Form 990

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)

, 2002, and ending

Open to Public

, 20

Department of the Treasury Internal Revenue Service

A For the 2002 calendar year, or tax year beginning

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

2002 Inspection

OMB No 1545-0047

$\overline{\Box}$	e pplica	ddress change label or								Employer identification number 73-1078800				
н														
н	Named	•	type								Telephone number			
н	initial r		■							918-749-4600				
Н	Finalre	turn	Instruc-				SUITE	200			_	tg method Cash Accrual		
Н	Amend	ed return	tions	TULSA OK								Other (specify) ▶		
Ц	Applica	ation pendii	_{ng} ● Sed cha	ction 501(c)(3) or aritable trusts mi	ganization	is and 49- a comple	47(a)(1) none: ted Schedule	kempt A				cable to section 527 organization		
				rm 990 or 990- E		a comple	ted Schedule	^		l(a) Isthisa	group retu	urn for affiliates? Yes 🛮 No		
		site 🕨							_	l(b) if Yes, t	enter num	nber of affiliates		
				only one) 🕨 🔀 50					527 F	(C) Are all at	filietes in	nctuded? Yes No		
		there	if the ∐	organization's gre need not file a re	oss receipt:	s are nom	naily not more	than	i	in this ni		return filed by en -		
	ecer	ed a For	n 990 Paci	kage in the mail, i	t should file	a return	without finance	ial data	·	· · Organiza		red by a group ruling? Yes No		
	Some	states re	equire a c	omplete return							- digit G			
							0 005			VI Check	_ ▶ ∐ ₫	f organization is not required to		
				6b, 8b, 9b, and 1			2,923					(Form 990, 990- EZ, or 990- PF)		
Ľ	art i			xpenses, and			et Assets o	or Fur	nd Bai	ances (Se	e Speci	ific Instructions)		
				grants, and simila	r amounts	received				56 202				
		=	ublic supp					1a		<u>56,383</u>	•			
	6	Indirect	public sup	port				1 b						
				ibutions (grants)	-	5 6 2 2 6		1 c						
	d			a through 1c) (ca) 1			
	2			evenue including	_	it fees and	d contracts (fro	om Part	VII, line	93)	2			
	3		•	and assessments							3	- 		
	4		•	and temporary of		ments					4			
	5	Dividend	is and inte	erest from securition	es				ı		5	2,197.		
	6 a	Gross re	ents					6a						
	l t	Less re	ntal expen	ses				6 b			-	_		
_	C	Net rent	al income	or (loss) (subtract	t line 6b fro	m line 6a)				6			
Ž	7	Other in	vestment i	ncome (describe	•) 7	'		
Revenue	8 a	Gross a	mount fror	n sales of assets of	other		Securities	<u> </u>	(B) Other				
ř		than inv	entory				26,082.	8a						
	ļ t	Less co	st or other	basis & sales exp	penses		13 , 071.	8b						
				ich schedule)			.6,989.)	8c			 ∤	116 000 \		
	d	_	-	combine line 8c,		•)				8	d (16,989.)		
	9			d activities (attach	schedule)									
	a			it including \$			_ of	1 . 1	1					
			•	rted on line 1a)				9a			<u></u> ļ			
~				ses other than fur	_			9b			\dashv ,	_		
.				s) from special ev			b from line 9a)		Ī		9	<u>c </u>		
2				entory less return	s and allov	vances.		10a		<u> </u>				
0			st of good			44LLL		10b	0- 6-			, <u>, </u>		
SE	1			ss) from sales of it		πacn scne	edule) (subtra	ct line 1	υb πom	ine tua)	10			
	11			m Part VII, line 10		04 0- 40	141				11			
_	12			<u>ld lines 1d, 2, 3, 4</u> (from line 44, colu	_	pri ac 10					13			
닖	14	-		general (from line		n (C))	RE(FIV	ED	1	14			
2	1	_		•		ii (C)).	1763			1 <u>0</u>	19			
#	15 16		_	line 44, column (lites (attach sched)			1.1		0000	löl	16			
٣	17	-		add lines 16 and 4	•	(A))	ISI AUG	03	2003	H6-05C	17			
SA-	18			for the year (subt						- = 	18			
set	19			balances at begi				り作っ			19			
Net Assets SCANINED	20			net assets or fund				7.7		· • •	20	4.5 101 \		
Ž	21		-	balances at end				20)			21	1 - 12 0 1		
Fo	 			Act Notice, see t								Form 990 (2002		

01111 330 ((LUCE) DILLECT	111101111111111111111111111111111111111
Part II	Statement of	All organi
	Functional Exp	and (4) or penses Specific li

NATIONAL, INC.

73-1078800 Page 2

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 (See Specific Instructions)

) o no	tinclude amounts reported on line 65, 85, 95, 105, or 16 of Part I		(A) Total	(B) Program	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)					
	(cash \$)	22				
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25	Compensation of officers, directors, etc	25	87500.	61250.	13125.	13125.
26	Other salaries and wages	26	718190.	595949.	77640.	44601.
27	Pension plan contributions	27				<u> </u>
28	Other employee benefits	28	· 	· 		
29	Payroll taxes.	29	64455.	52576.	7261.	4618.
30	Professional fundraising fees.	30				
31	Accounting fees	31	3740.		3740	
32	Legal fees	32				
33	Supplies	33	46351.	38934.	2318.	5099.
34	Telephone	34	10356.	10356.		
35	Postage and shipping	35	21103.	10067.	0.5.5.4	11036.
36	Occupancy	36	95541.	76433.	9554.	9554.
37	Equipment rental and maintenance	37				
38	Printing and publications.	38				
39	Travel	39	00110	7.6400	0010	1.00
40	Conferences conventions, and meetings.	40	20119.	16498.	2012.	1609.
41	Interest	41	C1 F 1	C1 F 1		
42	Depreciation, depletion, etc. (attach schedule) Other expenses not covered	42	6151.	6151.		
43	SEE SCHEDULE ATTACHED	43a	1052064	1010046	1,000	04012
b		43Ь	1853964.	1812846.	16905.	24213.
С		43 c		· - 		
d		43 d				
44 44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)- (D), carry these totals to lines 13-15	43e	2927470.	2681060.	132555.	113855.
Joint	Costs Check ▶ ☐ if you are following SOP 98-2					·
	ny joint costs from a combined educational campaign a	ind fun	draising solicitation r	eported in (B) Progi	am services?	∏ Yes 🕅 No
	s," enter (i) the aggregate amount of these joint costs_		-			
	ne amount allocated to Management and general \$		and (iv) t			
Par	III Statement of Program Service Acco					
What All or serve 1947	is the organization's primary exempt purpose? ganizations must describe their exempt purpose achieved, publications issued, etc. Discuss achievements that a (a)(1) nonexempt charitable trusts must also enter the actions.	ements are not	s in a clear and conc measurable (Sectio	se manner State th	e number of clients organizations and	Program Service Expenses (Required for 501(c)(3) & (4) orgs & 4947(a)(1) trusts but optional for others)
a <u>_</u>	CHILDREN ADOPTION SERVICES					
ь -		(G	irants and allocations	s_\$)	2681060.
_						
-	• • • • • • • • • • • • • • • • • • • •	(C	Frants and allocations	; \$	· · · · · · · · · · · · · · · · · · ·	
c _		- , -				
-					<u> </u>	
d -	(Grants and allocations \$					
_						
-						
- -			erants and allocations)	
_	Other program services (attach schedule) otal of Program Service Expenses (should equal line	(0	Frants and allocations	s \$)	2681060.

Part IV Balance Sheets (See Specific Instructions)

Note	Where required, attached schedules and amount column should be for end- of- year amounts only		(A) Beginning of year		(B) End of year
4	5 Cash - non-interest-bearing		44,937.	45	54,939.
4	6 Savings and temporary cash investments			46	
4	7 a Accounts receivable	47a 187,715.		1 1	
	b Less allowance for doubtful accounts	47b	168,021.	47c	<u> 187,715.</u>
4	8 a Pledges receivable	48a 48b		149.4	
1	b Less allowance for doubtful accounts Grants receivable			48 c	·—···
	60 Receivables from officers, directors trustees a		+3-	<u></u>	
ĺ	(attach schedule)	nd kev emblovees		50	
5	if a Other notes and loans receivable (attach	<u> </u>	•	 	
	schedule)	51a			
_	b Less allowance for doubtful accounts	51 b		51 c	
Assets	2 Inventones for sale or use	\ !		52	
š 5	3 Prepaid expenses and deferred charges		13,731.	53	16,627.
5	4 Investments - securities (attach schedule)	► Cost FMV	449,707.	54	16,627. 364,936.
5	5 a Investments - land, buildings and				
	equipment basis	55a		1	
f	b Less accumulated depreciation (attach	1 1			
	schedule)	55b	<u>17,733.</u>	55 c	
5	6 Investments - other (attach schedule)			56	3,000.
5	7 a Land buildings, and equipment basis	57a 116,975.			
	b Less accumulated depreciation (attach				56.000
	Schedule) ■ Other ■ DEDOCTEC	57b 60,686.	0 (15	57 c	56,289. 10,342.
5	8 Other essets (describe ► DEPOSITS	 ')	9,645.	58	10,342.
_	Total agents (add lines 45 through 59) (must a		703,774.	59	693,848.
_	79 Total assets (add lines 45 through 58) (must e	367,256.	60	412,471.	
4	Accounts payable and accrued expenses Grants payable	}	301,230.	61	412,471.
	2 Deferred revenue	 		62	43,963.
1 1	3 Loans from officers, directors, trustees, and key	remployees (attach		-	13,303.
<u> </u>	schedule)	omproyees (anaem		63	
Labilities 9	4 a Tax- exempt bond liabilities (attach schedule).	<u> </u>		64a	
_	b Mortgages and other notes payable (attach sch	edule)	· · · · · · · · · · · · · · · · · · ·	64b	-
6	5 Other REFUNDABLE DI	EPOSITS ,	86,600.	65	79,500.
	6 Total liabilities (add lines 60 through 65)		453,856.	66	535,934.
	Organizations that follow SFAS 117, check here	and complete lines 67		1 1	
	through 69 and lines 73 and 74		0 600	_	474 000 \
8 6	7 Unrestricted		9,628.	67	(74,288.)
<u> </u>	8 Temporarily restricted	<u> </u>	5,688. 234,602.	68	23,600.
2 P	9 Permanently restricted		234,602.	69	208,602.
Net Assets or Fund Balances	Organizations that do not follow SFAS 117, chec lines 70 through 74	k here 🕨 📙 and complete		1	
; ,	 Capital stock trust principal or current funds. 			70	
ğ '	 Capital stock trust principal of current lunds. Paid-in or capital surplus or land building, and 	Leguinment fund		71	
ğ '7	2 Retained earnings, endowment, accumulated in	· —-	72		
ر ا م	3 Total net assets or fund balances (add lines)		 -	 	
ž ´	70 through 72,				
	column (A) must equal line 19 column (B) must	st equal line 21)	249,918.	73	157,914.
1	4 Total liabilities and net assets/ fund balance:	· · · · · · · · · · · · · · · · · · ·	703,774.	74	693,848.

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.

75	Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your	
	organization and all related organizations, of which more than \$10 000 was provided by the related organizations?	
	If "Yes." attach schedule - see Specific Instructions	

2

0

► 🛮 Yes 🛛 No

TULSA OK

TREASURER

	Charles (C. Carrella Control C			Vaa	Na
	Part VI Other Information (See Specific Instructions)		70	Yes	No
76		····/	76	_	X
77			77		_^_
	If "Yes," attach a conformed copy of the changes		- -		X
78	78 a Did the organization have unrelated business gross income of \$1 000 or more during the year covered		78a		├-^-
	b If "Yes," has it filed a tax return on Form 990-T for this year?	 	78b		- V
79			79_		X
80	80 a Is the organization related (other than by association with a statewide or nationwide organization) throu				X
	membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization	' <u> </u>	80 a		
	b If "Yes," enter the name of the organization ▶		- 1		
	and check whether it is Lexempt or	nonexempt	į		1
81	81 a Enter direct or indirect political expenditures. See line 81 instructions.		046		X
	b Did the organization file Form 1120- POL for this year?	F	В1 Б		 ^- -
82	82 a Did the organization receive donated services or the use of materials equipment or facilities at no char	- 1			
	substantially less than fair rental value?	<u> - </u>	82a		X
	b if 'Yes," you may indicate the value of these items here. Do not include this amount				
	as revenue in Part I or as an expense in Part II (See instructions in Part III)				
83	83 a Did the organization comply with the public inspection requirements for returns and exemption applicat	·-··-	83a	X	\vdash
	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	⊢	83 b	X	
84	84 a Did the organization solicit any contributions or gifts that were not tax deductible?	F	84 a		X
	b If "Yes" did the organization include with every solicitation an express statement that such contributions	i i	045		
	tax deductible?	⊢	84 b		_
85	85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	} -	85a		├
	b Did the organization make only in- house lobbying expenditures of \$2 000 or less?	—	85 b		
	If "Yes" was answered to either 85a or 85b do not complete 85c through 85h below unless the organiz	ation received a			ł
	warver for proxy tax owed for the prior year				1
	c Dues, assessments, and similar amounts from members				
	d Section 162(e) lobbying and political expenditures				
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e				
	f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f		05 ~		
	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	F	85 g		├
	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line		0 F Is		
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the follo	wing tax year?	85 h		
86	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
	b Gross receipts, included on line 12 for public use of club facilities				
87					İ
	b Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them.)				1
88		or			
	partnership or an entity disregarded as separate from the organization under Regulations sections		88		X
	301 7701- 2 and 301 7701- 3? If "Yes," complete Part IX.	-	-00		1
09	89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under				
	section 4911 ▶ section 4912 ▶ , section 4955 ▶	_			\vdash
	b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction				1
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," atta	1	89 b		x
	a statement explaining each transaction	L	03.0		<u> </u>
	c Enter Amount of tax imposed on the organization managers or disqualified persons during the year un	uei •			
	sections 4912, 4955, and 4958	<u> </u>			
QΛ	d Enter Amount of tax on line 89c, above, reimbursed by the organization	<u> </u>			· · ·
30	90 a List the states with which a copy of this return is filed ▶ b Number of employees employed in the pay period that includes March 12 2002 (See instructions)	90ь			26
04	91 The books are in care of ► EVELYN HAYESTelephone no	► 918-749-4	60	<u> </u>	
91		74114-	00	<u> </u>	
92					<u> </u>
34	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92			´ L
_	and enter the amount of tax- exempt interest received of accided during the tax year	- 32		000	

_	Analysis of Income-P		.ctivities (See Spec d business income		netion 512 542 544	
	ter gross amounts unless	(A)			ection 512, 513, or 514	(E)
	ndicated	Business	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income
	ram service revenue OPTION SERVICES	code	Allount	Excusion code	Amount	2,739,006
					-	2,739,000
						
_			<u> </u>			
e —		<u> </u>		<u> </u>		
	care/Medicaid payments					
	& contracts from govt agencies	·			- "	<u> </u>
Memi	bership dues & assessments.					
	ends & interest from securities					2.197.
Net re	ntal income or (loss) from real estate		-			
a debt-	financed property					
	ebt-financed property ntal income or (loss) from personal rty					
	r investment income					
Gain o	r (loss) from sales of assets other			18	(16,989.)	
	come or (loss) from special events					
Gross	profit/(loss)from sales of inventory					
Other	rrevenue a					
ь						
c						<u> </u>
d			· 			
θ						
	otal (add columns (B), (D) and (E) I (add line 104, columns (B), (D), ((16, 989.)	2,741,203 2,724,214
art VIII ⊒ne No ▼T	Relationship of Activit Explain how each activity for will organization's exempt purposes	hich income is	reported in column (E) of Part VII contrib		
3A	DIRECTLY RELATED				URRED IN THE	
	EVALUATION, PROCI	ESSING.	ADOPTING A	AND PLACEM	ENT OF CHILD	REN
-						
art IX	Information Regarding	Taxable Su	bsidiaries and D	isregarded En	tities (See Specific Ins	tructions)
	(Å)	(B)		(C)	(D)	(E)
	address, and EIN of corporation, nership, or disregarded entity	Percentac ownership		of activities	Total income	End- of- year assets
	 -		%			
			%	-		·
			%		·	-
art X	Information Regarding	Transfers A	ssociated with	Personal Bene	fit Contracts (See S	pecific Instructions)
a) Did th	ne organization, during year, rece	ve any funds,	directly or indir			
(b) Did th	ne organization, during the year, p	ay premiums,	directly or indir			
Note If "	Yes" to (b), file Form 8870 and Fe					
10000	Under penalties of perjury declare to	het heve examine Declaration of p	ed this return incl reparer (other the			
lease	Venue	<u> </u>	elow			
ign	Signature of officer	- · · · · ·				
ere	Deniese /V	7. DIT	on			
	Type or print name and title					
ald	Preparer : Signature Charles E	Underm	on			
eparer's	Thin strains for yours		UNDERWOO			
se Only	of self-employed), address and ZIP+4					
	address and ZIP+4 TUL	SA OK 74	4135-152			

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.)

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

2002

OMB No 1545-0047

DILLON INTERNATIONAL, INC.			/3-10/8800	
Compensation of the Five High (See the instructions List each one If the	est Paid Employees Ot re are none enter "None")	her Than Office	ers, Directors, and	d Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowance
SUSANNA HILL				
2502 E 25TH ST	DEV DIRECTOR			
TULSA OK 74114	1			
	40	52.947.		
				-
		i		
	1			
				
Total number of other employees paid over	•			
\$50,000			_	_
Compensation of the Five High (See the instructions List each one (wheth				vices
(a) Name and address of each independent contract	tor paid more than \$50,000	(b) Typ	e of service	(c) Compensation
NONE				
<u> </u>				
	<u> </u>			
		}		
		!		
		-		
		-		
Table comban of all and and a				
Total number of others receiving over \$50,000 for				
professional services	<u> </u>	<u> </u>		

•Sche	dule	A (Form 990 or 990- EZ) 2002 DILLON INTERNATIONAL, INC. 73-107	<u>880</u>	<u>0</u> F	Page 2
Pa	rt I	Statements About Activities (See the instructions)		Yes	No
1	atte	ring the year has the organization attempted to influence national, state, or local legislation including any empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities >	1	-	Х
	Org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI- A. Other			
	org	anizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the			
	lob	bying activities			•
2	sub tax	ostantial contributors, trustees directors officers, creators key employees, or members of their families, or with any able organization with which any such person is affiliated as an officer director trustee majority owner, or principal			
		neficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)	المِا		
	Sal	le, exchange, or leasing of property?	2 a		X
ı	Ler	nding of money or other extension of credit?	2 b		Х
(: Fur	rnishing of goods, services, or facilities?	2 c		Х
c	i Pay	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2 d		х
	. T	restrant and of the process of another.			x
•	7 114	insfer of any part of its income or assets?	2 e		
3	Do	es the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below).	3		Х
4	Do	you have a section 403(b) annuity plan for your employees?	4		X
		tach a statement to explain how the organization determines that individuals or organizations receiving grants from it in furtherance of its charitable programs "qualify" to receive payments			
Pa	rt IV	Reason for Non-Private Foundation Status (See the instructions)			
The	orga	nization is not a private foundation because it is (Please check only ONE applicable box)			
5	Ц	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)			
6	Н	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)			
8	Н	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)			
9	П	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's and state	name,	city,	
10	<u>П</u>	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1' (Also complete the Support Schedule in Part IV-A.)	70(b)(1)(A)(n	<i>i</i>)
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the general put Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)	olic		
11b		A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12	X	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and	gross		
		receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33	1/ 3% c	of its	
		support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses a	cquired	by th	ne .
	_	organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13	Ц	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organ described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6) if they meet the test of section 509(a)(2) section 509(a)(3))		S	
		Provide the following information about the supported organizations (See the instructions)			
		(a) Name(s) of supported organization(s)	(b) Lin	nun m abo	
	П				
14	<u> </u>	An organization organized and operated to test for public safety. Section 509(a)(4). (See the instructions.)			

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11 or 12.) Use cash method of accounting Note. You may use the worksheet in the instructions for converting from the accrual to the cash method of

Çal	endar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15	Gifts grants and contributions received (Do not include unusual grants. See time 28.)	358346	272949	505936	387885	1525116
16		330340	212747	30333	307003	1323110
	Membership fees received Gross receipts from admissions			ļ		
17	merchandise sold or services performed or furnishing of facilities in any activity that is related to the organization s charitable, etc., purpose	2618271	2300248	1668820	1496715	8084054
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	6510	21677	22191	11704	62082
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.		1432			1432
23	Total of lines 15 through 22	2983127	2596306	2196947	1896304	9672684
24	Line 23 minus line 17	364856	296058	528127		
	Enter 1% of line 23	29831			1	
_	Organizations described on lines				• 26a	
c	Prepare a list for your records to sigovernmental unit or publicly supplemount shown in line 26a. Do not Total support for section 509(a)(1). Add. Amounts from column (e) for	orted organization) of file this list with you test. Enter line 24, c	whose total gifts for 19 our return Enter the to	98 through 2001 exce	eded the	
e	Public support (line 26c minus line	_		·	▶ 266	
	Public support percentage (line :	•	udad by line 26c (dan	ominator)	≥ 26f	<u> </u>
	Organizations described on line person," prepare a list for your recurrence Do not file this list with your return (2001)	12 a For amour ords to show the naturn Enter the sum o	nts included in lines 15 me of, and total amour f such amounts for each	, 16, and 17 that were	received from a "disqua ear from each "disqua	ualified
b	For any amount included in line 17 show the name of, and amount red (include in the list organizations de computing the difference between excess amounts) for the year	ceived for each year escribed in lines 5 th	that was more than the	ne larger of (1) the am	nount on line 25 for the	year or (2) \$5,000
	(2001) 5169	(2000)	50000 (1	999)26	<u>0578</u> (1998)	123711
С	Add Amounts from column (e) for	lines 15	1525116	16		
_	178	084054 20	1023110	21	<u> </u>	9609170
н	Add Line 27a total		ne 27b total	2143	19458 • 270	100150
	Public support (line 27c total minus		ne 210 total		<u>19430</u> ▶ <u>276</u>	04 60340
	Total support for section 509(a)(2)		rom line 22 seliums /-). > 27f		7103/12
				·		94.80 %
_	Public support percentage (line :	•	•	"	▶ <u>27g</u>	
	Investment Income percentage (
45	Unusual Grants For an organizati list for your records to show, for ea	ion described in line ich year, the name o	າບ, 11, or 12 that rece of the contributor, the d	eived any unusual grai late and amount of the	nts dunng 1998 throug e grant, and a bnef de:	h 2001, prepare a scription of the

nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Schedule A (Form 990 or 990- EZ) 2002 DILLON INTERNATIONAL, INC.

Part VI-A Lobbying Expenditures by Electing Public Chariffee (Sec.) Lobbying Expenditures by Electing Public Charities (See the instructions) (To be completed ONLY by an eligible organization that filed Form 5768)

	ganization belongs to an		ck ▶ b	<u> </u>	ecked "a" and "	limited of	control" provisions app
	Limits on Lobbyin				(a)	-	(b)
(The t	erm "expenditures" mean	•	ed)		Affiliated grou totals	P	To be completed for ALL electing organizations
36 Total lobbying expend				36			Organizations
37 Total lobbying expend		=	. •	37			
38 Total lobbying expend	-		37	38	•		
39 Other exempt purpos	·	- · ,		39			<u>-</u>
40 Total exempt purpose	=	38 and 39)		40			
41 Lobbying nontaxable		•	3 -				
If the amount on line		ne lobbying nontaxable					
Not over \$500 000		% of the amount on line	_				
Over \$500,000 but no	t over \$1,000,000 \$10	00 000 plus 15% of the excess	over \$500 000				
Over \$1,000 000 but r	not over \$1 500 000 s1	75 000 plus 10% of the excess	over \$1 000 000	▶ 41			
Over \$1 500 000 but r	not over \$17,000,000 s2:	25 000 plus 5% of the excess	over \$1 500 000				
Over \$17,000,000	\$1	,000,000					
12 Grassroots nontaxable	e amount (enter 25% of in	ne 41)	_	42	•		
13 Subtract line 42 from	line 36 Enter - 0- if line 4	2 is more than line 36.		43			
44 Subtract line 41 from	line 38 Enter - 0- if line 4	1 is more than line 38.		44			
							<u> </u>
Caution If there is a	n amount on either line 43	3 or line 44 you must file	Form 4720				
	4- Yea	r Averaging Period	l Under Sec	tion 50	1(h)		•
(Some	organizations that made a	section 501(h) election (all of the five colu	ımns be	elow
		Lobbying Expend	ditures During	4- Year A	veraging Period		
Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000		(d) 1999		(e) Total
I5 Lobbying							
nontaxable amount							
amount (150% of line 45(e)).							
7 Total lobbying							
expenditures				-			
8 Grassroots							
nontaxable amount					_		
g Grassroots ceiling amount (150% of line 48(e))							
Grassroots lobbying			-				
expenditures							
Part VI-B Lobby	ing Activity by Nor	nelecting Public Cl	harities				
(For rep	orting only by organization	ons that did not complete	Part VI- A) (Se	e the inst	ructions)		
ouring the year, did the o	rganization attempt to infli	uence national, state or l	ocal legislation	including	any Yes	No	Amount
ttempt to influence public	opinion on a legislative i	matter or referendum, thi	rough the use o	f	100		
a Volunteers					<u> </u>	X	
	ement (Include compensa	ation in expenses reporte	ed on lines c thr	ough h)		X	
c Media advertisemen						X	<u> </u>
- -	s, legislators, or the public					X	
• •	lished or broadcast states					X	
_	inizations for lobbying pu	•			<u> </u>	Х	
	egislators, their staffs, gov		-		<u> </u>	Х	
	ons, seminars, conventior		r any other mea	ins.	<u> </u>	Х	
 Total lobbying expe 	nditures (Add lines c thro	uah h l			ı	- 1	

Schedul Part			N_INTERNATIONAL, ansfers To and Transactor		73-107880		age 6
ı aıt	Exempt Organ				with Noncharita	1DIE	
51	Did the reporting organiza	tion directly or in	directly engage in any of the follow	wing with any other organization	n described in section	on 501	(c) of
	the Code (other than secti	on 501(c)(3) org	anizations) or in section 527, relati	ng to political organizations?			
	•	ng organization t	o a noncharitable exempt organiza	ation of	,	Yes	No
	(i) Cash				51a(i)		X
	(II) Other assets				a(ii)		X
	Other transactions					1	١
	•		oncharitable exempt organization		b(i)		X
	(ii) Purchases of assets fr		• •		b(ii)		X
	(m) Rental of facilities equ	•	assets		b(iii)	-	X
	(iv) Reimbursement arrang	=			b(iv)	 	X
	(v) Loans or loan guarant		ip or fundraising solicitations		b(v)	-	 ^
	` '		s, other assets, or paid employees		b(vi)	i 	X
_			complete the following schedule		the fair market value	ie of th	
	-		he reporting organization. If the or	· · · · · · · · · · · · · · · · · · ·			
			d) the value of the goods, other as		iii market valde iii ai	ily tien	Saction
(a)	(b)		(c)		(d)		
Line no	, , ,	Name of nor	schantable exempt organization	Description of transfers, transa		ranger	ments
					· · · · · · · · · · · · · · · · · · ·	_	
					-		
					<u> </u>		
	'		· · · · · · · · · · · · · · · · · · ·				
							_
			. <u>-</u>				
	<u> </u>						
		<u> </u>			· - · - ·		
		ļ			-		
		1					
	the execution dispath of] 					
			ted with, or related to one or more in 501(c)(3)) or in section 527?	e tax- exempt organizations des	cribed in ▶ ☐ Yes	. 🛭	No
	Yes," complete the following		in so i(c)(b)) of in section seri		, [] 162	. 6	, 140
	(a)	ing concuer	(b)		(c)		
	Name of organizatio	on	Type of organization		of relationship		
-				 -	· · · · · · · · · · · · · · · · · · ·	-	-
	<u> </u>						
			·				
	·- <u></u> -						

Dillon International, Inc. EIN 73-1078800

For the Year Ended December 31, 2002

	Total
Other Francisco Bert H. Column B.	
Other Expenses - Part II, Column B	\$ 185,080
Agency expense	,
Escort expense	78,129
International expense	986,252
Post adoption expenss	247,610
Program development	107,587
Advertising	30,737
Arkansas Office	7,583
Computer expense	5,059
Dues & Subscriptions	4,149
Family Builder	38,768
Indiana Office	6,771
Insurance Group Insurance	79,692
Internet	3,243
Missouri Office	16,494
Other costs	239
Newsletter	15,453
	\$ 1,812,846
Other Evnenges Bert II Column C	
Other Expenses - Part II, Column C	9.067
Insurance Group Insurance	8,967
Insurance Other Insurance	3,697
Newsletter	1,078
Other costs	3,163
Total	\$ 16,905
Other Expenses - Part II, Column D	
Lunar New Year fund raiser	8,213
Public relations	6,010
Group Insurance	5,697
Newsletter	1,437
Other costs	2,856
Total	\$ 24,213