AID APPLICATION SUBMITTED BY STUDENTS. THE COMMITTEE REVIEWS THE
STUDENT'S TAX RETURN FORMS AND LETTER OF RECOMMENDATION AND DETERMINES
ELIGIBLE STUDENTS BASED ON FINANCIAL NEED.

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**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
ACKERMAN INSTITUTE FOR THE FAMILY

Employer identification number
13-1923959

Part I Questions Regarding Compensation

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

- | | |
|--|--|
| <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 indemnification 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 (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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

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 checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input 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 |

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

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

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

Schedule J (Form 990) 2018

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LOIS BRAVEMAN CEO/PRESIDENT	(i)	252,756.	0.	0.	11,450.	12,054.	276,260.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
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	(ii)							

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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: **ACKERMAN INSTITUTE FOR THE FAMILY**
Employer identification number: **13-1923959**

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				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1	31,070. FMV	
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				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
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**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2018

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Part II **Supplemental Information.** 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.

Multiple horizontal lines for supplemental information.

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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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

ACKERMAN INSTITUTE FOR THE FAMILY

Employer identification number

13-1923959

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND TO THE TRAINING OF FAMILY THERAPISTS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOUNDED IN 1960, THE ACKERMAN INSTITUTE FOR THE FAMILY IS ONE OF THE
PREMIER INSTITUTIONS FOR FAMILY THERAPY AND ONE OF THE BEST KNOWN AND
MOST HIGHLY REGARDED TRAINING FACILITIES FOR FAMILY THERAPISTS IN THE
UNITED STATES. THE ACKERMAN INSTITUTE SERVES FAMILIES FROM ALL ETHNIC,
ECONOMIC, AND RELIGIOUS BACKGROUNDS, AS WELL AS MEMBERS OF THE LGBTQ
COMMUNITY FAMILIES AND COUPLES. THE ACKERMAN INSTITUTE'S MISSION IS TO
PROVIDE: INNOVATIVE FAMILY AND COUPLE THERAPY THROUGH ITS ON-SITE
CLINIC (LICENSED BY THE STATE OF NEW YORK OFFICE OF MENTAL HEALTH);
STATE-OF-THE-ART TRAINING PROGRAMS FOR MENTAL HEALTH AND OTHER
PROFESSIONALS ON-SITE, IN COMMUNITY SETTINGS AND INTERNATIONALLY; AND,
CUTTING-EDGE RESEARCH INITIATIVES THAT FOCUS ON THE DEVELOPMENT OF NEW
TREATMENT MODELS AND TRAINING TECHNIQUES. THROUGH THIS DYNAMIC
INTERACTION OF TREATMENT, TRAINING AND RESEARCH, THE ACKERMAN INSTITUTE
HELPS FAMILIES, SERVES MENTAL HEALTH CARE PROFESSIONALS AND BRINGS
INNOVATIVE PERSPECTIVES TO A BROAD ARRAY OF COMMUNITY SERVICE AGENCIES
AND OTHER HEALTH CARE FACILITIES.

FORM 990, PART III, LINE 4A

EDUCATION & WORKSHOPS: THE ACKERMAN INSTITUTE'S DEEP BELIEF IN AND
COMMITMENT TO FAMILY THERAPY HAS PLAYED A MAJOR ROLE IN EXPANDING THE
SCOPE OF THE FIELD OF MENTAL HEALTH, AND THE ACKERMAN INSTITUTE TODAY

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization ACKERMAN INSTITUTE FOR THE FAMILY	Employer identification number 13-1923959
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IS WIDELY ACKNOWLEDGED AS A PIONEER IN THE FIELD OF FAMILY THERAPY. THE
ACKERMAN TRAINING PROGRAM OFFERS STUDENTS A COURSE OF STUDY THAT
COMBINES THEORY WITH DIRECT EXPERIENCE WITH FAMILIES. EACH TRAINEE
RECEIVES INDIVIDUALIZED ATTENTION FROM A DISTINGUISHED FACULTY DRAWN
FROM THE FIELDS OF SOCIAL WORK, PSYCHOLOGY, FAMILY THERAPY, AND
PSYCHIATRY. MANY ACKERMAN FACULTY MEMBERS DIRECT CLINICAL RESEARCH
PROJECTS THAT FOCUS ON PROBLEMS INCLUDING, BUT NOT LIMITED TO, SCHOOL
DIFFICULTIES, CHILD AND ADOLESCENT PROBLEMS, DEPRESSION, MARITAL
ISSUES, DIVORCE, BEREAVEMENT, LEARNING DISABILITIES, FAMILY VIOLENCE,
CHILD ABUSE AND INCEST, CHRONIC MEDICAL ILLNESS, AND GENDER IDENTITY
ISSUES. THE KNOWLEDGE AND INSIGHTS GAINED FROM THIS RESEARCH ARE
INCORPORATED IMMEDIATELY INTO ACKERMAN'S TRAINING PROGRAMS AND
DISSEMINATED TO MENTAL HEALTH CARE PROFESSIONALS LOCALLY, NATIONALLY,
AND INTERNATIONALLY THROUGH LECTURES, WORKSHOPS AND PUBLICATIONS. THE
ACKERMAN INSTITUTE'S EDUCATIONAL INITIATIVES ADDRESS THE NEED FOR HIGH
QUALITY CLIENT CARE AND THE NEEDS OF PRACTICING PROFESSIONALS FOR
INNOVATIVE MEANINGFUL FAMILY THERAPY TRAINING.

ACKERMAN'S PROGRAM INCLUDES A RANGE OF OPPORTUNITIES THAT ACCOMMODATE
BOTH THE PROFESSIONAL REQUIREMENTS AND TIME CONSTRAINTS OF
PRACTITIONERS AT DIFFERENT STAGES OF THEIR CAREERS. THE TRAINING
PROGRAM ENABLES PRACTITIONERS TO EXPAND THEIR KNOWLEDGE AND SKILLS AS
THE PROVISION OF MENTAL HEALTH SERVICES GAINS GREATER RECOGNITION IN
THE HEALTHCARE SYSTEM. THE ACKERMAN TRAINING PROGRAM IS OPEN TO
INDIVIDUALS WITH DEGREES IN SOCIAL WORK, PSYCHOLOGY, PSYCHIATRY, MENTAL
HEALTH COUNSELING, AND TO INDIVIDUALS WITH DEGREES IN MARRIAGE AND
FAMILY THERAPY.

Name of the organization ACKERMAN INSTITUTE FOR THE FAMILY	Employer identification number 13-1923959
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FORM 990, PART III, LINE 4B

CLINIC SERVICES:

AT THE ACKERMAN INSTITUTE TREATMENT CENTER, TRAINED THERAPISTS HELP FAMILIES FROM ALL ETHNIC, ECONOMIC AND RELIGIOUS BACKGROUNDS. FAMILY THERAPY IS A METHOD OF UNDERSTANDING AND TREATING EMOTIONAL PROBLEMS AND PERSONAL CRISES BY WORKING WITH THE ENTIRE FAMILY RATHER THAN THE INDIVIDUAL. THERAPY SESSIONS FOCUS ON UNDERSTANDING INDIVIDUALS' THOUGHTS, FEELINGS AND BEHAVIOR WITHIN THE CONTEXT OF THEIR FAMILIES. THE GOAL IS TO HARNESS AND STRENGTHEN FAMILY RESOURCES, AND HELP FAMILY MEMBERS WORK COLLABORATIVELY TOWARDS SOLUTIONS TO THEIR PROBLEMS. THERAPY IS PROVIDED BY PSYCHIATRISTS, PSYCHOLOGISTS AND SOCIAL WORKERS ON THE ACKERMAN FACULTY AND BY CLINICIANS IN POSTGRADUATE TRAINING AND SUPERVISION AT ACKERMAN.

THE ACKERMAN CLINIC HELPS FAMILIES WITH PROBLEMS INCLUDING, BUT NOT LIMITED TO, SCHOOL DIFFICULTIES, CHILD AND ADOLESCENT PROBLEMS, MARITAL ISSUES, DIVORCE, BEREAVEMENT, LEARNING DISABILITIES, FAMILY VIOLENCE, CHILD ABUSE AND INCEST, CHRONIC MEDICAL ILLNESS, AND GENDER IDENTITY ISSUES.

FORM 990, PART VI, SECTION A, LINE 2:

DEBORAH WERNER, DIRECTOR, AND IRA SALLEN, DIRECTOR, HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS INITIALLY REVIEWED BY THE TREASURER OF THE BOARD OF

Name of the organization ACKERMAN INSTITUTE FOR THE FAMILY	Employer identification number 13-1923959
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DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. THE FORM 990 IS AVAILABLE TO BOARD OF DIRECTORS UPON REQUEST.

FORM 990, PART VI, SECTION B, LINE 12C:
THE INSTITUTE REQUIRES THE BOARD OF DIRECTORS AND EXECUTIVE OFFICERS TO COMPLETE CONFLICT OF INTEREST FORMS. THE FORMS ARE THEN REVIEWED FOR ANY POSSIBLE CONFLICTS. THE CHAIRMAN IS NOTIFIED IF ANY CONFLICTS EXIST.

FORM 990, PART VI, SECTION B, LINE 15:
THE CEO IS PROVIDED WITH A THREE YEAR CONTRACT. WHEN THE CONTRACT IS UP FOR RENEWAL, THE CHAIRMAN OF THE BOARD CONDUCTS A PERFORMANCE REVIEW WITH THE CEO. BASED UPON THE PERFORMANCE REVIEW, CHANGES ARE INCORPORATED INTO A NEW THREE YEAR CONTRACT. THE EXECUTIVE COMMITTEE OF THE BOARD VOTES ON FINAL APPROVAL OF THE CONTRACT AND RECOMMENDS TO THE BOARD ACCEPTANCE OF THE CEO'S CONTRACT AND THE BOARD THEN VOTES ON THE EXECUTIVE COMMITTEES RECOMMENDATION.

FORM 990, PART VI, SECTION C, LINE 19:
THE INSTITUTE DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. ACKERMAN INSTITUTE FOR THE FAMILY	Employer identification number (EIN) or 13-1923959
<small>File by the due date for filing your return. See instructions.</small>	Number, street, and room or suite no. If a P.O. box, see instructions. 936 BROADWAY	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10010	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

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

MICHELE BURFEIND, THE INSTITUTE

- The books are in the care of ▶ 936 BROADWAY - NEW YORK, NY 10010
Telephone No. ▶ 212-879-4900 Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 2020, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning JUL 1, 2018, and ending JUN 30, 2019.

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

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

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury Internal Revenue Service

Open to Public Inspection for 501(c)(3) Organizations Only

Form header section including: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets; D Employer identification number; E Unrelated business activity code; F Group exemption number; G Check organization type.

H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of MICHELE BURFEIND, THE INSTITUTE Telephone number 212-879-4900

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include: 1a Gross receipts or sales, 2 Cost of goods sold, 3 Gross profit, 4a Capital gain net income, 5 Income (loss) from a partnership, 6 Rent income, 7 Unrelated debt-financed income, 8 Interest, annuities, royalties, and rents, 9 Investment income, 10 Exploited exempt activity income, 11 Advertising income, 12 Other income, 13 Total.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include: 14 Compensation of officers, directors, and trustees, 15 Salaries and wages, 16 Repairs and maintenance, 17 Bad debts, 18 Interest, 19 Taxes and licenses, 20 Charitable contributions, 21 Depreciation, 22 Less depreciation claimed, 23 Depletion, 24 Contributions to deferred compensation plans, 25 Employee benefit programs, 26 Excess exempt expenses, 27 Excess readership costs, 28 Other deductions, 29 Total deductions, 30 Unrelated business taxable income before net operating loss deduction, 31 Deduction for net operating loss, 32 Unrelated business taxable income.

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 33-38 for unrelated business taxable income calculation.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 39-44 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 45a-55 for tax and payments.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions 56-58 regarding foreign activities and tax-exempt interest.

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.

Sign Here: Signature of officer, Date, Title. Includes a box for 'May the IRS discuss this return with the preparer shown below?' with Yes/No options.

Table for 'Paid Preparer Use Only' containing fields for name, signature, date, firm name, address, EIN, and phone number.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. ACKERMAN INSTITUTE FOR THE FAMILY	Employer identification number (EIN) or 13-1923959
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 936 BROADWAY	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10010	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 7

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

MICHELE BURFEIND, THE INSTITUTE

- The books are in the care of ▶ 936 BROADWAY - NEW YORK, NY 10010
Telephone No. ▶ 212-879-4900 Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 2020, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning JUL 1, 2018, and ending JUN 30, 2019.

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

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	9,399.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	2,699.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	6,700.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

CHAR500

NYS Annual Filing for Charitable Organizations
www.CharitiesNYS.com

Send with fee and attachments to:
NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

2018
Open to Public Inspection

1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) 07/01/2018 and Ending (mm/dd/yyyy) 06/30/2019		
Check if Applicable: <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Initial Filing <input type="checkbox"/> Final Filing <input type="checkbox"/> Amended Filing <input type="checkbox"/> Reg ID Pending	Name of Organization: ACKERMAN INSTITUTE FOR THE FAMILY	Employer Identification Number (EIN): 13-1923959
	Mailing Address: 936 BROADWAY	NY Registration Number: 00-44-43
	City / State / ZIP: NEW YORK, NY 10010	Telephone: 212 879-4900
	Website: WWW.ACKERMAN.ORG	Email: MPRONKO@ACKERMAN.ORG
Check your organization's registration category: <input type="checkbox"/> 7A only <input type="checkbox"/> EPTL only <input checked="" type="checkbox"/> DUAL (7A & EPTL) <input type="checkbox"/> EXEMPT* Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com.		

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties. The certification requires two signatories.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer:

Signature

Print Name and Title

Date

Chief Financial Officer or Treasurer:

Signature

Print Name and Title

Date

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc. did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year.

3b. EPTL filing exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.

Yes No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.

Yes No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	7A filing fee: \$ <u>25.</u>	EPTL filing fee: \$ <u>750.</u>	Total fee: \$ <u>775.</u>	Make a single check or money order payable to: "Department of Law"
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CHAR500 Annual Filing for Charitable Organizations (Updated January 2019)

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

CHAR500

Annual Filing Checklist

- Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:
- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
 - Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
 - Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

- If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.
- Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

- Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000.
- Audit Report if you received total revenue and support greater than \$750,000
- No Review Report or Audit Report is required because total revenue and support is less than \$250,000
- We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

For 7A and DUAL filers, calculate the 7A fee:

- \$0, if you checked the 7A exemption in Part 3a
- \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

- \$0, if you checked the EPTL exemption in Part 3b
- \$25, if the NET WORTH is less than \$50,000
- \$50, if the NET WORTH is \$50,000 or more but less than \$250,000
- \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
- \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
- \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
- \$1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

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

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

Need Assistance?

Visit: www.CharitiesNYS.com
 Call: (212) 416-8401
 Email: Charities.Bureau@ag.ny.gov

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in **Schedule E - Registration Exemption for Charitable Organizations**. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.

Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

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

CHAR500

Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers
www.CharitiesNYS.com

2018

**Open to Public
Inspection**

If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule for EACH Professional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund raising activity in NY State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary.

Definitions

A **Professional Fund Raiser (PFR)**, in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4).

A **Fund Raising Counsel (FRC)** does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).

A **Commercial Co-Venturer (CCV)** is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

Professional fund raising does not include activities by an organization's development staff, volunteers, or a grantwriter who has been hired solely to draft applications for funding from a government agency or tax exempt organization.

1. Organization Information

Name of Organization:	NY Registration Number:
ACKERMAN INSTITUTE FOR THE FAMILY	00-44-43

2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information

Fund Raising Professional type: <input checked="" type="checkbox"/> Professional Fund Raiser <input type="checkbox"/> Fund Raising Counsel <input type="checkbox"/> Commercial Co-Venturer	Name of FRP: BUCKLEY HALL EVENTS	NY Registration Number: 32-59-96
	Mailing Address: 17-19 MARBLE AVENUE	Telephone: 914-579-1000
	City / State / ZIP: PLEASANTVILLE, NY 10570	

3. Contract Information

Contract Start Date: 03/01/2018	Contract End Date: 04/31/19
------------------------------------	--------------------------------

4. Description of Services

Services provided by FRP:
GALA FUNDRAISING EVENTS

5. Description of Compensation

Compensation arrangement with FRP: FEES FOR SERVICES PER CONTRACT	Amount Paid to FRP: 93,000.
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6. Commercial Co-Venturer (CCV) Report

<input type="checkbox"/> Yes <input type="checkbox"/> No If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing report(s) required by Section 173(a) part 3 of the Executive Law Article 7A?

**ACKERMAN INSTITUTE
FOR THE FAMILY**

**Financial Statements
for the year ended
June 30, 2019
(with summarized
comparative information for 2018)**

Independent Auditor's Report

To the Board of Directors of
Ackerman Institute for the Family

We have audited the accompanying financial statements of the Ackerman Institute for the Family which comprise the statement of financial position as of June 30, 2019 and the related statements of activities, functional expenses and cash flows for the year then ended and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to in the first paragraph on the previous page present fairly, in all material respects, the financial position of Ackerman Institute for the Family as of June 30, 2019 and the results of its activities and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited the Ackerman Institute for the Family's 2018 financial statements, and our report dated December 18, 2018, expressed an unmodified opinion on those audited financial statements. In our opinion, the summarized comparative information presented as of and for the year ended June 30, 2018 is consistent, in all material respects, with the financial statements from which it has been derived.

Caroline O'Meara McElroy & Donnelly LLP

ACKERMAN INSTITUTE FOR THE FAMILY

Statement of Financial Position
June 30, 2019 and June 30, 2018

Assets

	2019			2018		
	Without Donor Restrictions	With Donor Restrictions	Total	Without Donor Restrictions	With Donor Restrictions	Total
Current assets						
Cash and cash equivalents	\$ 1,186,049	\$ 854,537	\$ 2,040,586	\$ 2,420,687	\$ 878,984	\$ 3,299,671
Investments, at fair value	6,728,749	4,843,083	11,571,832	6,575,878	4,715,131	11,291,009
Accounts receivable, net	480,748	-	480,748	136,475	-	136,475
Contributions receivable	145,100	62,000	207,100	51,000	58,000	109,000
Prepaid expenses and other assets	182,303	-	182,303	118,051	-	118,051
Total current assets	8,722,949	5,759,620	14,482,569	9,302,091	5,652,115	14,954,206
Contributions receivable, net of current portion	-	16,000	16,000	-	70,000	70,000
Property and equipment, at cost, net of accumulated depreciation	9,669,255	-	9,669,255	9,723,740	-	9,723,740
Deferred compensation	109,445	-	109,445	104,087	-	104,087
Total assets	\$ 18,501,649	\$ 5,775,620	\$ 24,277,269	\$ 19,129,918	\$ 5,722,115	\$ 24,852,033

Liabilities and Net Assets

Current liabilities						
Accounts payable and accrued expenses	\$ 129,412	\$ -	\$ 129,412	\$ 157,920	\$ -	\$ 157,920
Accrued salaries and payroll taxes	54,389	-	54,389	28,050	-	28,050
Deferred tuition and fees revenue	83,455	-	83,455	186,893	-	186,893
Total current liabilities	267,256	-	267,256	372,863	-	372,863
Deferred compensation	109,445	-	109,445	104,087	-	104,087
Total liabilities	376,701	-	376,701	476,950	-	476,950
Net assets						
Without donor restrictions						
Operating	1,215,987	-	1,215,987	1,757,055	-	1,757,055
Board-designated fund	7,239,706	-	7,239,706	7,172,173	-	7,172,173
Sub-total	8,455,693	-	8,455,693	8,929,228	-	8,929,228
Net investment in property and equipment	9,669,255	-	9,669,255	9,723,740	-	9,723,740
Total without donor restrictions	18,124,948	-	18,124,948	18,652,968	-	18,652,968
With donor restrictions	-	5,775,620	5,775,620	-	5,722,115	5,722,115
Total net assets	18,124,948	5,775,620	23,900,568	18,652,968	5,722,115	24,375,083
Total liabilities and net assets	\$ 18,501,649	\$ 5,775,620	\$ 24,277,269	\$ 19,129,918	\$ 5,722,115	\$ 24,852,033

See notes to financial statements.

ACKERMAN INSTITUTE FOR THE FAMILY

**Statement of Activities
For the Years Ended June 30, 2019 and June 30, 2018**

	<u>2019</u>			<u>2018</u>		
	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
Revenue and support						
Grants and contributions	\$ 831,108	\$ 193,924	\$ 1,025,032	\$ 531,794	\$ 326,421	\$ 858,215
Special events, net of direct expenses of \$298,029 in 2019 and \$281,587 in 2018	746,457	-	746,457	602,730	-	602,730
Patient services	678,579	-	678,579	681,167	-	681,167
Tuition and fees	1,089,741	-	1,089,741	1,241,115	-	1,241,115
Rental	113,013	-	113,013	152,656	-	152,656
Investment return, net	186,754	340,707	527,461	365,683	514,011	879,694
Miscellaneous	7,200	-	7,200	5,076	-	5,076
Net assets released from restrictions	513,260	(513,260)	-	420,523	(420,523)	-
Total revenue and support	<u>4,166,112</u>	<u>21,371</u>	<u>4,187,483</u>	<u>4,000,744</u>	<u>419,909</u>	<u>4,420,653</u>
Expenses						
Program services						
Clinical services	1,034,596	-	1,034,596	893,978	-	893,978
Education and workshops	3,149,747	-	3,149,747	2,595,414	-	2,595,414
Total program services	<u>4,184,343</u>	<u>-</u>	<u>4,184,343</u>	<u>3,489,392</u>	<u>-</u>	<u>3,489,392</u>
Supporting activities						
Management and general	530,258	-	530,258	471,678	-	471,678
Fundraising	380,441	-	380,441	332,478	-	332,478
Total supporting activities	<u>910,699</u>	<u>-</u>	<u>910,699</u>	<u>804,156</u>	<u>-</u>	<u>804,156</u>
Total expenses	<u>5,095,042</u>	<u>-</u>	<u>5,095,042</u>	<u>4,293,548</u>	<u>-</u>	<u>4,293,548</u>
Increase (decrease) from operating activities before unrealized gain (loss) on investments	(928,930)	21,371	(907,559)	(292,804)	419,909	127,105
Unrealized gain (loss) on investments	400,910	32,134	433,044	119,937	(406,960)	(287,023)
Increase (decrease) in net assets	(528,020)	53,505	(474,515)	(172,867)	12,949	(159,918)
Net assets, beginning of year	<u>18,652,968</u>	<u>5,722,115</u>	<u>24,375,083</u>	<u>18,825,835</u>	<u>5,709,166</u>	<u>24,535,001</u>
Net assets, end of year	<u>\$ 18,124,948</u>	<u>\$ 5,775,620</u>	<u>\$ 23,900,568</u>	<u>\$ 18,652,968</u>	<u>\$ 5,722,115</u>	<u>\$ 24,375,083</u>

See notes to financial statements.

ACKERMAN INSTITUTE FOR THE FAMILY

**Statement of Functional Expenses
For the Year Ended June 30, 2019
(With Summarized Comparative Information for the Year Ended June 30, 2018)**

	<u>2019</u>						<u>2018</u>	
	<u>Program Services</u>			<u>Supporting Activities</u>			<u>Total</u>	<u>Total</u>
	<u>Clinical Services</u>	<u>Education and Workshops</u>	<u>Total Program Services</u>	<u>Management and General</u>	<u>Fundraising</u>	<u>Total Supporting Activities</u>		
Expenses								
Salaries	\$ 649,006	\$ 1,729,583	\$ 2,378,589	\$ 188,492	\$ 239,316	\$ 427,808	\$ 2,806,397	\$ 2,256,238
Payroll taxes and fringe benefits	131,581	313,567	445,148	34,200	43,347	77,547	522,695	435,321
Honorariums and research	36,285	333,896	370,181	368	776	1,144	371,325	333,562
Building maintenance and utilities	42,877	139,866	182,743	58,829	20,273	79,102	261,845	259,549
Professional fees and consulting	50,032	117,281	167,313	28,650	9,872	38,522	205,835	182,626
Materials and office supplies	14,678	55,077	69,755	14,482	12,720	27,202	96,957	41,564
Computer system	22,671	37,448	60,119	13,497	9,917	23,414	83,533	77,267
Insurance	8,745	28,526	37,271	11,998	4,135	16,133	53,404	50,690
Equipment and other leasing	3,738	12,193	15,931	5,128	1,767	6,895	22,826	24,523
Telephone	3,515	11,778	15,293	4,824	1,662	6,486	21,779	20,597
Travel, meals, conferences and meetings	4,352	134,884	139,236	3,751	2,264	6,015	145,251	79,900
Printing, postage, mailing and advertising	543	12,902	13,445	587	3,100	3,687	17,132	26,516
Credit card and finance charges	392	641	1,033	74,647	-	74,647	75,680	59,618
Miscellaneous	904	9,167	10,071	1,240	428	1,668	11,739	17,075
Total expenses before depreciation	<u>969,319</u>	<u>2,936,809</u>	<u>3,906,128</u>	<u>440,693</u>	<u>349,577</u>	<u>790,270</u>	<u>4,696,398</u>	<u>3,865,046</u>
Depreciation	<u>65,277</u>	<u>212,938</u>	<u>278,215</u>	<u>89,565</u>	<u>30,864</u>	<u>120,429</u>	<u>398,644</u>	<u>428,502</u>
Total expenses	<u>\$ 1,034,596</u>	<u>\$ 3,149,747</u>	<u>\$ 4,184,343</u>	<u>\$ 530,258</u>	<u>\$ 380,441</u>	<u>\$ 910,699</u>	<u>\$ 5,095,042</u>	<u>\$ 4,293,548</u>

See notes to financial statements.

ACKERMAN INSTITUTE FOR THE FAMILY

Statement of Cash Flows

	For the Years Ended June 30	
	<u>2019</u>	<u>2018</u>
Cash flows from operating activities		
(Decrease) in net assets	\$ (474,515)	\$ (159,918)
Adjustments to reconcile (decrease) in net assets to net cash provided by (used in) operating activities		
Depreciation	398,644	428,502
Donated securities	(31,070)	(20,415)
Proceeds from sales of donated securities	31,070	20,479
Realized (gain) on sale of investments	(271,132)	(521,430)
Contribution with perpetual donor restrictions	-	(500)
Unrealized (gain) loss on investments	(433,044)	287,023
(Increase) in		
Accounts receivable	(344,273)	(5,824)
Contributions receivable	(44,100)	(25,600)
Prepaid expenses and other assets	(64,252)	(14,178)
Increase (decrease) in		
Accounts payable and accrued expenses	(28,508)	(18,605)
Accrued salaries and payroll taxes	26,339	(22,214)
Deferred tuition and fees revenue	(103,438)	98,120
Net cash provided by (used in) operating activities	<u>(1,338,279)</u>	<u>45,440</u>
Cash flows from investing activities		
Purchase of investments	(4,724,625)	(4,031,941)
Proceeds from sales of investments	5,147,978	4,144,166
Acquisition of property and equipment	(344,159)	(166,586)
Net cash provided by (used in) investing activities	<u>79,194</u>	<u>(54,361)</u>
Cash flows provided by financing activities		
Contribution with perpetual donor restrictions	<u>-</u>	<u>500</u>
Net (decrease) in cash and cash equivalents	(1,259,085)	(8,421)
Cash and cash equivalents, beginning of year	<u>3,299,671</u>	<u>3,308,092</u>
Cash and cash equivalents, end of year	<u>\$ 2,040,586</u>	<u>\$ 3,299,671</u>

See notes to financial statements.

ACKERMAN INSTITUTE FOR THE FAMILY**Notes to Financial Statements
June 30, 2019****Note 1 – Nature of organization and summary of significant accounting policies**Nature of organization

Ackerman Institute for the Family (the “Organization”) is a not-for-profit organization which provides innovative couple and family therapy services through its on-site clinic; post graduate training in couple and family therapy for mental health professionals; and cutting edge research that focuses on the development of new treatment models and training techniques.

Basis of presentation

The financial statements of the Organization are prepared on the accrual basis of accounting.

Net assets

The Organization’s net assets consist of:

Without donor restrictions

Net assets without donor restrictions consist of amounts that can be spent at the discretion of the Organization. The net assets also include those funds that are designated for specific purposes by the Board of Directors.

Board-designated net assets mainly consist of the remaining proceeds from the sale of the building less the purchase and build-out costs for the Organization’s new office space as well as capital improvements to the building. The Organization uses the earnings from the board-designated fund to pay the office condominium common charges each year and other projects approved by the Board of Directors.

With donor restrictionsTemporary donor restrictions

Net assets with temporary donor restrictions consist of contributions that are restricted by the donor for a specific purpose or pertain to future periods.

Perpetual donor restrictions

Net assets with perpetual donor restrictions consist of contributions that are restricted by the donor in that the principal must remain in perpetuity.

ACKERMAN INSTITUTE FOR THE FAMILY**Notes to Financial Statements (continued)****June 30, 2019****Note 1 – Nature of organization and summary of significant accounting policies (continued)**Contributions

The Organization reports contributions as support with temporary donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a designated restriction expires, that is, when a stipulated time restriction ends or the purpose for restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions. Contributions with temporary donor restrictions are reported as increases in net assets without donor restrictions if the restrictions are satisfied within the same fiscal year the contributions are received.

Cash equivalents

The Organization considers highly liquid investments with an original maturity of 90 days or less to be cash equivalents.

Investments

The Organization reports investments at fair value in the statement of financial position. The fair value of the investments is based on publicly quoted market prices. Realized and unrealized gains and losses are reflected in the statement of activities as increases and decreases in net assets without donor restrictions unless their use is restricted by donor stipulation.

Fair value measurements

Accounting principles generally accepted in the United States of America established a fair value hierarchy that prioritizes the inputs used to measure fair value into three broad levels. The Organization's investments are measured using Level 1 inputs, which are defined as quoted prices in active markets for identical assets that the reporting entity has the ability to access at the measurement date.

Allowance for doubtful accounts

As of June 30, 2019, the Organization has an allowance for doubtful accounts of approximately \$7,000, for the receivables that may not be collectible. As of June 30, 2018, the Organization did not have an allowance for doubtful accounts. Such estimate is based on management's experience, the aging of the receivables, subsequent receipts and current economic conditions.

Property and equipment

Property and equipment are recorded at cost. It is the Organization's policy to capitalize expenditures for those items in excess of \$1,000. Lesser amounts are expensed. Depreciation is being provided on the straight-line method over the estimated useful lives of the assets, which range from 5 to 39 years. During the 2019 fiscal year, fully depreciated property and equipment totaling \$4,025 were deleted from the accounts of the Organization.

ACKERMAN INSTITUTE FOR THE FAMILY**Notes to Financial Statements (continued)****June 30, 2019****Note 1 – Nature of organization and summary of significant accounting policies (continued)**Fees for service revenue

Patient services revenue is reported at the estimated net realizable amounts from patients, third-party payers and other services rendered. Self-pay revenue is recorded at published charges with charitable allowances deducted to arrive at net self-pay revenue. All other patient services revenue is recorded at published charges with contractual allowances deducted to arrive at patient services.

Tuition payments are recorded as revenue over the term of the course. Deferred revenue represents tuition payments received from students in advance of the commencement of a course.

Rental revenue

Rental revenue is received from faculty members for use of the Organization's facilities to provide private counseling and is recorded when earned.

Functional expenses

The cost of providing the various programs and other activities has been summarized on a functional basis. Accordingly, certain costs have been allocated among the program services and supporting activities benefited. Natural expenses attributable to more than one functional expense category are allocated using a variety of cost allocation techniques primarily consisting of salary and wages and time and effort reporting.

In-kind services

Organizations are required to recognize contributions of services if they create or enhance non-financial assets, or require specialized skills, are provided by individuals possessing those skills and typically would have been purchased if not provided in-kind. Board members and other individuals volunteer their time and perform a variety of tasks that assist the Organization. These services do not meet the criteria to be recorded and have not been included in the financial statements.

Summarized comparative information

The financial statements include certain prior-year summarized comparative information in total but not by functional classification. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2018, from which the summarized information was derived.

ACKERMAN INSTITUTE FOR THE FAMILY

Notes to Financial Statements (continued)

June 30, 2019

Note 1 – Nature of organization and summary of significant accounting policies (continued)

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the amounts reported in the financial statements. Actual results could differ from these estimates.

Concentrations of credit risk

The Organization's financial instruments that are potentially exposed to concentrations of credit risk consist primarily of cash, cash equivalents, investments and receivables. The Organization places its cash and cash equivalents with what it believes to be quality financial institutions. The Organization's investments are exposed to various risks such as interest rate, market volatility, liquidity and credit. Due to the level of uncertainty related to the foregoing, it is reasonably possible that changes in these risks could materially affect the fair value of the investments reported in the statement of financial position as of June 30, 2019. The Organization routinely assesses the financial strength of its holdings in its investment portfolio. The Organization monitors the collectibility of its receivables on an ongoing basis. As a consequence, management believes concentrations of credit risk are limited.

Not-for-Profit Financial Statement Presentation

During the 2019 fiscal year, the Organization adopted Accounting Standards Update No. 2016-14 (ASU) *Not-for-Profit Entities: Presentation of Financial Statements of Not-for-Profit Entities*. This guidance is intended to improve the net asset classification requirements and the information presented in the financial statements and notes about a not-for-profit entity's liquidity, financial performance, and cash flows.

A summary of the net asset reclassifications required by the adoption of ASU 2016-14 as of June 30, 2017 is as follows:

<u>Net Asset Classifications</u>	<u>Without Donor</u>	<u>With Donor</u>	<u>Total Net</u>
	<u>Restrictions</u>	<u>Restrictions</u>	<u>Assets</u>
As previously presented			
Unrestricted	\$ 18,825,835	\$ -	\$ 18,825,835
Temporarily restricted	-	2,935,733	2,935,733
Permanently restricted	-	2,773,433	2,773,433
Net assets, as reclassified			
June 30, 2017	<u>\$18,825,835</u>	<u>\$ 5,709,166</u>	<u>\$ 24,535,001</u>

In addition, in accordance with the adoption of ASU 2016-14, the Organization has also reclassified its 2018 fiscal year net asset classifications.

ACKERMAN INSTITUTE FOR THE FAMILY

Notes to Financial Statements (continued)
June 30, 2019

Note 1 – Nature of organization and summary of significant accounting policies (continued)

Subsequent events

The Organization has evaluated events and transactions for potential recognition or disclosure through December 17, 2019, which is the date the financial statements were available to be issued.

Note 2 – Liquidity and availability of financial assets

The Organization's working capital and cash flows have seasonal variations during the year attributable to the annual cash receipts from grants, contributions, tuition, fees and other revenue items.

The following is a summary of the Organization's liquid assets as of June 30, 2019 that are available for general use within one year of the statement of financial position date:

Cash and cash equivalents	\$ 2,040,586
Investments, at fair value	11,571,832
Accounts receivable, net	480,748
Contributions receivable	<u>207,100</u>
Sub-total	14,300,266
Less: net assets with perpetual donor restrictions	<u>(2,773,933)</u>
Total	<u>\$11,526,333</u>

In addition, the Organization also has available a \$1,000,000 revolving line of credit (see note 6) that may be drawn upon as necessary during the year.

Note 3 – Contributions receivable

Contributions receivable consist of the following as of June 30, 2019:

Due in one year	\$ 207,100
Due in one to five years	<u>16,000</u>
Total	<u>\$ 223,100</u>

ACKERMAN INSTITUTE FOR THE FAMILY

Notes to Financial Statements (continued)
June 30, 2019

Note 4 – Investments

The following is a summary of investments held by the Organization as of June 30, 2019 and June 30, 2018:

	<u>2019</u>		<u>2018</u>	
	<u>Cost</u>	<u>Fair Value</u>	<u>Cost</u>	<u>Fair Value</u>
Equities – domestic	\$ 6,481,876	\$ 8,602,692	\$ 6,713,482	\$ 8,525,678
Fixed income	2,361,308	2,478,752	2,030,599	2,040,321
Mutual funds – equities	<u>500,001</u>	<u>490,388</u>	<u>751,325</u>	<u>725,010</u>
Total	<u>\$ 9,343,185</u>	<u>\$ 11,571,832</u>	<u>\$ 9,495,406</u>	<u>\$ 11,291,009</u>

Net investment return consists of the following for the years ended June 30, 2019 and June 30, 2018:

	<u>2019</u>	<u>2018</u>
Realized gain on sale of investments	\$ 271,132	\$ 521,430
Interest and dividends	<u>330,187</u>	<u>434,398</u>
Sub-total	601,319	955,828
Less: investment fees	<u>(73,858)</u>	<u>(76,134)</u>
Total	<u>\$ 527,461</u>	<u>\$ 879,694</u>
Unrealized gain (loss) on investments	<u>\$ 433,044</u>	<u>\$ (287,023)</u>

Note 5 – Property and equipment

A summary of the property and equipment as of June 30, 2019 and June 30, 2018 is as follows:

	<u>2019</u>	<u>2018</u>
Office condominium and improvements	\$ 10,974,325	\$ 10,678,977
Furniture and fixtures	468,325	453,350
Computer and video equipment	<u>487,946</u>	<u>458,135</u>
Total	11,930,596	11,590,462
Less: accumulated depreciation	<u>2,261,341</u>	<u>1,866,722</u>
Total property and equipment	<u>\$ 9,669,255</u>	<u>\$ 9,723,740</u>

ACKERMAN INSTITUTE FOR THE FAMILY**Notes to Financial Statements (continued)****June 30, 2019****Note 6 – Line of credit**

The Organization has available a \$1,000,000 revolving line of credit which expires January 1, 2021. Amounts borrowed under the line bear interest at the Wall Street Journal Prime Rate less 1.50% per annum. The line of credit contains a restrictive borrowing covenant as outlined in the agreement and is collateralized by a money market account held with the lender for the Organization totaling approximately \$1,000,000.

Note 7 – Endowments and net assets with donor restrictions

The Organization's endowment consists of three individual funds established for specific purposes. Its endowment includes donor-restricted endowment funds. Under the New York Prudent Management of Institutional Funds Act (NYPMIFA), the provisions of which apply to endowment funds, the Organization is required to act prudently when making decisions to spend or accumulate donor restricted endowment assets and in doing so to consider a number of factors including the duration and preservation of its donor restricted endowment funds. The Organization classifies as perpetuity restricted net assets the original value of gifts donated to the permanent endowment.

Perpetual donor restrictions

These net assets represent contributions and bequests made that are restricted to investment in perpetuity. Under the Ruth Perl Kahn Fund stipulations, investment revenue earned on such fund is recorded as net assets with temporary donor restrictions and added to the respective fund balance. In addition, the donor stipulations permit the expenditure of up to 5% of the fair value of the funds to be used for operations. The Board appropriates the expenditure of the temporary restricted investment revenue by the annual budget.

ACKERMAN INSTITUTE FOR THE FAMILY

Notes to Financial Statements (continued)

June 30, 2019

Note 7 – Endowments and net assets with donor restrictions (continued)

Net assets with temporary donor restrictions

Net assets with temporary donor restrictions activity for the year ended June 30, 2019 is as follows:

	Balance June 30, 2018	Contributions	Investment Return, Net	Net Assets Released from Restrictions	Balance June 30, 2019
CKCC Projects	\$ 19,429	\$ -	\$ -	\$ -	\$ 19,429
Ruth Perl Kahn Fund	1,815,189	-	275,198	(179,456)	1,910,931
Family Project	-	105,000	-	(52,500)	52,500
Schoolman	3,367	-	-	-	3,367
Relational Trauma	63,984	47,000	-	(54,640)	56,344
Scholarship Program	62,044	150	-	(25,000)	37,194
Maslow Scholarship Fund	143,191	-	5,877	(32,650)	116,418
Oppenheim Fellowship	50,000	-	-	-	50,000
Special Needs Project	35,000	-	-	(35,000)	-
Center for Work & Family	1,041	4,990	-	-	6,031
Center for Alcohol & Substance Abuse	6,393	-	-	(1,741)	4,652
Soul Work Conference	-	3,550	-	-	3,550
Substance Abuse	-	5,885	-	-	5,885
Brownstone Fellowship	34,709	-	-	-	34,709
Emergency Fund	3,265	-	-	-	3,265
Adolescent Program	5,259	-	-	-	5,259
Tina Fund	3,000	-	-	-	3,000
Gender & Family	478,173	27,349	-	(50,000)	455,522
General operations	28,000	-	-	-	28,000
Challenge Grant Gift	100,578	-	91,766	(33,260)	159,084
International Training	38,583	-	-	(7,843)	30,740
Foster Care	5,275	-	-	(290)	4,985
Justice Project	51,702	-	-	(40,880)	10,822
Total	<u>\$ 2,948,182</u>	<u>\$ 193,924</u>	<u>\$ 372,841</u>	<u>\$ (513,260)</u>	<u>\$ 3,001,687</u>

ACKERMAN INSTITUTE FOR THE FAMILY

Notes to Financial Statements (continued)

June 30, 2019

Note 7 – Endowments and net assets with donor restrictions (continued)

The following is a summary of the Ruth Perl Kahn Fund, Maslow Scholarship Fund and the Challenge Grant Gift as of June 30, 2019 and June 30, 2018:

	2019		
	Temporary Restricted	Perpetually Restricted	Total
Ruth Perl Kahn Fund	\$ 1,910,931	\$ 1,773,933	\$ 3,684,864
Maslow Scholarship Fund	116,418	-	116,418
Challenge Grant Gift	159,084	1,000,000	1,159,084
Total	\$ 2,186,433	\$ 2,773,933	\$ 4,960,366
	2018		
	Temporary Restricted	Perpetually Restricted	Total
Ruth Perl Kahn Fund	\$ 1,815,189	\$ 1,773,933	\$ 3,589,122
Maslow Scholarship Fund	143,191	-	143,191
Challenge Grant Gift	100,578	1,000,000	1,100,578
Total	\$ 2,058,958	\$ 2,773,933	\$ 4,832,891

Note 8 – Commitment and contingency

Employee agreement

The Organization is obligated under an agreement with a key employee for three years, which commenced July 23, 2018. The agreement provides for certain termination provisions.

Government programs

Government supported programs are subject to audits by the granting agency.

Note 9 – Related party transactions

A member of the Board of Directors is a principal in a brokerage firm that manages several of the Organization's investment funds. Nominal fees in the nature of cost recovery were paid to the brokerage firm during the 2019 and 2018 fiscal years. Furthermore, a second member of the Board of Directors is in senior management of a brokerage firm that functions as a custodian for a portion of the Organization's investment funds. Nominal fees in the nature of cost recovery were paid to the brokerage firm during the 2019 and 2018 fiscal years.

ACKERMAN INSTITUTE FOR THE FAMILY**Notes to Financial Statements (continued)****June 30, 2019****Note 10 – Retirement plans****403(b) plan**

All eligible employees of the Organization can participate in the 403(b) savings plan (the “savings plan”). An eligible employee may contribute a portion of his/her compensation in accordance with Internal Revenue Service regulations. The Organization matches the participants’ contributions to the savings plan up to 10% of the individual participants’ contributions after one year of service. The savings plan expense for the years ended June 30, 2019 and June 30, 2018 was \$21,776 and \$13,250, respectively.

Defined contribution plan

The Organization also has a defined contribution retirement plan (the “retirement plan”) for one current employee. The Organization closed this plan for new employees and established the 403(b) plan above. The Organization does not contribute to the retirement plan.

Deferred compensation plan

The Organization maintains a non-qualified 457(b) deferred compensation plan (the “plan”) for a former key employee. For the year ended June 30, 2018, the Organization contributed \$15,000 to the plan. There was no contribution for the 2019 fiscal year. The assets of the plan remain assets of the Organization until paid to the former key employee.

Note 11 – Legal proceeding

The Organization is currently involved in a legal proceeding arising in the ordinary course of business. The Organization believes it has a defense for the proceeding and is vigorously defending the action. In the opinion of management of the Organization, the resolution of the matter will not have a materially adverse effect on the Organization’s financial statements.

Note 12 – Tax status

The Organization is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code (the “Code”). In addition, the Organization has been determined by the Internal Revenue Service to be a publicly supported organization, and not a private foundation within the meaning of Section 509(a)(2) of the Code. Donors are eligible to receive the maximum charitable tax deductions available for public charities under the Code.