## Return of Organization Exempt from Income Tax

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

OMB No 1545-0047

2004

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

7	Ą	For the 2004 calendar year, or tax year beginning 10/01 , 200	4, and	ending	9/30	)		2005	
Ε	В	Check if applicable				D Em	ployer Ident	tification Number	r
		Address change   Please use   ADOPTION   ADVOCATES   INTERNATIONAL	,			91	l-1215	595	
		Name change or print 709 SOUTH PEABODY			1	E Tele	phone num	nber	
		Initial return See PORT ANGELES, WA 98362				36	50-452	-4777	
		Final return tions.				F Acc	ounting hod:	Cash 2	Accrual
		Amended return			į	<u> </u>	Other (spec		
		Application pending • Section 501(c)(3) organizations and 4947(a)(1) nonexem	ot	H and l a	re not applic	able to s			
		Charitable trusts must attach a completed Schedule A	-	1	s this a group			_	X No
	_	(Form 990 or 990-EZ).			f 'Yes,' enter				
٢	<u> </u>	Web site: ► N/A		H (c)	Are all affilial	es includ	led?	Yes	∏ No
J	J	Organization type	٦		(If 'No,' attac	n a list S	see instructi	ons)	
-	_	(check only one) ► X 501(c) 3 ◄ (insert no) 4947(a)(1) or	527	H (d)	s this a sepa	rate retur	rn filed by a	.n	
r	`	Check here   ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need not file a return with the IRS, but if the organization need need need need need need need ne			organization (	overed t	y a group n	uling? Yes	X No
		received a Form 990 Package in the mail, it should file a return without financia		1 (	Group Exe	mptio	n Numbe	r •	
		Some states require a complete return.		M (	Check -	X if th	ie organizat	tion is not requir	red
ī	_	Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ► 2, 989, 995.		] t	o attach Sch	edule B	(Form 990,	990-EZ, or 990-	PF)
F	Pa	Revenue, Expenses, and Changes in Net Assets or Fund	Balar	ices (S	See Instru	ctions)			
-		1 Contributions, gifts, grants, and similar amounts received							
		a Direct public support	_  <u>_</u> 1;	a	467,	359.			
		<b>b</b> Indirect public support	11	b					
		c Government contributions (grants)	10	С					
چ		d Total (add lines fa through 1c) (cash \$ 467, 359. noncash \$	)				1 d	467	,359.
<b>5002</b>		2 Program service revenue including government fees and contracts (from F	art VII	, line 93	5)		2	2,521	,937.
0		3 Membership dues and assessments					3	<del>.</del>	
က		4 Interest on savings and temporary cash investments					4		699.
		5 Dividends and interest from securities					5		
SCANNED IJAN		6a Gross rents	6	a					
		<b>b</b> Less rental expenses	61	b	<del> </del>				
		c Net rental income or (loss) (subtract line 6b from line 6a)					6c		
Z	Ŗ	7 Other investment income (describe				)	7		
Z	R = > E	8a Gross amount from sales of assets other (A) Securities		<del></del>	(B) Other	· 			
Ķ	NU	than inventory	88	-					
$\mathcal{C}$	Ĕ	b Less cost or other basis and sales expenses	81	<del></del>					
U)		c Gain or (loss) (attach schedule).	86	<u> </u>					
		d Net gain or (loss) (combine line 8c, columns (A) and (B))			- 1	<del></del> 1	84		
		9 Special events and activities (attach schedule) If any amount is from gam	•	eck her	e 🏲				
		a Gross revenue (not including \$ of contribution	1	1					
		reported on line 1a)	9;	$\overline{}$			-		
		b Less direct expenses when than fundraising expenses	91	0					
		c Net income or toss), itom special events (subtract line 9b from line 9a)	.مد ا	_ }			9c		
		10 a Gross sales of inventory, less returns and allowances  b Less cosula goods codulo	10:						
		1031 - 1031	101	0	-		10.		
		c Gloss profit or (loss) from sales of invention (attach schedule) (subtract line 10b from line 10b	)				10 c		
		11 Other revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)					11	2 000	005
_							13	2,989 2,588	
	E	<ul><li>13 Program services (from line 44, column (B))</li><li>14 Management and general (from line 44, column (C))</li></ul>					14		, 112. , 811
	EXPENSES	15 Fundraising (from line 44, column (D))					15	100	,011_
	Ñ	16 Payments to affiliates (attach schedule).					16		
	E	17 Total expenses (add lines 16 and 44, column (A))					17	2,754	923
		18 Excess or (deficit) for the year (subtract line 17 from line 12).					18		,072.
	S	19 Net assets or fund balances at beginning of year (from line 73, column (A	1)				19		743.
Ë	ASSET TEST	20 Other changes in net assets or fund balances (attach explanation)	''				20		<u>, 15.</u>
,	` T	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)					21	980	,815.
E	3A	A For Privacy Act and Paperwork Reduction Act Notice, see the separate instru	ictions		TEEA01	07L 01			<b>90</b> (2004)

Partill Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

C	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch)					
	(cash \$					
22	non-cash \$) Specific assistance to individuals (att sch) St 1	22	291,639.	201 620		
23 24		24	291,039.	291,639.		
25		25	119,501.	119,501.		attendance of the second
	Other salaries and wages	26	320,707.	320,707.		
27	Pension plan contributions	27	59,061.	59,061.		
28	Other employee benefits	28	80,490.	80,490.		
29	Payroll taxes	29	33,703.	33,703.	· · · · · ·	
30	Professional fundraising fees	30				
31	Accounting fees	31				
32	Legal fees	32	16,962.		16,962.	
33	Supplies	33	31,633.	<del></del> -	31,633.	
34	Telephone	34	30,541.	30,541.		
35	Postage and shipping	35	43,356.	42,229.	1,127.	
36	Occupancy	36	6,600.		6,600.	
37	Equipment rental and maintenance	37	5,756.		5,756.	
38	Printing and publications	38	1,483.		1,483.	
39	Travel	39	91,889.	91,889.		
40	Conferences, conventions, and meetings.	40				
41	Interest	41	8,615.		8,615.	
42	Depreciation, depletion, etc (attach schedule)	42	5,348.		5,348.	
	Other expenses not covered above (itemize)		1 607 600	1 510 050		
á	See Statement 2	43a	1,607,639.	1,518,352.	89,287.	
	D	43b	<del></del>			
(	<u></u>	43 c	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
(	<sup>0</sup>	43d 43e				
44	Total functional expenses (add lines 22 - 43)	43e				
	Total functional expenses (add lines 22 - 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	2,754,923.	2,588,112.	166,811.	0.
loin	t Costs. Check If you are following	لننا		2,300,112.	100,011.	<u></u>
	any joint costs from a combined education			solicitation reported in (	B) Program services?	► Yes X No
	es,' enter (i) the aggregate amount of these				mount allocated to Prog	
\$_	, (iii) the amount all	ocated	to Management and ge		, and (iv) th	e amount allocated
	undraising \$					
	till Statement of Program Serv				· · · · · · · · · · · · · · · · · · ·	
Wha	t is the organization's primary exempt purp	oose?	► ADOPTION SE		5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,	Program Service Expenses (Required for 503 (c)(3) and
All o clier	organizations must describe their exempt p nts served, publications issued, etc. Discus ons and 4947(a)(1) nonexempt charitable	urpose s achi	e achievements in à clea evements that are not n	ar and concise manner neasurable (Section 50	State the number of 1(c)(3) & (4) organ-	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
		trusts	must also enter the amo	ount of grants & allocati	ons to others)	optional for others)
	ADOPTION_SERVICES	<del>-</del>				
			~~~~~~			2 206 472
	200,000		(Grants and	d allocations \$		2,296,473.
•						
	b FOSTER CARE					
	FOSTER CARE	 				
	FOSTER CARE	 	(Coasts and	t allocations		201 630
	b FOSTER CARE	  	(Grants and	d allocations \$		291,639.
•	FOSTER CARE	 	(Grants and	allocations \$		291,639.
•	FOSTER CARE	  	(Grants and	d allocations \$		291,639.
•	C	  				291,639.
,	C			d allocations \$		291,639.
•	b FOSTER CARE				)	291,639.
•	C				)	291,639.
•	C		(Grants and	d allocations \$	)	291,639.
	d		(Grants and	d allocations \$	)	291,639.
	C		(Grants and	d allocations \$ d allocations \$ d allocations \$	)	291,639.

### Part Val Balance Sheets (See Instructions)

Not			ere required, attached schedules and amounts within imn should be for end-of-year amounts only	the a	lescription	(A) Beginning of	year		<b>(B)</b> End of year
		45	Cash — non-interest-bearing			100	,146.	45	185,550.
			Savings and temporary cash investments				,607.	46	186,471.
		47.	Accounts receivable	47 a	473,323.				
			Less allowance for doubtful accounts	47 b	413,323.	200	, 956.	47 c	473,323.
		U	Less allowance for doubtful accounts		<del></del>	200	, 330.	1	475,525.
I		48 a	Pledges receivable	48 a	1				
			Less allowance for doubtful accounts .	48 b				48 c	
ļ		49	Grants receivable			38,	747.	49	35,839.
A S	;	50	Receivables from officers, directors, trustees, and k employees (attach schedule).	ey				50	
A S E T S			Other notes & loans receivable (attach sch)	51 a	Ţ				
S		b	Less allowance for doubtful accounts.	51 b				51 c	
	!	52	Inventories for sale or use					52	
	!	53	Prepaid expenses and deferred charges					53	
	!	54	Investments – securities (attach schedule)		► Cost FMV			54	
	,	55 a	Investments - land, buildings, & equipment basis	55 a					
			Less accumulated depreciation (attach schedule)	55 b		134	306.	55 c	
			Investments – other (attach schedule)	330			. 300.	56	
			Land, buildings, and equipment basis	57a	453,376.			200	
-		b	Less accumulated depreciation						
ı			(attach schedule) Statement 3	57 b	47,989.	4 ,	707.	57 c	405,387.
			Other assets (describe  See Statement 4		)		1.	58	2,537.
_	_		Total assets (add lines 45 through 58) (must equal	line 74	)		470.	59	1,289,107.
			Accounts payable and accrued expenses		-	82	<u>.727.</u>	60	62,149.
LIABILITIES			Grants payable		Ļ			61	
β			Deferred revenue					62	
ij			Loans from officers, directors, trustees, and key employees (attach	i scheau	lie)	<del></del>		63 64 a	
†	'		Tax-exempt bond liabilities (attach schedule)		-		.,	64 b	246,143.
Ė			Mortgages and other notes payable (attach schedule) Other Irabilities (describe ►		,			65	240,143.
			Total liabilities (add lines 60 through 65)			82	727.	66	308,292.
	_			nd com	plete lines 67	02,	727.	383	300,232.
NET		-	through 69 and lines 73 and 74						
- 1	(		Unrestricted		į	528	152.	67	590,989.
\$	(	68	Temporarily restricted				285.	68	
AUSOMI	(	69	Permanently restricted			134	306.	69	389,826.
o R	Org	gania	zations that do not follow SFAS 117, check here 🕨		and complete lines		_	1	
			70 through 74	_	ļ				
LUX0	•		Capital stock, trust principal, or current funds					70	
			Paid-in or capital surplus, or land, building, and equ	•	<b>-</b>			71	
A I	•	72	Retained earnings, endowment, accumulated incom	e, or c	other funds			72	<del></del>
おくしくていいい		73	Total net assets or fund balances (add lines 67 thro 72, column (A) must equal line 19, column (B) mus	ough 6 t equa	9 <b>or</b> lines 70 through Il line 21)	745	,743 <u>.</u>	<b>多</b> 更 73	980,815.
		74	Total liabilities and net assets/fund balances (add )	ines 6	6 and 73)	828	470.	74	1,289,107.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

Par	Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Instructions )					PartilV:B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return								
a	Total revenue, gains, per audited financial	and other support statements	a	N/A	а	Total expenses and financial statement	l losses per audited s	a	N/A					
b	Amounts include not on line 12, F	ed on line <b>a</b> but form 990			b	Amounts included on line 17, Form 99								
(1)	Net unrealized gains on investments	ŝ			(1)	Donated serv- ices and use of facilities.	¢	門籍						
(2)	Donated services and use				(2)	Prior year adjust- ments reported on	×	X.						
(3)	of facilities  Recoveries of prior year grants	\$	教系的		(3)	Losses reported on	\$ \$	機器						
(4)	Other (specify)	*			(4)	Other (specify)	Υ							
	Add amounts on lines	\$ s (1) through (4)	b			Add amounts on lines (1	\$	Big b						
С	Line a minus line		C		c	Line a minus line b	<i>y</i> anough (1) <b>▶</b>	c						
d	Amounts include Form 990 but no	ed on line 12, it on line <b>a:</b>			d	Amounts included of Form 990 but not o		代表語						
(1)	Investment expenses not included on line	٠			(1)	Investment expenses not included on line		HA CASA						
(2)	6b, Form 990 Other (specify)	ې <u>-</u>			(2)	6b, Form 990 Sther (specify)	·							
(-)		¢			(2)									
	Add amounts on	lines (1) and (2)	d			Add amounts on lir	es (1) and (2)	d.	ingle of the state					
e	Total revenue pe	er line 12, Form	е		e	Total expenses per 990 (line c plus line	line 17, Form	e						
Part	V List of C	Officers, Directors	, T	rustees, and Key E	mplo	yees (List each or	ne even if not compe	ensa	ted, see instructions)					
		and address		B) Title and average ho per week devoted to position		(C) Compensation (if not paid, enter -0-)	(D) Contributions employee benefi plans and deferre compensation	to it	(E) Expense account and other allowances					
MER	RILY RIPLEY	<u> </u>	1	Executive Direc		119,501.		0.	0.					
			"	•										
							<del> </del>	-						
		·												
<b>-</b>														
			+					_						
- <del>-</del> -			. 🚽											
75	than \$100,000 \$10,000 was pi	director, trustee, or from your organization your organization ovided by the related schedule — see instri	n ar org		egate o	compensation of mo which more than		<b>-</b> [	Yes X No					

Form 990 (2004) ADOPTION ADVOCATES INTERNATIONAL	91-121559	5	F	age 5
Partivil Other Information (See instructions.)			Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If 'Yes.'			100	-
<ul><li>attach a detailed description of each activity</li><li>Were any changes made in the organizing or governing documents but not reported to t</li></ul>	ha IDC 2	76		<u>X</u>
If 'Yes,' attach a conformed copy of the changes	ne iks '	77_	7.6	
78a Did the organization have unrelated business gross income of \$1,000 or more during the	wear covered by this return?	78 a	X	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	year covered by this return.	78b	N.	
		700		
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement		79	: 44 Manuschiller 7.1	X
80 a Is the organization related (other than by association with a statewide or nationwide organization)	anization) through common			
membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt	ot organization?	80 a		Х
b If 'Yes,' enter the name of the organization ► N/A				翻
and check whether it is	exempt or nonexempt			
81 a Enter direct and indirect political expenditures. See line 81 instructions	81a 0.			
b Did the organization file Form 1120-POL for this year?		81 b	A. Office by to	X
82 a Did the organization receive donated services or the use of materials, equipment, or fac	ilities at no charge or at			222
substantially less than fair rental value?		82 a	RS-SEPRE	X
bilif 'Yes,' you may indicate the value of these items here. Do not include this amount as	026 31/3			
revenue in Part I or as an expense in Part II (See instructions in Part III)  83a Did the organization comply with the public inspection requirements for returns and exer	82b N/A	83 a	X	
b Did the organization comply with the disclosure requirements relating to guid pro quo co	· · · · · · · · · · · · · · · · · · ·	83 b		
84a Did the organization comply with the disclosure requirements relating to quit pro quo co	intributions.	84 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that su not tax deductible?	ch contributions or gifts were	84 b	N	A
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members	oers?	85 a	N,	/A
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	N,	/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unle	ess the organization received a		22	
waiver for proxy tax owed for the prior year				
c Dues, assessments, and similar amounts from members	85 c N/A	]	38	
d Section 162(e) lobbying and political expenditures	85 d N/A			
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85 e N/A			
f Taxable amount of lobbying and political expenditures (line 85d less 85e).	85f N/A			
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 g	N	/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its dues allocable to nondeductible lobbying and political expenditures for the following tax year?	reasonable estimate of	85 h	N,	/A
86 501(c)(7) organizations Enter. a Initiation fees and capital contributions included on				
line 12	86 a N/A			
b Gross receipts, included on line 12, for public use of club facilities	86 b N/A			
37 501(c)(12) organizations Enter a Gross income from members or shareholders	87a N/A			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources	37.73			
against amounts due or received from them )	87b N/A			
88 At any time during the year, did the organization own a 50% or greater interest in a taxa or an entity disregarded as separate from the organization under Regulations sections 3 If 'Yes,' complete Part IX	able corporation or partnership, 01 7701-2 and 301 7701-3?	88		X
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the ye	ear under		A TANK	
section 4911 ► 0., section 4912 ► 0., section				
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 during the year or did it become aware of an excess benefit transaction from a prior year	excess benefit transaction		C (346) A	
explaining each transaction	•	89 ь		X
c Enter Amount of tax imposed on the organization managers or disqualified persons dur year under sections 4912, 4955, and 4958	ing the			0.
d Enter Amount of tax on line 89c, above, reimbursed by the organization	<b>•</b>			0.
90 a List the states with which a copy of this return is filed ► WASHINGTON				
b Number of employees employed in the pay period that includes March 12, 2004 (See ins		90 b	L	5
- ~·····	e number • 360-452-47			
Located at > 709 S. PEABODY ST PORT ANGELES, WA	ZIP + 4 ► <u>9836</u>			<del></del>
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 – C	1 1	N/	A	<b>►</b> [_
and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92			N/A
BAA		Form	990	(2004)

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31 500 - 6840.000	grandity sid of income 1 foud	T		<del>/</del>		<del>,</del>
Note: Ente	er gross amounts unless indicated	(A) Business code	d business income (B) Amount	Excluded by s  (C)  Exclusion code	(D) Amount	(E) Related or exempt function income
	ogram service revenue OOPTION FEES					1,963,940.
b DC	FS/FOSTER CARE			T		556,659.
	ROFESSIONAL FEE			<del>                                     </del>		1,338.
d				<del> </del>		1,330.
		<del></del>		† · · · · · · · · · · · · · · · · · · ·		
	dicare/Medicaid payments.			<del>                                     </del>		<del></del>
	s & contracts from government agencies.		<del></del>	┼───	<del></del>	<del></del>
-	mbership dues and assessments	<del> </del>		<del> </del>		
	rest on savings & temporary cash invmnts	<del></del>	<u> </u>	<del> </del>		699.
	idends & interest from securities	<del></del>		<del> </del>		033.
	rental income or (loss) from real estate:	TOTAL STREET,	WINDS AND DESCRIPTION OF			
-,	• • • •	W.C. SHAREST STORY	A CONTRACTOR OF THE PROPERTY O			2000年100日
	ot-financed property			<del> </del>	<del></del>	
	debt-financed property			<del> </del>		
	rental income or (loss) from pers prop			<del> </del>	-	ļ
	ner investment income					
oth	n or (loss) from sales of assets er than inventory income or (loss) from special events					
				<del> </del>		<del></del>
	ss profit or (loss) from sales of inventory	SE TOURSE THE SECOND SEC	SECOND PARTY OF THE PARTY OF TH		Chief farmer of the Chief	THE PROPERTY OF THE PROPERTY OF THE PARTY OF
	ner revenue. a			S TOTAL STREET	No. of the second secon	444 144 144 144 144 144 144 144 144 144
b				<u> </u>		
ċ.—-		ļ		<del> </del>		
		<u> </u>		<del>                                      </del>		
e	111 (111 11 11 11 11 11 11 11 11 11 11 1	THE THE LEVEL WHEEL	· -	THE PROPERTY OF THE PARTY OF TH		2 522 626
	total (add columns (B), (D), and (E))			F-ROMAN P	<u> </u>	2,522,636.
	tal (add line 104, columns (B), (D),				_	2,522,636.
	105 plus line 1d, Part I, should eq				<del></del>	
Partwill	Relationship of Activities	to the Acco	mplishment of Ex	empt Purpos	es (See instructions )	
Line No.	Explain how each activity for whi	ch income is re	eported in column (E)	of Part VII contr	ibuted importantly to th	e accomplishment
•	of the organization's exempt purp	ooses (other th	an by providing funds	for such purpos	es).	•
N/A					<del> </del>	
			<del></del>		<del></del>	
	<del></del>		· <del>· · · · · · · · · · · · · · · · · · </del>			
BD34ilVa	Information Regarding Tax	rabla Subci	diaries and Disres	arded Entitie	35 (Saa matrustiana)	
ME ALLENA						
	(A)	(B)	(0	<b>5)</b>	(D)	(E)
	address, and EIN of corporation,	Percentage		activities	Total	End-of-year
part	tnership, or disregarded entity	ownership in	terest		ıncome	assets
N/A			%	_		
			8			
			8			
			8			
Part X	Information Regarding Tra	nsfers Ass		onal Benefit	Contracts (See Instri	uctions )
	e organization, during the year, receive any f	•	· · · · · · · · · · · · · · · · · · ·	i a personai benenti	South act,	Yes X No
	he organization, during the year, p					
Note: /	f 'Yes' to <b>(b),</b> file Form 8870 <b>and</b> F					
	Under penalties of perjury, I declare that I hat true, correct and complete Declaration of p	ave examined this r reparer (other than	eturn, including officer) is based			
Diana	· Minn dx	•				
Please	Signature of officer					
Sign Here						
nere	MERRILY RIPLEY, Ex	<u>ecutive D</u>	irector			
	Type or print name and title	1 /				
Da: -	Property /					
Paid	Preparer s signature Charles S	McClain-				
Pre-		use & Co.	, PS			
parer's Use	vous if solf		, 10			
Only	employed) address, and Dant April 2		C2 C441			
	ZIP + 4 Port Angele	s, WA 983	62-6441			
BAA						

### SCHEDULE A (Form 990 or 990-EZ)

## Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

2004

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

Name of the organization Employer identification number 91-1215595 ADOPTION ADVOCATES INTERNATIONAL Part 表 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions List each one. If there are none, enter 'None') (d) Contributions to employee benefit (a) Name and address of each (b) Title and average (c) Compensation (e) Expense employee paid more than \$50,000 hours per week account and other plans and deferred devoted to position allowances compensation MERRILY RIPLEY EXECUTIVE DIR 40 0 119,501 0. MERELENE E. HELPENSTELL 40 0 73,710 0. JANELLE M. GRAY 0. 65,572 0. 40 KATHY L. SCULLEY 0 66,728. 0. 40 Total number of other employees paid over \$50,000 Part llow Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions List each one (whether individuals or firms) If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Total number of others receiving over \$50,000 for professional services

Dari		5	- 1	age
Laur	Statements About Activities (See instructions.)		Yes	
1 D	uring the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid			-
	incurred in connection with the lobbying activities >\$ N/A			
(1	fust equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		X
C 0 10	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the bying activities.			
Si ta	uring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any ibstantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any xable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal eneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)			
a S	ale, exchange, or leasing of property?	2a		Х
bι	ending of money or other extension of credit?	2b		Х
c F	urnishing of goods, services, or facilities?	2 c		Х
dР	syment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		Х
e T	ansfer of any part of its income or assets?	2 e		X
3a D	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an			
	planation of how you determine that recipients qualify to receive payments)	3a		X
	byou have a section 403(b) annuity plan for your employees?	3 b		X
a D	d you maintain any separate account for participating donors where donors have the right to provide advice in the use or distribution of funds?	4a		Х
<b>b</b> D	you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		Х
5   6   7   7   8   9   1   1   1   1   1   1   1   1   1	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital.  and state.  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV-A.)  An organization that normally receives a substantial part of its support from a governmental unit or from the general Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)  A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)  An organization that normally receives. (1) more than 33-1/3% of its support from contributions, membership fees, artifrom activities related to its charitable, etc, functions.— subject to certain exceptions, and (2) no more than 33-1/3% from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquire organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization 509(a)(3).)	public public and grosof its sed by it	ss rec	A)(iv
	Provide the following information about the supported organizations (See instructions )			
	(a) Name(s) of supported organization(s)	(b) Lii fror	ne nu n abo	
				-

	Support Schedule (( : You may use the worksheet in the					accounting.
Cale	ndar year (or fiscal year nning in)	<b>(a)</b> 2003	<b>(b)</b> 2002	(c) 2001	<b>(d)</b> 2000	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	236,828.	139,035.	91,189.	100,46	59. 567,521.
16	Membership fees received					001/0221
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	2,108,144.	1,427,451.	1,223,863.	1,070,70	06. 5,830,164.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.	729.	557.	210.	2,04	
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	2,345,701.	1,567,043.	1,315,262.	1,173,22	
24	Line 23 minus line 17	237,557.	139,592.	91,399.	102,51	
_25	Enter 1% of line 23	23,457.	15,670.	13,153.	11,73	
	Organizations described on line: Prepare a list for your records to show the supported organization) whose total gifts f return. Enter the total of all these excess a	name of and amount contri or 2000 through 2003 exceed	er 2% of amount in co buted by each person (othe fied the amount shown in li	er than a governmental unit	t or publicly	26 a
	Total support for section 509(a)(1	•	column (e)		► <u>2</u>	26c
d	Add Amounts from column (e) for	or lines: 18		19		
	Public cupport (line 26e minus lin			26 b	<del> </del>	26 d
	Public support (line 26c minus lin Public support percentage (line 2	•	ad by line 26c (dance		<u> </u>	26e %
27	Organizations described on line For amounts included in lines 15, name of, and total amounts recei such amounts for each year	12: , 16, and 17 that were	received from a 'disc	qualified person,' pre	pare a list for you	ur records to show the
	(2003)	(2002)	0 . (2001)	0	(2000)	· <u>0</u> ·
t	For any amount included in line 17 show the name of, and amount re \$5,000 (Include in the list organi computing the difference between (the excess amounts) for each year	eceived for each year, zations described in li n the amount received	, that was more than ines 5 through 11, as	the larger of (1) the well as individuals)	amount on line 25  Do not file this li	5 for the year or (2) st with vour return. After
	(2003)	(2002)	0. (2001)	0	(2000)	<u>0</u> .
С	Add Amounts from column (e) for 17 5, Add Line 27a total	or lines 15	567,521.	16 21		27c 6,397,685.
d	Add Line 27a total	0. an	d line 27b total		0.	27d 0.
е	Public support (line 2/c total min	ius line 27d total)			<b>~</b>   2	27 <b>e</b>   6,397,685.
	Total support for section 509(a)(2				5,401,230. 🛭	
-	Public support percentage (line	•	-	**		27g 99.94 %
	Investment income percentage (	<del></del>		<del></del>	<del></del>	27h 0.06 %
28	Unusual Grants: For an organizalist for your records to show, for enature of the grant Do not file the	each year, the name of	of the contributor, the	date and amount of	ants during 2000 the grant, and a	through 2003, prepare a brief description of the

Private School Questionnaire (See instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 29 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe; if 'No,' please explain (If you need more space, attach a separate statement) 32 Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff? 32 a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? 32 d If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement) 33 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 33 a b Admissions policies? 33b c Employment of faculty or administrative staff? 33 c d Scholarships or other financial assistance? 33 d e Educational policies? 33 e f Use of facilities? 33f 33 g q Athletic programs? h Other extracurricular activities? 33 h If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement) 34a Does the organization receive any financial aid or assistance from a governmental agency? 34 a b Has the organization's right to such aid ever been revoked or suspended? 34 b If you answered 'Yes' to either 34a or b, please explain using an attached statement Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation.

Lobbying Expenditures by Electing Public Charities (See instructions ) (To be completed ONLY by an eligible organization that filed Form 5768) Check > If the organization belongs to an affiliated group Check ► b If you checked 'a' and 'limited control' provisions apply Limits on Lobbying Expenditures Affiliated group To be completed for ALL electing totals (The term 'expenditures' means amounts paid or incurred ) organizations 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 36 Total lobbying expenditures to influence a legislative body (direct lobbying) 37 37 Total lobbying expenditures (add lines 36 and 37) 38 38 39 Other exempt purpose expenditures 39 40 Total exempt purpose expenditures (add lines 38 and 39). 40 41 Lobbying nontaxable amount Enter the amount from the following table -If the amount on line 40 is -The lobbying nontaxable amount is -Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 41 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000 42 Grassroots nontaxable amount (enter 25% of line 41) 42 43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 43 44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720 4 -Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50) Lobbying Expenditures During 4 - Year Averaging Period Calendar year (a) (b) (c) (d) (e) (or fiscal year 2004 2003 2002 2001 Total beginning in) > Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See instructions) N/A During the year, did the organization attempt to influence national, state or local legislation, including any No **Amount** attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers b Paid staff or management (Include compensation in expenses reported on lines c through h.) c Media advertisements d Mailings to members, legislators, or the public e Publications, or published or broadcast statements f Grants to other organizations for lobbying purposes q Direct contact with legislators, their staffs, government officials, or a legislative body h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means ·大水芹品 等 i Total lobbying expenditures (add lines c through h.) If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities

# Part III Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See Instructions)

51 Did the	e reporting organization Code (other than sectio	directly or in 501(c)(3) (	ndirectly engage in any of the following or in section 527, relations	ng with any other organization described ting to political organizations?	I in section	on 50	1(c)
			to a noncharitable exempt organization			Yes	No
(i)Ca					51 a (i)		X
	her assets .			<del> -</del>	a (ii)		$\frac{x}{x}$
	transactions.		•	· · · · · · ·			
		sets with a n	oncharitable exempt organization	ì	b (i)	]	Х
• •	-		ble exempt organization	·	b (ii)		X
` '	ental of facilities, equipm		. •	·  -	b (iii)		X
, ,	embursement arrangem	-		·	b (iv)		X
	ans or loan guarantees		·	·	b (v)		X
` '	-	or membersh	ip or fundraising solicitations	-	b (vi)	<del></del> †	X
• •			its, other assets, or paid employees	<del>[</del>	c c		$\frac{x}{x}$
				lumn (b) should always show the fair mark organization received less than fair mark oods, other assets, or services received		ie of	<u></u>
(a) Line no	(b) Amount involved		(c) noncharitable exempt organization	(d) Description of transfers, transactions, and sh			ts
N/A							
						_	
		<u></u>					
		<u> </u>					
			iliated with, or related to, one or mor ther than section 501(c)(3)) or in sec	e tax-exempt organizations tion 527?	Yes	X	No
bil tes	,' complete the following	g scriedule	(b)	(c)			
	(a) Name of organization		Type of organization	Description of relations	hip		
N/A							
11/11							
	<del></del>						
				\			
BAA				Schedule A (Form 9	390 or 99	0-EZ	2004

Depreciation and Amortization
(Including Information on Listed Property)

See separate instructions.
Attach to your tax return.

OMB No 1545-0172

2004

67

Department of the Treasury Internal Revenue Service Name(s) shown on return

ADOPTION ADVOCATES INTERNATIONAL

Identifying number 91-1215505

	TION INVOCATION		<del></del>					1 1213393
	ess or activity to which this form rela							
	reciation schedu		Number of Linday Co.	4: 170				
Par	Election To Exp	bense Certain F Inv listed property.	complete Part V before	XION 1/9 Evou complete	Part I			
1	Maximum amount. See in						1	\$102,000.
2	Total cost of section 179 p	-					2	<del>4202,000.</del>
3	Threshold cost of section		•	-			3	\$410,000.
4	Reduction in limitation. Su	• • •			•		4	73207000
5	Dollar limitation for tax ye		,	-	f married	filina		
	separately, see instruction	is					5	
6_	(a)	Description of property		(b) Cost (busines	s use only)	(C) Elected co	st	
				<u> </u>				
7	Listed property Enter the	amount from line 2	29		_ 7_			
8	Total elected cost of section	on 179 property. A	dd amounts in column (	(c), lines 6 and	7		8	
9	Tentative deduction Enter	the smaller of line	e 5 or line 8				9	
10	Carryover of disallowed de	eduction from line	13 of your 2003 Form 4!	562			10	
11	Business income limitation	n Enter the smalle	r of business income (r	not less than ze	ro) or line	5 (see instrs)	11	
12	Section 179 expense dedu	uction Add lines 9	and 10, but do not ente	er more than lin	e 11		12	
13	Carryover of disallowed de	eduction to 2005, A	dd lines 9 and 10, less	line 12	▶ 13			<b>经验的</b>
Note	: Do not use Part II or Part	III below for listed	property Instead, use	Part V				
Par	till Special Deprec	iation Allowand	ce and Other Depre	eciation (Do n	ot include	listed property	)	
14	Special depreciation allow tax year (see instructions)	rance for qualified	property (other than list	ed property) pla	aced in se	ervice during the	14	
15	Property subject to section	15						
16	Other depreciation (includ	16	4,714.					
Par	till總 MACRS Depre	ciation (Do not in	clude listed property) (	See instruction	s)			
			Sectio	on A				
17	MACRS deductions for as	sets placed in serv	ice in tax years beginni	ng before 2004		<u> </u>	17	
18	If you are electing under s	section 168(i)(4) to	group any assets place	ed in service du	ring the ta	ax year into	1	
	one or more general asse	t accounts, check I	nere				類標	
	Section B	- Assets Placed i	n Service During 2004	Tax Year Using	the Gene	ral Depreciation	ı Syst	em
	(a) Classification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Conver		d	(g) Depreciation deduction
19 a	3-year property	TO A DECEMBER						
b	5-year property							
	: 7-year property							
d	10-year property				1			
	15-year property							
	20-year property				<u> </u>			
	25-year property			25 yrs		S/I		
×	Residential rental			27.5 yrs	MM			
	property			27.5 yrs	MN			<del></del>
i	Nonresidential real	<del>                                     </del>		39 yrs	MN			
	property				_+			<del> </del>
	hiobeith	!	ŀ		l Mr		_	
	<del></del>	· Assets Placed in	Service During 2004 Ta	ax Year Using t	he Altern			stem
20 a	Section C -	- Assets Placed in	Service During 2004 Ta	ax Year Using t		ative Depreciati	on Sy	stem
	Section C -	Assets Placed in	Service During 2004 Ta			ative Depreciation S/I	on Sy	stem
t	Section C – Class life o 12-year	Assets Placed in	Service During 2004 Ta	12 yrs	he Altern	ative Depreciation S/I	on Sy	stem
t	Section C - Class life 12-year 40-year		Service During 2004 Ta			ative Depreciation S/I	on Sy	stem
Par	Section C – Class life 12-year 40-year Viv Summary (see in	nstructions)	Service During 2004 Ta	12 yrs	he Altern	ative Depreciation S/I	on Sy	stem
21	Section C – Class life 12-year 40-year  Listed property Enter ame Total Add amounts from line 12	nstructions) ount from line 28, lines 14 through 17, lin	ies 19 and 20 in column (g), a	12 yrs 40 yrs	he Altern MN	ative Depreciation S/I	on Sy	
21 22	Section C – Class life 12-year 40-year Listed property Enter ame	nstructions)  ount from line 28  lines 14 through 17, lin rn Partnerships and So	ies 19 and 20 in column (g), a corporations — see instruction ce during the current ye	12 yrs 40 yrs	he Altern MN	ative Depreciation S/I	on Sy	4,714.

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

	columns	(a) through (c,	of Section A,	all of Se	ection B,	and Se	ction C	if ap	plical	ble			Compic	Oilly	270, 27	<b>,</b>
	Secti	on A — Deprec	iation and Oth	er Inform	nation (C	Caution:	See in:	struc	tions	for lin	its for p	oasseng	er autor	nobiles '		
24	Do you have eviden	ce to support the bo	usiness/investme	nt use claim	ned?	,l	Yes	ot	No 2	46 If "	res, is th	e evidenci	written?		Yes	No
τ <sub>j</sub>	(a) rpe of property (list vehicles first)	(b) Date placed in service	(C) Business/ investment use percentage	(d Cost other b	or	(busine	(e) or deprecia ss/investri se only)	ation nent	Re	(f) covery eriod	Me	(g) ethod/ vention	Depr	(h) reciation duction	Ele secti	(i) ected on 179 ost
25	Special deprec	iation allowance n 50% in a qual	e for qualified	listed pro	operty pl	laced in tions)	service	duri	ng the	e tax y	ear and	25				
26	Property used	more than 50%	ın a qualified	business	use (se	e instru	ctions)									
	<u> </u>	<del> </del>	<del> </del>			-									-	
 						<u></u>										
2/	Property used !	ou% or less in a	qualified bus	iness use	e (see in	struction	ns)·		<u> </u>		<del></del>				55740	
		<del> </del>	<del>   </del>	<del></del>		<del>                                     </del>				·	<del>-}</del> -					
28	Add amounts in	n column (h), lii	nes 25 through	27 Ente	er here a	and on I	ne 21,	page	: 1			28				
29	Add amounts in	n column (ı), lın												29		
	plete this section our employees, f		sed by a sole		r, partn	er, or ot	her 'mo	re th	an 5%	6 own						ehicles
30	Total business during the year miles — see in	(do not includ		1	a) icle 1	1 '	cle 2	<u></u>	(c) Vehicl	e 3	,	d) cle 4	! .	e) icle 5	Vehi	•
31	Total commuting m	ales driven during t	he year													
<b>3</b> 2	Total other per miles driven	sonal (noncom	muting)													_
33	Total miles driv lines 30 throug		ear Add													
				Yes	No	Yes	No	Ye	25	No	Yes	No	Yes	No	Yes	No
34	Was the vehicle during off-duty		personal use													
35	Was the vehicle than 5% owner	e used primarily or related pers	y by a more son?													
36	ls another vehi personal use?	cle available fo	r		,					1						
		Section	C – Questions	s for Emp	oloyers \	Who Pro	vide Ve	hick	es for	Use b	y Their	Employ	/ees			
	wer these question			an excep	otion to	complet	ng Sec	tion l	B for	vehicle	es used	by emp	loyees	who <b>are</b>	not mor	e than
37	Do you maintai by your employ	n a written poli rees?	cy statement t	hat prohi	bits all p	personal	use of	veh	cles,	ıncludı	ng com	muting,			Yes	No
38	Do you maintai employees? Se	n a written poli- ee instructions f	cy statement to	hat prohi	bits per	sonal us	e of vel	nicle:	s, exc	ept co	mmutin e owne	g, by yo	our			
39	Do you treat al	use of vehicle:	s by employee	s as pers	sonal us	e <sup>?</sup>										
40		more than five			oyees, o	btain inf	ormatio	n fro	m yo	ur emp	oloyees	about ti	he use o	of the		
41	Do you meet th		concerning q	ualified a	utomob	ile demo	nstratio	ก us ภา B	e <sup>7</sup> (s for th	ee ins	truction	s) ucles			<b>海沙芒</b>	李等
Pă	rt-VI達 Amort		, 60, 60, 61												Achesto March	141 -4 7
		(a) cription of costs		Date ar	(b) mortization egins		(C) Amortizat amount			Co	d) xde xtion	Amo pe	(e) intization riod or centage		(f) Amortizatio for this yea	
42	Amortization o	f costs that beg	ins during you	ır 2004 ta	ax year (	see inst	ructions	 5)				<del></del>		<del></del>		
	AN FEES				01/04			<u> 170</u>		4	61		5			634.
43		of anala that be		·- 2004 1									42	<del> </del>		
43		of costs that beg			-	o to roo	net.						43	<del> </del>		634

Category		Basis	Accum. Deprec.	Book <u>Value</u>
Machinery and Equipment Buildings Land	Ş	\$ 60,316. 258,754. 134,306.	\$ 44,755. 3,234.	\$ 15,561. 255,520. 134,306.
	Total 3	\$ 453,376.	\$ 47,989.	\$ 405,387.

Statement 4 Form 990, Part IV, Line 58 Other Assets

LOAN FEE Rounding

\$ 2,536. Total  $\frac{1}{5}$  2,537.