## EXTENSION GRANTED TO 3-15-08

**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

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

| A                  | For the           | 2006 calendar year, or tax year beginning AUG 1, 2006 and ending  | JUL 31,   | 2007                         |                                      |  |
|--------------------|-------------------|---|---|------------------------------|--------------------------------------|--|
| В (                | Check if          | Please C Name of organization   | Employer ic                                       | ployer identification number |                                      |  |
| -                  | applicabl         | use IRS   |   |                              |                                      |  |
|                    | Addre<br>chang    | ess   label or   CHILDREN'S HOUSE INTERNATIONAL   | 94-26   | 543021                       |                                      |  |
|                    | Name<br>chang     | ge   See   Number and Street (or P.U. box it mail is not delivered to street address)   | Room/suite E                                      | Telephone i                  | number                               |  |
|                    | Initial<br>return | Specific P. O. BOX 1829   | i i   | 360-3                        | 383-0631                             |  |
|                    | Final return      | Instruc-<br>tions City or town, state or country, and ZIP + 4   | F   | Accounting meti              |                                      |  |
|                    | Ameno             | L FERNDALE, WA 98248 L  |   | Other (specify)              | <b>-</b>                             |  |
|                    | Applic            | eation • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts H &   | and I are not applic                              | able to sec                  | tion 527 organizations.              |  |
|                    |                   | must attach a completed Schedule A (Form 990 or 990-EZ).  | a) Is this a group reti                           | ırn for affılıa              | tes? Yes X No                        |  |
| <u>G</u> \         | Nebsite           | e: > WWW.CHILDREN'SHOUSEINTERNATIONAL.COM H(I   | b) If "Yes," enter num                            | ber of affiliat              | es N/A                               |  |
| <u>J</u> _(        | Organiz           | zation type (check only one) $\triangleright$ $\bigcirc$ 501(c) (3) $\triangleleft$ (insert no) $\bigcirc$ 4947(a)(1) or $\bigcirc$ 527 H(d | c) Are all affiliates inc                         |                              | N/A Yes No                           |  |
| K                  | Check h           | here 🕨 🗔 if the organization is not a 509(a)(3) supporting organization <b>and</b> its gross  | (If "No," attach a lis<br>d) Is this a separate i |                              | v an or                              |  |
|                    |                   | s are normally <b>not</b> more than \$25,000. A return is not required, but if the organization   | ganization covered                                | by a group                   | ruling? Yes X No                     |  |
|                    | chooses           | s to file a return, be sure to file a complete return.  | Group Exemption                                   | Number ►                     | N/A                                  |  |
|                    |                   | M M   |   | -                            | ion is <b>not</b> required to attach |  |
|                    |                   | eceipts: Add lines 6b, 8b, 9b, and 10b to line 12  2,676,783.   | Sch. B (Form 990,                                 | 990-EZ, or 9                 | 990-PF).                             |  |
| P                  | art I             | Revenue, Expenses, and Changes in Net Assets or Fund Balance  | es  | _ , , ,                      |                                      |  |
|                    | 1                 | Contributions, gifts, grants, and similar amounts received:   |   |                              |                                      |  |
|                    | a                 |   |   | _                            |                                      |  |
|                    | b                 | Direct public support (not included on line 1a)   | 104,55  | 6.                           |                                      |  |
|                    | C                 |   |   |                              |                                      |  |
|                    | d                 | (3-1-1)   |   |                              | 104 556                              |  |
|                    | e                 |   | )   | 1e                           | 104,556.                             |  |
|                    | 2                 | Program service revenue including government fees and contracts (from Part VII, line 93)  |   | 2                            | 2,570,859.                           |  |
|                    | 3                 | Membership dues and assessments   |   | 3                            | 1 260                                |  |
|                    | 4                 | Interest on savings and temporary cash investments  |   | 4                            | 1,368.                               |  |
|                    | 5                 | Dividends and interest from securities  |   | 5                            |                                      |  |
|                    | 6 a               |   |   |                              |                                      |  |
|                    | D                 | · · · · · · · · · · · · · · · · · · ·   |   | $\dashv$ $\Box$              |                                      |  |
| 20 <b>A8</b> venue | _ c               | ,   |   | 6c 7                         |                                      |  |
| Ven                | 7                 | Other investment income (describe   Gross amount from sales of assets other   (A) Securities  | (B) Other   | <del></del>                  | <del></del>                          |  |
| 2                  | 8 a               |   | (B) Other   |                              |                                      |  |
| 23                 |                   | than inventory  Ba  Less: cost or other basis and sales expenses  8b  |   |                              |                                      |  |
| ಗ                  | ١                 | Gain or (loss) (attach schedule)  |   |                              |                                      |  |
| 8                  | ۱ ،               | Net gain or (loss). Combine line 8c, columns (A) and (B)  |   | 8d                           |                                      |  |
| 8                  | 9 "               | Special events and activities (attach schedule). If any amount is from gaming, check here   |   | - 00                         |                                      |  |
| 出                  | a                 |   |   |                              |                                      |  |
|                    | ь                 | Less: direct expenses other than fundraising expenses  9b   |   |                              |                                      |  |
| SCANNED            | c                 | N   |   | 9c                           |                                      |  |
| Ź                  | 10 a              |   |   |                              |                                      |  |
| ×                  | ь                 |   |   |                              |                                      |  |
| $S_{\mathcal{S}}$  | C                 |   |   | 10c                          |                                      |  |
|                    | 11                | Other revenue (from Part VII, line 103)   |   | _11                          | <del></del>                          |  |
| _                  | 12                | Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11   | FD L  | 12                           | 2,676,783.                           |  |
|                    | 13                | Program services (from line 44, column (B))   |   | 13                           | 2,137,311.                           |  |
| Expenses           | 14                | Management and assembly from him AA asking (O))   | 8008<br>8008                                      | 14                           | 377,780.                             |  |
| ben                | 15                | Fundraising (from line 44, column (D))  | 2008  | 15                           |                                      |  |
| ŭ                  | 16                | Payments to affiliates (attach schedule)  | 1   | 16                           |                                      |  |
|                    | 17                | Total expenses. Add lines 16 and 44, column (A)   | UT I  | 17                           | 2,515,091.                           |  |
| <i>(</i> 0         | 18                | Excess or (deficit) for the year. Subtract line 17 from line 12   | <u>, </u>   | 18                           | 161,692.                             |  |
| Net<br>Assets      | 19                | Net assets or fund balances at beginning of year (from line 73, column (A))   |   | 19                           | <u>253,845.</u>                      |  |
| ASS                | 20                | Other changes in net assets or fund balances (attach explanation)   |   | 20                           | 0.                                   |  |
|                    | 21                | Net assets or fund balances at end of year. Combine lines 18, 19, and 20  |   | 21                           | 415,537.                             |  |
| 6230<br>01-18      | 3-07              | LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.  |   |                              | Form <b>990</b> (2006)               |  |

| 6b, 8b, 9b, 10b, or 16 of Part I                   |                   |            | (B) Program | (C) Management | (D) Fundraising |
|--|-------------------|------------|-------------|----------------|-----------------|
|  |                   | (A) Total  | services    | and general    | (b) rundraising |
| Grants paid from donor advised funds               |                   |            |             |                |                 |
| (attach schedule)                                  | 1 1               |            |             |                |                 |
| (cash \$ 0 • noncash \$ 0                          | - 1               | 1          |             |                |                 |
| If this amount includes foreign grants, check here | 22a               |            |             | j              |                 |
| Other grants and allocations (attach schedule      | 1 1               |            |             |                |                 |
| (cash \$ 0 noncash \$ 0                            | 22b               |            |             |                |                 |
| Specific assistance to individuals (attach         | 220               |            |             |                |                 |
| schedule)  | 23                | ł          |             | ì              |                 |
| Benefits paid to or for members (attach            |                   |            |             |                |                 |
| schedule)  | 24                |            |             |                |                 |
| Compensation of current officers, directors, key   |                   |            |             |                |                 |
| employees, etc. listed in Part V-A                 | 25a               | 67,708.    | 0.          | 67,708.        | 0.              |
| Compensation of former officers, directors, key    |                   |            |             |                |                 |
| employees, etc. listed in Part V-B                 | 25b               | 0.         | 0.          | 0.             | 0.              |
| Compensation and other distributions, not included | ı    <sup>-</sup> |            |             |                |                 |
| above, to disqualified persons (as defined under   |                   |            |             |                |                 |
| section 4958(f)(1)) and persons described in       |                   |            |             |                |                 |
| section 4958(c)(3)(B)                              | 25c               |            |             |                |                 |
| Salaries and wages of employees not                |                   | 405 015    | 205 666     | 100 540        |                 |
| included on lines 25a, b, and c                    | 26                | 405,215.   | 295,666.    | 109,549.       |                 |
| Pension plan contributions not included on         | 07                | 16 100     | 4 705       | 11 402         |                 |
| lines 25a, b, and c                                | 27                | 16,198.    | 4,705.      | 11,493.        |                 |
| Employee benefits not included on lines 25a - 27   | 28                | 39,327.    | 19,010.     | 20,317.        |                 |
| Payroll taxes                                      | 29                | 39,3210    | 19,010.     | 20,317.        |                 |
| Professional fundraising fees                      | 30                |            |             |                |                 |
| Accounting fees                                    | 31                | 3,476.     |             | 3,476.         | <del></del>     |
| Legal fees   | 32                | 6,292.     | 6,292.      |                |                 |
| Supplies   | 33                | 20,723.    | 8,088.      | 12,635.        |                 |
| Telephone  | 34                | 35,368.    |             | 35,368.        |                 |
| Postage and shipping                               | 35                | 52,262.    | 47,092.     | 5,170.         |                 |
| Occupancy  | 36                | 33,919.    | 7,109.      | 26,810.        |                 |
| Equipment rental and maintenance                   | 37                |            |             |                |                 |
| Printing and publications                          | 38                | 9,781.     | 9,781.      |                |                 |
| Travel   | 39                | 56,699.    | 56,699.     |                |                 |
| Conferences, conventions, and meetings             | 40                | 29,813.    | 29,813.     | 10 156         |                 |
| Interest   | 41                | 12,156.    |             | 12,156.        |                 |
| Depreciation, depletion, etc (attach schedule)     | 42                | 3,969.     |             | 3,969.         |                 |
| Other expenses not covered above (itemize)         | 400               |            |             |                |                 |
| OVERSEAS AGENTS,<br>PROGRAM FACILITATOR            | 43a<br>43b        | 1,613,812. | 1,613,812.  |                |                 |
| LICENSING EXPENSES                                 | 43c               | 18,416.    | 18,416.     |                |                 |
| INSURANCE  | 43d               | 16,666.    | 10, 10,     | 16,666.        |                 |
| ADVERTISING  | 43e               | 38,218.    |             | 38,218.        |                 |
| MISCELLANEOUS                                      | 43f               | 35,073.    | 20,828.     | 14,245.        |                 |
|  | 43g               |            |             |                |                 |
| Total functional expenses. Add lines 22a through   |                   |            |             |                |                 |
| 43g. (Organizations completing columns (B)-(D),    |                   |            |             |                |                 |
| carry these totals to lines 13-15)                 | 44                | 2,515,091. | 2,137,311.  | 377,780.       | 0.              |
| nt Costs. Check D If you are following             |                   |            |             |                |                 |

Form **990** (2006)

Part III Statement of Program Service Accomplishments (See the instructions.)

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

| Wh     | nat is the organization's pr  | rimary exempt purpose | SEE STATEMENT 1  | Program Service Expenses (Required for 501(c)(3) |  |  |  |  |  |
|--------|---|-----------------------|--|--|--|--|--|--|--|
| che    | All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) |                       |  |  |  |  |  |  |  |
| а      | ARRANGE FOR   | INTERNATION           | AL ADOPTION FOR CHILDREN WORLDWIDE.                      |  |  |  |  |  |  |
| b      | (Grants and allocations   | \$                    | ) If this amount includes foreign grants, check here     | 2,137,311.                                       |  |  |  |  |  |
| ~<br>c | (Grants and allocations   | \$                    | ) If this amount includes foreign grants, check here ▶ □ |  |  |  |  |  |  |
|        |   |                       |  |  |  |  |  |  |  |
| d      | (Grants and allocations   | \$                    | ) If this amount includes foreign grants, check here     |  |  |  |  |  |  |
|        | (Grants and allocations Other program services  | \$ (attach schedule)  | ) If this amount includes foreign grants, check here ▶ □ |  |  |  |  |  |  |
|        | (Grants and allocations   | \$                    | ) If this amount includes foreign grants, check here     | 2.137.311  |  |  |  |  |  |

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| Ра                          | πιν  | Balarice Sweets (See the instructions.)   |                                       |                          |          |                            |
|-----------------------------|--|---|---------------------------------------|--------------------------|----------|----------------------------|
| Note                        |  | ere required, attached schedules and amounts will be for end-of-year amounts only                           | thin the description column           | (A)<br>Beginning of year |          | ( <b>B)</b><br>End of year |
|                             |  |   |                                       | 240 160                  |          | 402 660                    |
|                             | 45   | Cash - non-interest-bearing   | 349,168.                              |                          | 483,660. |                            |
|                             | 46   | Savings and temporary cash investments  | -                                     |                          | 46       | <del></del>                |
|                             | 47 a   | Accounts receivable   | 47a                                   |                          |          |                            |
|                             | Ь  | Less allowance for doubtful accounts  | 47b                                   | 5,000.                   | 47c      |                            |
|                             |  |   |                                       |                          |          |                            |
|                             | 48 a   | Pledges receivable  | 48a                                   |                          | <u> </u> |                            |
|                             | b  | Less allowance for doubtful accounts  | 48b                                   |                          | 48c      |                            |
|                             | 49   | Grants receivable   | _                                     | <del></del>              | 49       |                            |
|                             | 50 a   | Receivables from current and former officers, d   | rectors, trustees, and                |                          | } }      |                            |
|                             |  | key employees   | -                                     |                          | 50a      |                            |
|                             | b  | Receivables from other disqualified persons (as   |                                       |                          | ] ]      |                            |
| Assets                      |  | 4958(f)(1)) and persons described in section 49   | 1 ' ' ' ' ' '                         |                          | 50b      |                            |
| Ass                         | 1 .  | Other notes and loans receivable Less; allowance for doubtful accounts                                      | 51a<br>51b                            |                          |          |                            |
| _                           | 52   | Inventories for sale or use   | 510                                   |                          | 51c      |                            |
|                             | 53   | Prepaid expenses and deferred charges   | <del> </del>                          | <del></del>              | 53       | 12,481.                    |
|                             | l .  | Investments · publicly-traded securities  | Cost FMV                              |                          | 54a      |                            |
|                             | Ь В  | Investments - other securities  | Cost FMV                              |                          | 54b      |                            |
|                             | _  | Investments - land, buildings, and  | 5000                                  |                          | -        |                            |
|                             |  | equipment. basis  | 55a                                   |                          |          |                            |
|                             |  |   |                                       |                          | 1        |                            |
|                             | Ь  | Less accumulated depreciation   | 55b                                   |                          | 55c      |                            |
|                             | 56   | Investments - other   |                                       |                          | 56       |                            |
|                             | 57 a   | Land, buildings, and equipment basis  | 57a 37,907.                           |                          |          |                            |
|                             | ь  | Less accumulated depreciation STMT 2  | 57b 22,481.                           | <u> </u>                 | 57c      | 15,426.                    |
|                             | 58   | Other assets, including program-related investments   |                                       |                          |          |                            |
|                             |  | (describe >   | )                                     |                          | 58       |                            |
|                             | 59   | Total assets (must equal line 74) Add lines 45  | through 58                            | <u>366,635.</u>          | 59       | 511,567.                   |
|                             | 60   | Accounts payable and accrued expenses   | 1                                     | 112,790.                 | 60       | 54,656.                    |
|                             | 61   | Grants payable  | ļ-                                    |                          | 61       |                            |
| S                           | 62   | Deferred revenue  |                                       |                          | 62       |                            |
| bilities                    | 63<br>64 a                                   | Loans from officers, directors, trustees, and key Tax-exempt bond liabilities                               | / employees                           | <del></del>              | 64a      | <del></del>                |
| Liab                        |  | Mortgages and other notes payable   | -                                     |                          | 64b      | 41,374.                    |
|                             | 65   | Other liabilities (describe   | , [                                   |                          | 65       |                            |
|                             |  |   |                                       |                          |          |                            |
|                             | 66   | Total liabilities. Add lines 60 through 65  |                                       | 112,790.                 | 66       | 96,030.                    |
|                             | Orga   | anizations that follow SFAS 117, check here   | X and complete lines                  |                          |          |                            |
| "                           | l  | 67 through 69 and lines 73 and 74   |                                       |                          | } }      |                            |
| ë                           | 67   | Unrestricted  |                                       | <u>&lt;65,941.</u>       |          | 50,092.                    |
| ala.                        | 68   | Temporarily restricted  | <u></u>                               | 319,786.                 | 68       | 365,445.                   |
| Ä                           | 69   | Permanently restricted  | <u> </u>                              |                          | 69       |                            |
| Ē                           | Orga   | anizations that do not follow SFAS 117, check   | here  and                             |                          |          |                            |
| P                           |  | complete lines 70 through 74  |                                       |                          |          |                            |
| ţ                           | 70   | Capital stock, trust principal, or current funds  |                                       |                          | 70       |                            |
| Net Assets or Fund Balances | 71   | Paid-in or capital surplus, or land, building, and  | · · · · · · · · · · · · · · · · · · · |                          | 71       | <del></del>                |
| et 🌶                        | 72   | Retained earnings, endowment, accumulated in  |                                       |                          | 72       |                            |
| Ž                           | 73   | Total net assets or fund balances. Add lines 67 throu<br>(Column (A) must equal line 19 and column (B) must |                                       | 253,845.                 | 73       | 415,537.                   |
|                             | 74   | Total liabilities and net assets/fund balances  |                                       | 366,635.                 | 74       | 511,567.                   |
|                             | <u>' ' '                                </u> | Total numities and het assets/fully palatices   | ,                                     |                          | 17       | <u> </u>                   |

Page 5 Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.) 2,676,783. Total revenue, gains, and other support per audited financial statements Amounts included on line a but not on Part I, line 12 b1 1 Net unrealized gains on investments b2 2 Donated services and use of facilities 3 Recoveries of prior year grants b3 Other (specify) b4 Add lines b1 through b4 2,676, 783. Subtract line b from line a Amounts included on Part I, line 12, but not on line a: 1 Investment expenses not included on Part I, line 6b d1 d2 2 Other (specify) Add lines d1 and d2 2, Total revenue (Part I, line 12) Add lines c and d 676 Part IV-B | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 2,515,091. Total expenses and losses per audited financial statements а Amounts included on line a but not on Part I, line 17: b1 1 Donated services and use of facilities b2 2 Prior year adjustments reported on Part I, line 20 b3 3 Losses reported on Part I, line 20 4 Other (specify): b4 Add lines b1 through b4 2,515, ,091. Subtract line b from line a Amounts included on Part I, line 17, but not on line a: d1 1 Investment expenses not included on Part I, line 6b 2 Other (specify): d2

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated ) (See the instructions.)

| (A) Name and address      | (B) Title and average hours<br>per week devoted to<br>position | (C) Compensation<br>(If not paid, enter<br>-0) | (D) Contributions to<br>employee benefit<br>plans & deferred<br>compensation plans |          |
|---------------------------|--|--|--|----------|
| RICHARD SPIVEY            | PRESIDENT  |  |  |          |
| 3229 E. NUTREE DR.        |  |  |  |          |
| SALT LAKE CITY, UT 84121  | 0.00   | 0.   | 0.   | 0.       |
| CONNIE SNARR              | SECRETARY  |  |  |          |
| 1790 SUGAR LOAF DR.       |  |  |  |          |
| SANDY, UT 84092           | 0.00   | 0.   | 0.   | 0.       |
| JEFF SNARR                | TREASURER  |  | ĺ  | •        |
| 1790 SUGAR LOAF DR.       |  |  |  |          |
| <u>SANDY, UT 84092</u>    | 0.00   | 0.   | 0.   | 0.       |
| DONNA SPIVEY              | BOARD MEMBER   |  |  |          |
| 3229 E. NUTREE DR.        |  |  |  |          |
| SALT LAKE CITY, UT 84121  | 0.00   | 0.   | 0.   | 0.       |
| VIRGINIA HIGHFIELD        | BOARD MEMBER   |  |  |          |
| 554 W. APPLEWOOD DR.      |  |  |  |          |
| BOUNTIFUL, UT 84010       | 0.00   | 0.   | 0.   | 0.       |
| DEBBIE PRICE              | EXECUTIVE DIR  | ECTOR  | 1  |          |
| 5711 VISTA DRIVE, NO. 108 |  |  |  |          |
| FERNDALE, WA 98248        | 40.00  | 67,703.  | 6,311.   | 0.       |
|                           |  |  |  |          |
|                           |  |  |  |          |
|                           |  |  |  | <u> </u> |
|                           |  |  |  |          |
|                           |  |  |  |          |
|                           |  |  | <u> </u>   |          |

Form **990** (2006)

Add lines d1 and d2

Total expenses (Part I, line 17) Add lines c and d

|                    | 990 (2006) CHILDREN'S HOUSE INTE  |                              |   | <u>94-2643</u>  |                 |                                 | <u>age 6</u> |  |
|--------------------|---|------------------------------|---|---|-----------------|---------------------------------|--------------|--|
|                    | rt V-A Current Officers, Directors, Trustees, and Ke  | <del></del>                  |   |   |                 | Yes                             | No           |  |
| 75 a               | Enter the total number of officers, directors, and trustees permitted meetings  | to vote on organization bu   | siness at board                                 | 5   |                 |                                 |              |  |
| b                  | b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) |                              |   |   |                 |                                 |              |  |
| С                  | the individuals and explains the relationship(s)  c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the    |                              |   |   |                 |                                 |              |  |
|                    | organization? See the instructions for the definition of "related organ   |                              |   |   | 75c             |                                 | X            |  |
| d                  | If "Yes," attach a statement that includes the information described Does the organization have a written conflict of interest policy?  | in the instructions.         |   |   | 75d             |                                 | х            |  |
|                    | rt V-B Former Officers, Directors, Trustees, and Ke Benefits (If any former officer, director, trustee, or key er the year, list that person below and enter the amount of co   | nployee received compens     | sation or other ben                             | efits (describe   | or Ot<br>d belo | w) dur                          | ring         |  |
|                    | (A) Name and address NONE   | (B) Loans and Advances       | (C) Compensation<br>(if not paid,<br>enter -0-) | (D) Contributions<br>employee benefit<br>plans & deferred<br>compensation pla | ¦ à             | E) Expe<br>ccount a<br>er allow | and          |  |
|                    |   |                              |   |   |                 |                                 |              |  |
| <u></u>            |   |                              |   |   |                 |                                 |              |  |
| <br>               |   |                              |   |   |                 |                                 |              |  |
|                    |   |                              |   |   |                 |                                 |              |  |
|                    |   |                              | !<br>   |   |                 |                                 |              |  |
|                    |   |                              |   |   |                 |                                 |              |  |
|                    |   |                              |   |   |                 |                                 |              |  |
| <u></u>            |   |                              |   |   |                 |                                 |              |  |
|                    |   |                              |   |   | Ì               |                                 |              |  |
|                    |   |                              |   |   |                 |                                 |              |  |
|                    |   |                              |   |   |                 |                                 |              |  |
|                    |   |                              |   |   |                 |                                 |              |  |
|                    |   |                              |   |   |                 |                                 |              |  |
|                    |   |                              | į   |   |                 |                                 |              |  |
|                    |   |                              |   |   | +-              |                                 |              |  |
|                    |   |                              |   |   |                 |                                 |              |  |
| D-                 | t VI Other Information (c. )  |                              | <u></u>   |   | Щ_              | Yes                             | No           |  |
| <u>  Fai</u><br>76 | rt VI Other Information (See the instructions.)  Did the organization make a change in its activities or methods of co  | anducting activities? If "Ve | s " attach a detaile                            |   |                 | res                             | 140          |  |
|                    | statement of each change  | madeling activities. If Te   | o, attaon a detaile                             | · <del>-</del>  | 76              |                                 | х            |  |
| 77                 | Were any changes made in the organizing or governing documents  | but not reported to the IRS  | 57  |   | 77              |                                 | X            |  |
| 70                 | If "Yes," attach a conformed copy of the changes  | O                            |   |   | 70-             |                                 | v            |  |
| /8 a<br>b          | Did the organization have unrelated business gross income of \$1,00 If "Yes," has it filed a tax return on Form 990-T for this year?  | u or more during the year    | covered by this re                              | n/A   | 78a<br>78b      |                                 | X            |  |
| 79                 | Was there a liquidation, dissolution, termination, or substantial contri  | raction during the year? If  | "Yes," attach a sta                             | •   | 79              |                                 | Х            |  |
| 80 a               | Is the organization related (other than by association with a statewid  | le or nationwide organizati  | on) through comm                                |   |                 |                                 |              |  |
| L                  | membership, governing bodies, trustees, officers, etc., to any other  | exempt or nonexempt orga     | anization?                                      |   | 80a             | <del>  </del>                   | X            |  |
| b                  | If "Yes," enter the name of the organization ► N/A  | and check whether it is      | exempt or                                       | nonexempt   |                 |                                 | 1            |  |
| 81 a               | Enter direct or indirect political expenditures. (See line 81 instruction   | •                            | 81a   | 0.  |                 |                                 |              |  |
| <u>_b</u>          | Did the organization file Form 1120-POL for this year?  |                              |   |   | 81b             | 000                             | X            |  |
|                    | <del></del>   |                              |   |   | Form            | 1 <b>990</b> (                  | (2006)       |  |

|       | 990 (2006) CHILDREN'S HOUSE INTERNATIONAL 94-264   | 3021         | Pi   | age <b>7</b>   |
|-------|--|--------------|--|----------------|
| Pa    | rt VI Other Information (continued)  |              | Yes  | No             |
| 82 a  | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially   |              | 1 1  |                |
|       | less than fair rental value?   | 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 ) 82b N/A  |              |  |                |
| 83 a  | Did the organization comply with the public inspection requirements for returns and exemption applications?  | 83a          | X  |                |
| b     | Did the organization comply with the disclosure requirements relating to quid pro quo contributions?   | 83b          | X  |                |
| 84 a  | Did the organization solicit any contributions or gifts that were not tax deductible? N/A  | 84a          |  |                |
| b     | ,  |              | 1 1  |                |
|       | tax deductible? N/A  | 84b          | ļl   |                |
| 85    | 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?  N/A   | 85a          |  |                |
| b     |  | 85b          |  |                |
|       | If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a   | ļ            |  | ļ              |
|       | waiver for proxy tax owed for the prior year   | İ            |  |                |
| C     | Dues, assessments, and similar amounts from members  85c N/A   |              |  | l              |
| d     | Section 162(e) lobbying and political expenditures  85d N/A  | -            | 1  |                |
| е     | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices  85e N/A  | -∤           |  | l              |
| f     | Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f N/A   |              |  | į              |
| g     | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  N/A   | 85g          | <del>                                     </del> |                |
| h     | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f   |              |  | 1              |
|       | to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the  |              |  |                |
|       | following tax year? N/A  | <u>8</u> 5h  | $\vdash$   |                |
| 86    | 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on   |              |  |                |
|       | line 12  |              |  | ļ              |
| _ b   | Gross receipts, included on line 12, for public use of club facilities  86b N/A  |              |  |                |
| 87    | 501(c)(12) organizations Enter a Gross income from members or shareholders  87a N/A  | $\dashv$     |  |                |
| þ     | 37/3   |              |  | Í              |
|       | against amounts due or received from them ) 87b N/A  | $\dashv$     |  |                |
| 68 a  | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,   |              |  | ļ              |
|       | or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-37   | 88a          |  | x              |
| _     | If "Yes," complete Part IX   | 004          |  |                |
| D     | At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of   | <b>►</b> 88b |  | $ \mathbf{x} $ |
| PO 4  | section 512(b)(13)? If "Yes," complete Part XI   | 000          | <del>                                     </del> |                |
| 09 a  | 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under.  section 4911 ▶   |              |  |                |
|       | section 4911 ► 0 ; section 4912 ► 0 ; section 4955 ► 0 .  501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit   | •            |  |                |
| b     | transaction during the year or did it become aware of an excess benefit transaction from a prior year?   |              |  | ĺ              |
|       | If "Yes," attach a statement explaining each transaction   | 89b          |  | х              |
|       | Enter Amount of tax imposed on the organization managers or disqualified persons during the year under   | 035          |  |                |
| ·     | sections 4912, 4955, and 4958  |              |  |                |
| d     | Enter: Amount of tax on line 89c, above, reimbursed by the organization  | -            |  |                |
| ء     | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?  | 89e          |  | <b>X</b> _     |
| f     | All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?  | 89f          | † —  | X              |
| a     | For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization   |              |  |                |
| ٠     | or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  | 89g          |  | х              |
| 90 a  | and the second s |              |  |                |
| b     | Number of employees employed in the pay period that includes March 12, 2006  |              |  | 15             |
| 91 a  | 260 3  | 83-0         | 631  |                |
| - · • | Located at ▶ P. O. BOX 1829, FERNDALE, WA ZIP+4 ▶  |              |  |                |
| Ь     | At any time during the calendar year, did the organization have an interest in or a signature or other authority over  |              | Yes  | No             |
| ٦     | a financial account in a foreign country (such as a bank account, securities account, or other financial account)?   | 91b          |  | X              |
|       | If "Yes," enter the name of the foreign country  |              |  | 1              |
|       | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank  | ·            |  | 1              |
|       | and Financial Accounts   |              |  |                |
|       |  | Forn         | 990  | (2006)         |

| Form 990 (2006) CHILDRI   | EN'S HOUS  | E IN           | TERNATION             | IAL               | <del></del>    | 94-2           | 643021                          | Page 8        |
|---|--|----------------|-----------------------|-------------------|----------------|----------------|---------------------------------|---------------|
| Part VI Other Information (contin                                       | <del></del>                                      |                |                       |                   |                |                |                                 | s No          |
| c At any time during the calendar year, d                               |  |                |                       | le of the United  | States?        |                | 91c_                            | X             |
| If "Yes," enter the name of the foreign of                              |  |                | /A                    |                   | <del></del>    |                |                                 | $\overline{}$ |
| 92 Section 4947(a)(1) nonexempt chantable                               |  |                |                       |                   | _              | امما           | >T / 3                          | ш             |
| and enter the amount of tax-exempt int  Part VII Analysis of Income-Pro |  |                |                       |                   |                | 92             | <u> N/A</u>                     |               |
|   | <del></del>                                      |                | business income       |                   | section 512, 5 | 13 or 514      |                                 |               |
| Note: Enter gross amounts unless otherwise<br>indicated.                | <del>                                     </del> | A)             | (B)                   | (C)               | (D)            | 10, 0. 0.      | (E)                             |               |
|   | Bus  | iness<br>ode   | Amount                | Exclu-<br>sion    | Amoun          | t              | Related or exe<br>function inco | •             |
| 93 Program service revenue: a ADOPTION_FEES                             | <u> </u>   | oue            | <del></del>           | code              | <del></del>    |                | 2,570,                          |               |
|   |  |                |                       | - + -             |                |                |                                 | 033.          |
|   |  | - +-           | <del></del>           |                   |                |                |                                 |               |
| 4   |  |                | <u></u>               |                   |                |                |                                 |               |
| Q   | <del></del> -                                    |                |                       | -                 |                |                |                                 |               |
| f Medicare/Medicaid payments  |  |                |                       | - + - +           |                |                |                                 |               |
| g Fees and contracts from government ag                                 | onoice —   | <del></del>    |                       | _                 | <del></del>    |                |                                 | <del></del>   |
| 94 Membership dues and assessments                                      | encies   |                |                       |                   |                |                |                                 |               |
| 95 Interest on savings and temporary cash inves                         | tmente   |                |                       | 14                | 1              | ,368.          |                                 |               |
| 96 Dividends and interest from securities                               | Then is  |                |                       |                   |                | , 300.         |                                 | <del></del> - |
| 97 Net rental income or (loss) from real esta                           | ite:   |                |                       |                   |                |                |                                 |               |
| à debt-financed property  |  |                |                       |                   |                |                | <u></u>                         |               |
| b not debt-financed property  | -  |                |                       |                   |                | —— <u>—</u>    | <del></del>                     |               |
| 98 Net rental income or (loss) from persona                             | Inroperty  |                | · · ·                 |                   |                |                |                                 |               |
| 99 Other investment income  | i property                                       |                |                       | ·-                |                |                |                                 |               |
| 100 Gain or (loss) from sales of assets                                 |  | — <del> </del> |                       | _                 |                |                |                                 |               |
| other than inventory  |  |                |                       |                   |                |                |                                 |               |
| 101 Net income or (loss) from special events                            |  |                | <del></del>           |                   |                |                |                                 |               |
| 102 Gross profit or (loss) from sales of inven-                         |  |                |                       |                   |                |                |                                 |               |
| 103 Other revenue:  |  |                |                       |                   |                |                |                                 |               |
| •   | ,  |                |                       |                   |                | }              |                                 |               |
| b   |  |                | <del></del>           |                   |                |                |                                 |               |
| C   |  |                |                       |                   |                |                |                                 |               |
| d   |  |                |                       |                   |                |                |                                 |               |
| e   |  |                |                       |                   |                |                |                                 |               |
| 104 Subtotal (add columns (B), (D), and (E))                            |  | -              |                       | 0.                | 1              | ,368.          | 2,570,                          | 859.          |
| 105 Total (add line 104, columns (B), (D), and                          | d (E))   |                |                       | <u> </u>          | <del></del>    | <b>•</b>       | 2,572,                          |               |
| Note: Line 105 plus line 1e, Part I, should equ                         |  | n line 12,     | Part I                |                   |                | -              |                                 |               |
| Part VIII Relationship of Activities                                    |  |                |                       | mpt Purpos        | ses (See th    | ne instructioi | ns)                             |               |
| Line No. Explain how each activity for which in                         | come is reported ii                              | n column (     | E) of Part VII contri | buted importantly | to the accor   | nplishment of  | the organization's              |               |
| exempt purposes (other than by prov                                     |  |                |                       |                   |                | •              | Ū                               |               |
| FACILITATES INTER   | NATIONAL   | ADOP           | TIONS                 |                   |                |                |                                 |               |
|   |  |                |                       |                   |                |                |                                 |               |
|   | ·  |                |                       |                   |                |                |                                 |               |
|   | <del></del>                                      |                |                       |                   |                |                |                                 |               |
| Part IX Information Regarding   | Taxable Sub                                      | sidiarie       | s and Disreg          | arded Entiti      |                | e instruction: | s <i>)</i>                      |               |
| (A)   | (B)  |                | (C)                   |                   | (D)            |                | (E)                             |               |
|   | ercentage of<br>ership interest                  |                | Nature                |                   |                |                |                                 |               |
|   | %  |                |                       |                   |                |                |                                 |               |
| N/A   | %  |                |                       |                   |                |                |                                 |               |
|   | %  |                |                       |                   |                |                |                                 |               |
|   | %  |                |                       |                   |                |                |                                 |               |
| Part X Information Regarding  | Transfers As                                     | sociate        | ed wi                 |                   |                |                |                                 |               |
| (a) Did the organization, during the year, receive                      | any funds, directl                               | y or indired   | ctly, to              |                   |                |                |                                 |               |
| (b) Did the organization, during the year, pay pro                      |  |                |                       |                   |                |                |                                 |               |
| Note: If "Yes" to (b), file Form 8870 and For                           | =  | -              |                       |                   |                |                |                                 |               |
|   |  |                |                       |                   |                |                |                                 |               |
|   |  |                |                       |                   |                |                |                                 |               |

623163 01-18-07

| Parl        | t XI Information Regarding Transfers To and From C   | ontrolled Entition           | es. Complete only if the organiz         | zation is a                  | _   |
|-------------|--|------------------------------|--|------------------------------|-----|
|             | controlling organization as defined in section 512(b)(13).   | N/A                          |  |                              |     |
|             |  |                              |  | Yes N                        | 0   |
|             | Did the reporting organization make any transfers to a controlled entity a   | is defined in section        | 512(b)(13) of the Code? If "Yes,         | ,"                           |     |
| <del></del> | complete the schedule below for each controlled entity   |                              |  | <del></del>                  | —   |
| ,           | (A)  | (B)<br>Employer              | (C)                                      | (D)                          |     |
| j           | Name, address, of each controlled entity   | Identification               | Description of transfer                  | Amount of transfer           |     |
|             | Conditioned entity   | Number                       | - Lansier                                | u ansier                     | _   |
| -           |  |                              |  |                              |     |
| a           |  |                              |  | 1                            |     |
|             |  |                              | <del></del>                              |                              | —   |
| _  -        | ·  |                              |  |                              |     |
| b  -        |  |                              |  |                              |     |
| _           |  |                              | <del></del>                              |                              | _   |
| c  -        |  |                              |  | 1                            |     |
|             |  |                              |  | İ                            |     |
|             |  |                              | <del></del>                              |                              | _   |
|             | Totals   |                              |  | <u> </u>                     |     |
|             |  |                              |  | Yes N                        | lo  |
| 107         | Did the reporting organization receive any transfers from a controlled en  | itity as defined in sec      | ction 512(b)(13) of the Code? If         | "Yes,"                       |     |
|             | complete the schedule below for each controlled entity.  |                              |  |                              |     |
|             | (A)  | _ (B)                        | (C)                                      | (D)                          |     |
|             | Name, address, of each   | Emplóyer<br>Identification   | Description of                           | Amount of                    |     |
|             | controlled entity  | Number                       | transfer                                 | transfer                     | _   |
| _           |  |                              |  | ļ                            |     |
| a  _        |  |                              |  | ĺ                            |     |
|             |  |                              |  | <del> </del>                 |     |
| -           |  |                              |  |                              |     |
| b           |  |                              |  |                              |     |
| -           |  |                              | <del></del>                              | <del> </del>                 |     |
| -           |  |                              |  |                              |     |
| c  -        |  |                              |  |                              |     |
|             |  |                              |  |                              |     |
|             | Totals   |                              |  |                              |     |
|             | 1 Otats  |                              |  | Yes N                        | 10  |
| 108         | Did the organization have a binding written contract in effect on August 1   | 17, 2006, covering th        | ne interest, rents, royalties, and       |                              | _   |
|             | annuities described in question 107 above?   |                              |  |                              |     |
|             | Under penalties of perjury, I declare that I have examined this return, including accompany and complete Declaration of preparer (other than officer) is based on all information of which | ing schedules and statemer   | nts, and to the best of my knowledge and | belief, it is true, correct, |     |
| ь.          |  | on proparor rate any renorme | 1 -                                      | ~ P                          |     |
| Please      | " Wielporch of There   |                              |  | <u> </u>                     |     |
| Sign        | Signature of officer   | 17                           | Date                                     |                              |     |
| Here        | Deboran S. TRICE, Execu  | ture Di                      | vector                                   |                              |     |
|             | Type or print name and title   |                              | · · · · · · · · · · · · · · · · · · ·    |                              |     |
| Paid        | Preparer's   | Date                         | self-                                    | N or PTIN (See Gen Inst      |     |
| Prepar      | er's signature Cuphale Smi   | <u> </u>                     | employed ► X POO                         | 07296                        |     |
| Use On      | yours if ORPHALEE SMITH, CPA   |                              | EIN > 91-11                              | 23488                        | _   |
|             | self-employed), P. O. BOX 2980   |                              |  |                              |     |
|             | BELLINGHAM, WA 98227   |                              | Phone no. ►                              | 5 000                        |     |
|             |  |                              |  | Form <b>990</b> (200         | J6) |

## 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 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ 2006

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number 94 2643021 CHILDREN'S HOUSE INTERNATIONAL Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 2 of the instructions List each one. If there are none, enter "None.") (b) Title and average hours d) Contributions to employee benefit plans & deferred (e) Expense (a) Name and address of each employee paid per week devoted to (c) Compensation account and other more than \$50,000 compensation position allowances DEBBIE PRICE EXECUTIVE DIR 5711 VISTA DRIVE, NO. 108, FERNDALE 40.00 67,708 6.311 HEIDI HAWKINS PROGRAM FACILITATOR 4,705 5711 VISTA DRIVE, NO. 108 FERNDALE, 40.00 58,773. PROGRAM FACILITATOR STEFANIE ELLISON 5711 VISTA DRIVE, NO. 108 FERNDALE 40.00 94,635 Ο. PROGRAM FACILITATOR LISA ANDERSON 108 40.00 142,258 ٥. VISTA DRIVE, NO. FERNDALE, Total number of other employees paid over \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II-A (See page 2 of the 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 CHARLENE WANG CHINA PROGRAM 98248FACILITATOR O 5711 VISTA DRIVE, 108 120,114. NO. FERNDALE, Total number of others receiving over 0 \$50,000 for professional services Compensation of the Five Highest Paid Independent Contractors for Other Services Part II-B (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (b) Type of service (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 NONE Total number of other contractors receiving over 0 \$50,000 for other services

Schedule A (Form 990 or 990-EZ) 2006

f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on

g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year

line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts

Schedule A (Form 990 or 990-EZ) 2006

0.

0.

An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.) Schedule A (Form 990 or 990-EZ) 2006

Total

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15. NONE 623131 01-18-07

Public support percentage (line 27e (numerator) divided by line 27f (denominator))

N/A

N/A

27g

27h

Page 5 Private School Questionnaire (See page 9 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing 29 instrument, or in a resolution of its governing body? 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, 30 and other written communications with the public dealing with student admissions, programs, and scholarships? 31 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? 31 If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a 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 32c admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 33a Admissions policies? 33b 33c c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 33d Educational policies? 33e 33f Use of facilities? f Athletic programs? 33g 33h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 34 a Does the organization receive any financial aid or assistance from a governmental agency? 34a 34b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.

Schedule A (Form 990 or 990-EZ) 2006

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

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)

I/A

| (To be completed <b>ONLY</b> by   | an eligible organization that filed Form 5768)   |          |                            |                                   |  |
|---|--|----------|----------------------------|-----------------------------------|--|
| Check ▶ a if the organization belong  | s to an affiliated group. Check 🕨 t  | ı 🔲 ıf y | ou che                     | cked "a" and "limited contri      | ol" provisions apply.                              |
|   | Lobbying Expenditures ures' means amounts paid or incurred.)                                 |          |                            | (a)<br>Affiliated group<br>totals | (b) To be completed for all electing organizations |
| 36 Total lobbying expenditures to influence p<br>37 Total lobbying expenditures to influence a<br>38 Total lobbying expenditures (add lines 36<br>39 Other exempt purpose expenditures<br>40 Total exempt purpose expenditures (add<br>41 Lobbying nontaxable amount. Enter the a         | legislative body (direct lobbying) and 37) lines 38 and 39) mount from the following table - |          | 36<br>37<br>38<br>39<br>40 | N/A                               |  |
| If the amount on line 40 is - Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 42 Grassroots nontaxable amount (enter 25' 43 Subtract line 42 from line 36. Enter -0- if | •  |          | 41 42 43                   |                                   |  |
| 44 Subtract line 41 from line 38. Enter -0- if  |  | :        | 44                         |                                   |  |

## 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 on page 13 of the instructions.)

|   |             | Lobbying Exp         | enditures During 4-Year A | veraging Period | N/A          |
|---|-------------|----------------------|---------------------------|-----------------|--------------|
| Calendar year (or fiscal year beginning in)       | (a)<br>2006 | ( <b>b</b> )<br>2005 | (c)<br>2004               | (d)<br>2003     | (e)<br>Total |
| 45 Lobbying nontaxable amount                     |             |                      |                           |                 | 0.           |
| 46 Lobbying ceiling amount (150% of line 45(e))   |             |                      |                           |                 | 0.           |
| 47 Total lobbying expenditures                    |             |                      | -                         |                 | 0.           |
| 48 Grassroots nontaxable amount                   |             |                      |                           |                 | 0.           |
| 49 Grassroots ceiling amount (150% of line 48(e)) |             |                      |                           |                 | 0.           |
| 50 Grassroots lobbying expenditures               |             |                      |                           |                 | 0.           |

|           |                      |               | D 11: 01 :::     |
|-----------|----------------------|---------------|------------------|
| Part VI-B | Lobbying Activity by | v Nonelectina | Public Charities |

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any 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
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

| f "Yes" to any of the above, also attach a statement giving a detaile | d description of the lobbying activities. |
|---|---|
|---|---|

| Yes | No | Amount      |
|-----|----|-------------|
|     |    | <del></del> |
|     | -  |             |
|     |    |             |
|     |    |             |
|     |    | <del></del> |
|     |    |             |
|     | L  | 0.          |

823151 01-18-07

Schedule A (Form 990 or 990-EZ) 2006

23152 1-18-07 Schedule A (Form 990 or 990-EZ) 2006 FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 1 PART III

## EXPLANATION

PROVIDES CHILDREN WORLDWIDE WITH PERMANENT LOVING HOMES AND TO PROVIDE FAMILIES WITH NEEDED SUPPORT TO ADOPT AND PARENT THEIR CHILDREN.

| FORM 990                                  | DEPRECIATION   | OF ASSE | TS NOT                 | HELD         | FOR | INVESTMENT                  | STATEMENT  | 2   |
|---|----------------|---------|------------------------|--------------|-----|-----------------------------|------------|-----|
| DESCRIPTION                               |                |         | COST OR<br>OTHER BASIS |              |     | ACCUMULATED<br>DEPRECIATION | BOOK VALUE |     |
| OFFICE FURNI<br>EQUIPMENT<br>LEASEHOLD IM |                | ,       |                        | 35,5;<br>2,3 |     | 21,529.<br>952.             | 14,0       |     |
| TOTAL TO FOR                              | M 990, PART IV | , LN 57 |                        | 37,9         | 07. | 22,481.                     | 15,4       | 26. |