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 F	or the 2	10 <u>6 calendar year, or tax year beginning</u>	and	ending					
	B c	Check if applicable	Use IRS FAMILIES THRU INTERNATIONAL					loyer i	dentification number	,
		_Address _change	pnnt or ADOPTION, INC				3!	5-19	961430	
		Name change Initial	Name change See Number and street (or P O box if mail is not delivered to street address) Room/suite E Te						number	
	<u>_</u>	return	Specific 400 BENTEE WES COURT				8.	12-	<u>479-9900 </u>	
	\vdash	Final return Amende return	tions City or town, state or country, and ZIP + 4					inting met Other specify)		Accrual
	F	Applicat		ble trusts	На	ad I am not anni			tion 527 organization	
	_	perionig	must attach à compléted Schedule A (Form 990 or 990-EZ).			Is this a group re				X No
	G V	Nebsite:	►WWW.FTIA.ORG) If "Yes," enter nu				
			ion type (check only one) ► X 501(c) (3) ◄ (insert no) 4947(a)(1) or 5		Are all affiliates i			N/A Yes	No
			e In the organization is not a 509(a)(3) supporting organization and			(If "No," attach a	list)			
			re normally not more than \$25,000 A return is not required, but if the organiz		H(0)	Is this a separate ganization cover	e return ed by a	aroup	ruling? Yes	X No
			o file a return, be sure to file a complete return			Group Exemptio			N/A	
		•			М				tion is not required to	o attach
	LG	Gross rec	eipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 3, 136	5,938.		Sch B (Form 99				o attaon
			Revenue, Expenses, and Changes in Net Assets or				,			
		1	Contributions, gifts, grants, and similar amounts received							
		a	Contributions to donor advised funds	1	a					
		ь	Direct public support (not included on line 1a)	1		86,7	50.			
		C	Indirect public support (not included on line 1a)	1						
		d	Government contributions (grants) (not included on line 1a)	1						
		e	Total (add lines 1a through 1d) (cash \$ 86,750. nor				1	1e	86,7	750.
		2	Program service revenue including government fees and contracts (from Pai		3)		<i>'</i> [2	2,821,1	
		3	Membership dues and assessments	,	,		Ì	3	~ *	
		4	Interest on savings and temporary cash investments	•				4	32,1	32.
		5	Dividends and interest from securities				Ī	5		
		6 a	Gross rents	6	a l					
	- !	ь	Less rental expenses	6				- 1		
2 0 20071		C	Net rental income or (loss) Subtract line 6b from line 6a		- 1			6c		
	Revenue	7	Other investment income (describe				١ ١	7		
0	eve	8 a	Gross amount from sales of assets other (A) Securities			(B) Other				
٠.٧	Œ	İ	than inventory 196,0	000.8	a		70.	1		
AIIG		Ь	Less cost or other basis and sales expenses 196,0			4,2	68.	1		
		c	Gain or (loss) (attach schedule)	8	C	<3,3	98.	>		
		d	Net gain or (loss) Combine line 8c, columns (A) and (B) STMT	1		STMT	2	8d	<3,3	398.
Ū,		9	Special events and activities (attach schedule). If any amount is from gaming	, check her	e 🕨 🗌		ſ	T	-	
SCANN		a	Gross revenue (not including \$ of contributions reported on line	1b) 9	a			İ		
2		b	Less direct expenses other than fundraising expenses	9	b					
$\vec{\omega}$		C	Net income or (loss) from special events. Subtract line 9b from line 9a				Ĺ	9c		
$oldsymbol{\widetilde{C}}$		10 a	Gross sales of inventory, less returns and allowances	10	a					
		b	Less cost of goods sold	10	b			- 1		
		C	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line	10b from li	ne 10a			10c		
		11	Other revenue (from Part VII, line 103)	<u>.</u>			Į	11		
		12	Total revenue. Add lines 1e, 2, 3, 4, 5, 65, 7, 30, 90, 105, 8, 70, 105					12	2,936,6	<u> </u>
	(0	13	Program services (from line 44, colu				Ĺ	13	2,281,4	154.
	Expenses	14	Program services (from line 44, column (C)) Management and general (from line 45 column (C)) Fundraising (from line 44, column (D) AUG 0 6 2007 Payments to affiliates (attach schedul)				ļ	14	296,4	107.
	pen	15	Fundraising (from line 44, column (D) AUG 0 6 2007	ļ			L	15	8,8	361.
	Ex	16		A			L	16		
		17	Total expenses. Add lines 16 and 44 column (45) FRI	¥				17	2,586,7 349,9	22.
	μħ	18	Excess or (deficit) for the year Subtractine	긔			Ţ	18	349,9	48.
	Net ssets	19	Net assets or fund balances at beginning of year (from line 73, column (A))					19	2,213,1	180.
	AS	20	Other changes in net assets or fund balances (attach explanation)	SEE	ST	ATEMENT	3 <u> </u>	20	9,8	369.
		21	Net assets or fund balances at end of year Combine lines 18, 19, and 20					21	2,572,9	197.

617

Page 2

				d (D) are required for section e trusts but optional for othe	
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds					
(attach schedule)	1 1				
(cash \$ 0 • noncash \$ 0 •	1				
If this amount includes foreign grants, check here	22a		.		
22b Other grants and allocations (attach schedule)				
(cash \$ 0 • noncash \$ 0	<u>d</u>				
If this amount includes foreign grants, check here	22b				
23 Specific assistance to individuals (attach					
schedule) STATEMENT 6	23	175,184.	175,184.		
24 Benefits paid to or for members (attach					
schedule)	24				
25a Compensation of current officers, directors, key					
employees, etc. listed in Part V-A ${f STMT}$ 5	25a	255,209.	222,032.	33,177.	0.
b Compensation of former officers, directors, key					
employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included					
above, to disqualified persons (as defined under					
section 4958(f)(1)) and persons described in					
section 4958(c)(3)(B)	25c				
26 Salanes and wages of employees not					
included on lines 25a, b, and c	26	966,079.	840,488.	125,591.	
27 Pension plan contributions not included on				,	
lines 25a, b, and c	27				
28 Employee benefits not included on lines					
25a · 27	28	87,677.	76,279.	11,398.	
29 Payroll taxes	29	103,145.	89,736.	13,409.	
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32	9,709.		9,709.	
33 Supplies	33	11,614.	11,614.		
34 Telephone	34	33,134.	28,827.	4,307.	
35 Postage and shipping	35	13,965.	12,150.	780.	1,035.
36 Occupancy	36	50,476.	43,914.	6,562.	
37 Equipment rental and maintenance	37	20,338.	17,694.	2,644.	
38 Printing and publications	38	16,273.	11,547.	141.	4,585.
39 Travel	39	23,358.	7,669.	15,689.	· · · · · · · · · · · · · · · · · · ·
40 Conferences, conventions, and meetings	40	25,342.	22,048.	3,294.	
41 Interest	41	12,943.	11,260.	1,683.	•
42 Depreciation, depletion, etc. (attach schedule)	42	71,333.	62,060.	9,273.	
43 Other expenses not covered above (itemize):	П			·	
a	43a				
b	43b				
c	43c				
d	43d				
е	43e				
1	43f				
SEE STATEMENT 4	43g	710,943.	648,952.	58,750.	3,241.
44 Total functional expenses. Add lines 22a through	138		,552,	30,730.	<u> </u>
43g. (Organizations completing columns (B)-(D),					
carry these totals to lines 13-15)	44	2,586,722.	2,281,454.	296,407.	8,861.
Joint Costs. Check Jif you are following			-,,	270,4070	0,001.
Are any joint costs from a combined educational campai			norted in (B) Program soon	res? ▶	Yes X No
If "Yes," enter (i) the aggregate amount of these joint cos			(ii) the amount allocated to		N/A ;
(iii) the amount allocated to Management and general \$	_		iv) the amount allocated to		N/A
623011 01-23-07		, and	, and announce anocated to	. unutuionig w	Form 990 (2006)

Form 990 (2006) ADOPTION, INC

35-1961430

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		hments (See the instruction	

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	at is the organization's primary exempt purpose? ► SEE STATEMENT 7	Program Service Expenses
clie	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ints served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
а	THE ORGANIZATION PROVIDES ADOPTION SERVICES TO PLACE CHILDREN FROM CHINA, RUSSIA, GUATEMALA, VIETNAM, INDIA AND OTHER COUNTRIES WITH U.S. FAMILIES	
b	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	2,281,454.
_ C	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □]
d	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
e	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ Other program services (attach schedule)]
_	(Grants and allocations \$) If this amount includes foreign grants, check here]
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	2,281,454.

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Part IV: Balance Sheets (See the instructions.) Note: Where required, attached schedules and amounts within the description column (A) Beginning of year End of year should be for end-of-year amounts only. 1,281,548 1,527,164. 45 45 Cash - non-interest-bearing 46 46 Savings and temporary cash investments 47a 47 a Accounts receivable 47b 47c b Less: allowance for doubtful accounts 48 a Pledges receivable 48a b Less: allowance for doubtful accounts 48c 48b 49 49 Grants receivable 50 a Receivables from current and former officers, directors, trustees, and 50a key employees b Receivables from other disqualified persons (as defined under section 50b 4958(f)(1)) and persons described in section 4958(c)(3)(B) 51 a Other notes and loans receivable 51a 51b b Less: allowance for doubtful accounts 51c 52 Inventories for sale or use 52 59,082 64,187 53 53 Prepaid expenses and deferred charges 188,325 54 a Investments - publicly-traded securities STMT 11▶ 54a 54b Cost b Investments - other securities 55 a Investments - land, buildings, and 55a equipment: basis 55c 55b b Less: accumulated depreciation 56 Investments - other 56 1,369,981. 232,874. 57a 57 a Land, buildings, and equipment: basis 1,186,568. 1,137,107. b Less: accumulated depreciation STMT 8 57c 57b Other assets, including program-related investments 58 69,667. SEE STATEMENT 9 97,378. 58 (describe ▶ 2,820,731. 2,790,295. 59 Total assets (must equal line 74). Add lines 45 through 58 59 117,503. 82,601 60 60 Accounts payable and accrued expenses 61 Grants payable 61 62 62 Deferred revenue 63 63 Loans from officers, directors, trustees, and key employees 64a 64 a Tax-exempt bond liabilities 215,004. STMT 10 64b b Mortgages and other notes payable 244,608. 165,133. Other liabilities (describe REFUNDABLE ADVANCES 65 577,115. 247,734. Total liabilities. Add lines 60 through 65 66 Organizations that follow SFAS 117, check here

X
and complete lines 67 through 69 and lines 73 and 74. **Net Assets or Fund Balances** 2,213,180. 2,572,997. 67 67 Unrestricted 68 68 Temporarily restricted 69 69 Permanently restricted Organizations that do not follow SFAS 117, check here

and complete lines 70 through 74. 70 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 72 72 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 73 2,213,180. 2,572,997. 73 (Column (A) must equal line 19 and column (B) must equal line 21) 2,820,731 -2,790,295 Total liabilities and net assets/fund balances. Add lines 66 and 73

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the

а	Total revenue, gains, and other support per audited financial statements			a	2,946,539.
b	Amounts included on line a but not on Part I, line 12:				
1	Net unrealized gains on investments	b1	9,869.	<i> </i>	
2	Donated services and use of facilities	b2			
3	Recoveries of prior year grants	b3			
4	Other (specify):	b4			
	Add lines b1 through b4			b	9,869.
C	Subtract line b from line a			C	2,936,670.
d	Amounts included on Part I, line 12, but not on line a:				
1	Investment expenses not included on Part I, line 6b	. d1			
2	Other (specify):	d2			
	Add lines d1 and d2			d	0.
е	Total revenue (Part I, line 12). Add lines c and d		> _	e	2,936,670.
Pa	rt IV-B Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per	Ret	urn
a	Total expenses and losses per audited financial statements			а	2,586,722.
b	Amounts included on line a but not on Part I, line 17:				
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify):	b4			
	Add lines b1 through b4			ь	0.
C	Subtract line b from line a			C	2,586,722.
d	Amounts included on Part I, line 17, but not on line a:				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines d1 and d2			d	0.
е	Total expenses (Part I, line 17). Add lines c and d		•	e	2,586,722.

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.)

(C) Compensation (D) Contributions to employee benefit plans & deferred (B) Title and average hours (E) Expense (A) Name and address (If not paid, enter -0-.) per week devoted to account and position other allowances compensation plans KEITH WALLACE EXEC. DIRECTOR 400 BENTEE WES CT 0. EVANSVILLE, IN 47715 40.00 86,177. 16,011 MAUREEN O'CONNOR ASSOC DIRECTOR 400 BENTEE WES CT EVANSVILLE, IN 0. 47715 40.00 69,012 6,963. ASSOC DIRECTOR TINA JI 400 BENTEE WES CT 0. EVANSVILLE, IN 47715 40.00 66,984 10,062 PRESIDENT MICHAEL DEEG 5551 CHOICECUT COURT EVANSVILLE, IN 47720 5.00 0. 0. 0. BOARD MEMBER KAREN SPARLING 3063 BROOKWOOD CIRCLE EDGEWOOD, KY 41017 5.00 0. 0. 0. TOM HEATON BOARD MEMBER 4031 STRINGTOWN ROAD 0. 0. 0. EVANSVILLE, IN 47711 5.00 JIM HESS BOARD MEMBER 1138 BRAFIELD ROAD 0 <u>.</u> CHESTER SPRINGS, PA 19425 5.00 0. 0. SEC/TREAS MIKE HAYNES 100 N. ST JOSEPH AVENUE 0. EVANSVILLE, IN 47712 0. 5.00 0.

_	200 (200)	ADODUTON INC	11017111		25 1061	420		
	990 (2006)	ADOPTION, INC	ru Francos ()		35-1961	430		age 6
<u></u>		ent Officers, Directors, Trustees, and Ke					Tes	No
.75 a	Enter the total r	number of officers, directors, and trustees permitted	to vote on organization bu	siness at board				
	meetings .			▶	5	ĺ		
b	Are any officers	s, directors, trustees, or key employees listed in Form	990. Part V-A. or highest of	compensated emp	lovees	ĺ		
-		ule A, Part I, or highest compensated professional an				ĺ		
		related to each other through family or business rela				ĺ		
		and explains the relationship(s)				75b		X
_	Do anu efficien	duration to the control of the contr	000 Dard V A bi-bd -					
C		, directors, trustees, or key employees listed in Form ule A, Part I, or highest compensated professional an				ĺ		
		receive compensation from any other organizations,				ĺ		
		See the instructions for the definition of "related organ		table, that ale relat	ed to the	75c	1	X
	•	_				700	 	
		a statement that includes the information described	in the instructions.				· ·	ŀ
		ization have a written conflict of interest policy?	v Employees That F	Seed Com		75d	X	<u> </u>
rai		ner Officers, Directors, Trustees, and Ke						
		fits (If any former officer, director, trustee, or key er ar, list that person below and enter the amount of co						
	tile ye	ar, list that person below and enter the amount of co	Imperisation of other benef	(C) Compensation	T	Τ.		
		(A) Name and address	(B) Loans and Advances	(if not paid,	employee benefi	t a	(E) Expe	
		NONE		enter -0-)	plans & deferred compensation plan		er allow	
						- 1		
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					<u> </u>			
Par	t VI Other	Information (See the Instructions.)					Yes	No
76		ation make a change in its activities or methods of co	enducting activities? If "Ye	s." attach a detaile	d			
	statement of ea	-		_,	-	76	1 1	х
77		-	but not reported to the IDS	22			 	X
• •		ges made in the organizing or governing documents i	our not reported to the Inc) :		77	1	
70		a conformed copy of the changes.	0				1	v
		ation have unrelated business gross income of \$1,00	O or more during the year	covered by this ret		78a	 	X
		filed a tax return on Form 990-T for this year?	-		N/A	78b	 	
79	Was there a liqu	uidation, dissolution, termination, or substantial contr	action during the year? If	"Yes," attach a sta	tement	79	ļ	Х
80 a	Is the organizat	tion related (other than by association with a statewid	le or nationwide organizati	on) through comm	on			
	membership, g	overning bodies, trustees, officers, etc., to any other	exempt or nonexempt orga	anization?		80a	X	
b		he name of the organization CHILDVISION						
		<u> </u>	and check whether it is	X exempt or	nonexempt	į	1	
81 a	Enter direct or i	indirect political expenditures. (See line 81 instruction	=	81a	0.		1	
_		ation file Form 1120-POL for this year?	- -,			81b	i '	Х
	Did the organiz	and the first of this year:					990	
						1 0111		\-~~/

Form	1990 (2006) ADOPTION, INC	35-1961	430	Р	age 7
	Other Information (continued)			Yes	
	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at s	ubstantially			
	less than fair rental value?	-	82a		Х
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.				ĺ
	(See instructions in Part III.)	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?		84a	•••••	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				ĺ
	tax deductible?	N/A	84b		
85		N/A	85a		<u> </u>
þ		N/A	85b		ļ
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization rec	eived a			ĺ
	waiver for proxy tax owed for the prior year.	27 / 2			
C	Dues, assessments, and similar amounts from members	N/A	-		İ
đ	Section 162(e) lobbying and political expenditures	N/A N/A	-		
9		N/A	-		į
1	, , , , , , , , , , , , , , , , , , , ,	N/A	05-		ĺ
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f	N/A	85g		$\vdash \vdash$
"	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the				
		N/A	85h		1
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on	11, 11	0011	••••	
00	line 12	N/A			į
b		N/A			
87		N/A			į
b					
	against amounts due or received from them.)	N/A			į
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partner	rship,			
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701				ĺ
	If "Yes," complete Part IX		88a		<u> </u>
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning	g of			
	section 512(b)(13)? If "Yes," complete Part XI	>	88b		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:				ĺ
	section 4911 ► 0 • , section 4912 ► 0 • , section 4955 ►	<u> </u>			
þ	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit				ĺ
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?				
	If "Yes," attach a statement explaining each transaction		89b		X
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	^			į
	sections 4912, 4955, and 4958	0.			
9	Enter: Amount of tax on line 89c, above, reimbursed by the organization		00-		v
9	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transact	lion?	89e		X
'	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		89f	,	
y	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	nganization,	89g		х
an a	List the states with which a copy of this return is filed > IN		_osy_		
	Number of employees employed in the pay period that includes March 12, 2006	h			42
	The books are in care of ► MAUREEN O'CONNOR Telephone no ►		79-9	900	
J. u	Located at ► 400 BENTEE WES COURT, EVANSVILLE, IN	ZIP + 4 ► 4			060
h	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	_			No
J	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 SEE STATEMENT 12			_	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank				į
	and Financial Accounts.				
			Form	990	(2006)

FAMILIES THRU INTERNATIONAL Form 990 (2006) ADOPTION. TNC 35-1961430 Part VI: Other Information (continued) Yes No c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c | X If "Yes," enter the name of the foreign country ▶ SEE STATEMENT 13 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here 92 and enter the amount of tax-exempt interest received or accrued during the tax year Part VII Analysis of Income-Producing Activities (See the instructions.) Unrelated business income Excluded by section 512, 513, or 514 Note: Enter gross amounts unless otherwise (E) (C) Exclu-sion (A) indicated. (D) Related or exempt Business Amount Amount 93 Program service revenue: function income code ADOPTION SERVICE FEES 2,821,186. Medicare/Medicaid payments g Fees and contracts from government agencies 94 Membership dues and assessments Interest on savings and temporary cash investments 32,132. Dividends and interest from securities Net rental income or (loss) from real estate: a debt-financed property b not debt-financed property 98 Net rental income or (loss) from personal property 99 Other investment income 100 Gain or (loss) from sales of assets 18 <3,398.b other than inventory Net income or (loss) from special events 102 Gross profit or (loss) from sales of inventory 103 Other revenue: 0. 28,734. 2,821,186. 104 Subtotal (add columns (B), (D), and (E)) 105 Total (add line 104, columns (B), (D), and (E)) Note: Line 105 plus line 1e, Part I, should equal the amount on line 12. Part I. Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions) Line No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes) FEES ARE COLLECTED SO THE ORGANIZATION CAN PROVIDE THE ADOPTION 93A SERVICES TO PLACE THE CHILDREN FROM FOREIGN COUNTRIES WITH US FAMILIES Information Regarding Taxable Subsidiaries and Disregarded Entities (See the Instructions.) Part IX (E)

Part X Information Regarding Transfers Associated

(a) Did the organization, during the year, receive any funds, directly or indirectly,

(b) Did the organization, during the year, pay premiums, directly or indirectly, on

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

				Ye	s No
06	Did the reporting organization make any transfers to a controlled entity a complete the schedule below for each controlled entity.	s defined in section 5	512(b)(13) of the Code? If "Yes		
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amoun transt	t of
а					
b					
c					
	Totals				
07	Did the reporting organization receive any transfers from a controlled encomplete the schedule below for each controlled entity.	tity as defined in sect	ion 512(b)(13) of the Code? If	_	s N
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amoun transt	t of
a					
ь					
С					
	Totals				
08	Did the organization have a binding written contract in effect on August 1 annuities described in question 197, above?			Ye	
Plea Sign Here	Signature of officer	ing schedules and statement ch preparer has any knowled	is, and to the best of my knowledge and ge Z	belief, it is true, o	correct,
aid	Type or print name and title Preparer's signature Type or print name and title Preparer's signature	15	Check if Preparer's SS self- employed P Poo 2	N or PTIN (See G	_
se (RINEY, HANCOCK & CO., PSC Self-employed, address, and ZIP+4 RINEY, HANCOCK & CO., PSC STREE EVANSVILLE, IN 47713		Phone no ►812-	-423-03	0.0
	2 1 2 1 2 1 1 1 1 2 2		THOUGHO P OTE	Form 99	

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

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

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

Supplementary Information-(See separate instructions.) Department of the Treasury Internal Revenue Service

FAMILIES THRU INTERNATIONAL

Employer identification number

2006

OMB No 1545-0047

	ADOPTION, INC			35 1961	430
Part I	Compensation of the Five Highest Paid (See page 2 of the instructions List each one if there are no		Officers, Dire	ctors, and 1	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 t employee benefit plans & deferred compensation	(e) Expense account and other allowances
CHRISTO	PHER HUBER	40.00	50,577.	11,414	•
over \$50,000	f other employees paid	• 0			
Part II-A	Compensation of the Five Highest Paid (See page 2 of the instructions List each one (whether indiv			ional Servic	es
	(a) Name and address of each independent contractor paid m	ore than \$50,000	(b) Type of s	service	(c) Compensation
NONE					
			· · · · · · · · · · · · · · · · · · ·		
\$50,000 for pro	f others receiving over fessional services	> 0			····
Part II-B	Compensation of the Five Highest Paid (List each contractor who performed services other than profirms. If there are none, enter "None" See page 2 of the instru	ofessional services, whether individ		ervices	
	(a) Name and address of each independent contractor paid m	ore than \$50,000	(b) Type of s	service	(c) Compensation
NONE					
Total number of \$50,000 for oth	f other contractors receiving over er services	▶ 0			

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year

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

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

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 ADOPTION, INC 35-1961430 Page 2 Part III Statements About Activities (See page 2 of the instructions) Yes No During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities (Must equal amounts on line 38, Part VI-A, or X line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) a Sale, exchange, or leasing of property? 2a X b Lending of money or other extension of credit? 2b c Furnishing of goods, services, or facilities? 2c d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990 X 2d e Transfer of any part of its income or assets? 2e 3 a Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments) 3a b Dd the organization have a section 403(b) annuity plan for its employees? 3b c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement Зс d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? 3d 4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g **4**a b Did the organization make any taxable distributions under section 4966? 4b c Did the organization make a distribution to a donor, donor advisor, or related person? 4c 0 d Enter the total number of donor advised funds owned at the end of the tax year

Schedule A (Form 990 or 990-EZ) 2006

0.

0.

Schedule A (Form 990 or 990-EZ) 2006 ADOPTION, INC

35-1961430 Page 3

Par	t IV	Reason for Non-Private Foundation S	Status (See pages 4 ti	rough 7 of the instructio	ns)				
5 6 7 8 9	y that the organization is not a private foundation because it is: (Please check only ONE applicable box) A church, convention of churches, or association of churches Section 170(b)(1)(A)(i) A school Section 170(b)(1)(A)(ii) (Also complete Part V) A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii) A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state								
10 11a 11b 12		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(IV) (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(VI). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(VI). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)							
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization Type II Type III-Functionally Integrated Type III-Other								
	Provide the following information about the supported organizations. (See page 7 of the instructions)								
				I	organization listed in				
		(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the su organization the sup organiz	pported on listed in porting ration's	(e) Amount of support		
			Employer identification	Type of organization (described in lines 5 through 12 above	Is the su organization the sup organiz	pported on listed in porting ration's	Amount of		
			Employer identification	Type of organization (described in lines 5 through 12 above	Is the su organization the sup organiz governing o	pported on listed in porting ration's documents?	Amount of		
			Employer identification	Type of organization (described in lines 5 through 12 above	Is the su organization the sup organiz governing o	pported on listed in porting ration's documents?	Amount of		
			Employer identification	Type of organization (described in lines 5 through 12 above	Is the su organization the sup organiz governing o	pported on listed in porting ration's documents?	Amount of		
Total			Employer identification	Type of organization (described in lines 5 through 12 above	Is the su organization the sup organiz governing o	pported on listed in porting ration's documents?	Amount of		

FAMILIES THRU INTERNATIONAL Schedule A (Form 990 or 990-EZ) 2006 ADOPTION, INC 35-1961430 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 accounting. Calendar year (or fiscal year beginning in) (a) 2005 (b) 2004 (c) 2003 (d) 2002 (e) Total Gifts, grants, and contributions received (Do not include unusual 15 97,346. 78,883. 19,441. 21,257. 216,927. grants See line 28) Membership fees received 16 Gross receipts from admissions. merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 2,467,877. 2,040,914. 1,643,254. 1,542,699. 7,694,744. charitable, etc., purpose 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 19,255. 13,956. 18,023. 11,283. 62,517. organization after June 30, 1975 19 Net income from unrelated business activities not included in line 18 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 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets 23 2,584,478. 2,133,753. 1,680,718. 1,575,239. 7,974,188.Total of lines 15 through 22 116,601. 92,839. Line 23 minus line 17 37,464. 32,540. 25,845. 21,338. 16,807. 15,752. 25 Enter 1% of line 23 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26a N/A Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a N/A Do not file this list with your return. Enter the total of all these excess amounts 26b Total support for section 509(a)(1) test. Enter line 24, column (e) 26c Add: Amounts from column (e) for lines N/A 26d 26e e Public support (line 26c minus line 26d total) f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year 0. (2003) 0. b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: 0 - (2003) 0. 0. (2004) (2002)216,927. 16_ Add Amounts from column (e) for lines 27c

f Total support for section 509(a)(2) test Enter amount on line 23, column (e)

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

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

28 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 return. Do not include these grants in line 15

NONE

Schedule A (Form 990 or 990-EZ) 2006

27d

27e

7,911,671

and line 27b total

Add Line 27a total

Public support (line 27c total minus line 27d total)

35-1961430 Page 5

Schedule A (Form 990 or 990-EZ) 2006 ADOPTION, INC

Private School Questionnaire (See page 9 of the instructions) Part V

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes Nο 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 29 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 30 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 admissions, programs, and scholarships? 32c 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 Employment of faculty or administrative staff? 33c Scholarships or other financial assistance? 33d Educational policies? 33e Use of facilities? 33f Athletic programs? 33g h Other extracurricular activities? 33h 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 b Has the organization's right to such aid ever been revoked or suspended? 34b If you answered "Yes" to either 34a or b, please explain using an attached statement Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

Schedule A (Form 990 or 990-EZ) 2006

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred) 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures (add lines 38 and 39) 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is — The lobbying nontaxable amount is — Not over \$500,000 Over \$500,000 but not over \$1,000,000 Sover \$1,000,000 Sover \$1,000,000 but not over \$1,000,000 Sover \$	ked "a" and "limited co	ntrol" provisions apply
36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 Total lobbying expenditures (add lines 36 and 37) 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures (add lines 38 and 39) 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - Not over \$500,000 20% of the amount on line 40 is - Not over \$500,000 Cover \$1,000,000 but not over \$1,000,000 S100,000 plus 10% of the excess over \$1,000,000 Cover \$1,000,000 but not over \$1,000,000 S175,000 plus 10% of the excess over \$1,000,000 Cover \$1,000,000 but not over \$1,000,000 S175,000 plus 9% of the excess over \$1,000,000 Cover \$1,000,000 but not over \$1,000,000 S175,000 plus 9% of the excess over \$1,000,000 Cover \$1,000,000 but not over \$1,000,000 S175,000 plus 9% of the excess over \$1,000,000 Cover \$1,000,000 but not over \$1,000,000 S175,000 plus 9% of the excess over \$1,000,000 Cover \$1,000,000 but not over \$1,000,000 S175,000 plus 9% of the excess over \$1,000,000 Cover \$1,000,000 but not over \$1,000,000 S175,000 plus 9% of the excess over \$1,000,000 Cover \$1,000,000 but not over \$1,000,000	(a) Affiliated group totals	(b) To be completed for all electing organizations
37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures (add lines 38 and 39) 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is— Not over \$500,000 Over \$500,000 Over \$500,000 Over \$1,000,000 S1,000,000 S1,000,000 S1,000,000 S1,000,000 S1,000,000 Over \$1,000,000 Over \$1,000,000 S1,000,000 S1		electing organizations
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41 Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 Over \$500,000 Over \$50,0000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000,000 Over \$1,000,000 but not over \$1,000,000 22,000 but not over \$1,000,000 242 Grassroots nontaxable amount (enter 25% of line 41) 43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720 4-Year Averaging Period Under Section 50 (Some organizations that made a section 501(h) election do not have to complete below. See the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 48 (e)) 45 Lobbying ceiling amount (150% of line 48(e)) 65 Grassroots ceiling amount (150% of line 48(e)) 65 Grassroots ceiling amount (150% of line 48(e)) 66 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instruct During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a		
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Over \$17,000,000 42 Grassroots nontaxable amount (enter 25% of line 41) 43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 38 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720 4-Year Averaging Period Under Section 50 (Some organizations that made a section 501(h) election do not have to complete below. See the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 (e) 5 Lobbying nontaxable amount 6 Lobbying ceiling amount 6 Lobbying ceiling amount 6 Lobbying ceiling amount 6 Grassroots nontaxable amount 7 Total lobbying expenditures 8 Grassroots ceiling amount 8 Grassroots lobbying expenditures 9 Grassroots lobbying expenditures 10 Grassroots lobbying expenditures 11 Lobbying Activity by Nonelecting Public Charities 12 Fert VI-B Lobbying Activity by Nonelecting Public Charities 13 For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instruct notifuence public opinion on a legislative matter or referendum, through the use of a Volunteers 14 Volunteers 15 Paid staff or management (Include compensation in expenses reported on lines c through h.) 15 Media advertisements 16 Mailings to members, legislators, or the public		
42 Grassroots nontaxable amount (enter 25% of line 41) 43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720 4-Year Averaging Period Under Section 50 (Some organizations that made a section 501(h) election do not have to complete below. See the instructions for lines 45 through 50 on page 13 of the interest liseal year beginning in) Catendar year (or (a) (b) (c) (iscal year beginning in) 2006 2005 2004 45 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures B Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures (For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instruct 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		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720 4-Year Averaging Period Under Section 50 (Some organizations that made a section 501(h) election do not have to complete below See the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 60 on page 13 of the instructions for lines 45 through 60 on page 13 of the instructions for lines 45 through 60 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		Ì
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720 4-Year Averaging Period Under Section 50 (Some organizations that made a section 501(h) election do not have to complete below. See the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions for lines 45 through 50 on page 13 of the instructions of lines 45 through 50 on page 13 of the instructions for lines 45 through 60 page 6		
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Grassroots ceiling amount (150% of line 48(e)) The state of 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 Wedia advertisements Mailings to members, legislators, or the public Grassroots ceiling amount (150% of line 48(e)) None 48(e)) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None 150% of line 48(e) None		
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Fart VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instruct 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		
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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	tions \	
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		
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	Yes	No Amount
 Paid staff or management (Include compensation in expenses reported on lines c through h.) Media advertisements Mailings to members, legislators, or the public 		Х
 Media advertisements Mailings to members, legislators, or the public 	 -	X
d Mailings to members, legislators, or the public		$\frac{1}{X}$
		X
		X
f Grants to other organizations for lobbying purposes		X
g Direct contact with legislators, their staffs, government officials, or a legislative body		X
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		Х
i Total lobbying expenditures (Add lines c through h.) If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities		0.

Par				d Relationships With Noncha	aritable	
		zations (See page 13 of the insti				
51		directly or indirectly engage in any of	- ·	•		
_	·	section 501(c)(3) organizations) or i		Diffical organizations?	Yes	N-
а	•	ganization to a noncharitable exempt	corganization of		r +	
	(i) Cash		·	-	51a(i)	X
	(ii) Other assets				a(ii)	- ^- -
b	Other transactions:				L (i)	U
		ets with a noncharitable exempt orga	nization	•	b(i)	X
		a noncharitable exempt organization			b(ii)	
	(iii) Rental of facilities, equipme		•		b(iii)	X
	(iv) Reimbursement arrangeme	ents			b(iv)	X
	(v) Loans or loan guarantees				b(v)	X
_		r membership or fundraising solicitat			b(vi)	$\frac{\Lambda}{X}$
_		, mailing lists, other assets, or paid e			_ c	A
đ				always show the fair market value of the		
		s given by the reporting organization			N/	70
		nent, show in column (d) the value o	i the goods, other assets, o	T	147	Α
(a) Line r		Name of noncharitable ex	emot organization	(d) Description of transfers, transactions, a	nd sharing arrange	ements
		Name of Helicitaticote SX		Boscipion of transition, transactions, a		
						-
						•
						
					···········	
		-				
	·					
			. =	 		
						
			··· ·			
			· 			
	Code (other than section 501(c If "Yes," complete the following)(3)) or in section 527? schedule N/A		anizations described in section 501(c) of t	he Yes	X No
	(a Name of or		(b) Type of organization	(c) Description of relation	onship	
	·					
						
	 		ļ <u></u>			
623152 01-18-0)7			Schedule A (Form 990 or 990-E	Z) 2006

FORM 990 PAGE 2

Asset No	Description	Date Acquired	Method	Lıfe	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	LAND	VARIES	L			198,848.			198,848.			0.
2	BUILDING	VARIES	SL	.000	16	878,454.			878,454.	66,818.		18,773.
	EQUIPMENT * TOTAL 990 PAGE 2	VARIES	SL	.000	16	292,679.			292,679.	94,723.		52,560.
	DEPR					1369981.		0.	1369981.	161,541.	٥.	71,333.
										;		
						:						
											-	

FORM 990 GAIN (LOSS)	FROM PUBLICLY T	RADED SECURIT	IES	STATEMENT 1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
GENERAL MOTORS ACCEPT CORP BONDS	25,000.	25,000.	0.	. 0.
GENERAL MOTORS ACCEPT CORP BONDS	171,000.	171,000.	0.	. 0.
TO FORM 990, PART I, LINE 8	196,000.	196,000.	0.	. 0.

FORM 990 GAIN	(LOSS) FROM	A SALE OF OTE	HER ASSETS		STATEMENT 2
DESCRIPTION		DATI ACQUI			ETHOD QUIRED
COMPUTER EQUIPMENT		VARIO	JS VARIO	ous pui	RCHASED
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
-	870.	10,142.	0.	5,874	4. <3,398.>
TO FM 990, PART I, LN 8	870.	10,142.	0.	5,874	<3,398.>
FORM 990 OTHER C	CHANGES IN NE	ET ASSETS OR	FUND BALA	NCES &	STATEMENT 3
DESCRIPTION					AMOUNT
UNREALIZED GAINS ON INV	ESTMENTS			_	9,869.
TOTAL TO FORM 990, PART	1, LINE 20				9,869.
				-	
FORM 990	O'1	THER EXPENSES	5 		STATEMENT 4
	(A)	(B) PROGRAM		C) GEMENT	(D)
DESCRIPTION	TOTAL	SERVICE	ES AND (GENERAL	FUNDRAISING
ACCREDITATION FEES BANK FEES COMPUTER	1,212 483		212. 183.		
MAINT/SUPPLIES DUES & SUBSCRIPTIONS FOREIGN COUNTRY	81,043 11,724	· ·	507. 200.	10,536. 1,524.	
COORDINATOR OFFICE,ETC INFORMATIONAL	308,222	2. 308,2	222.		
MEETINGS INSURANCE	80,122		122. 134.	7,192.	
	55,326			ำวา	
MISCELLANEOUS OFFICE EXPENSE OTHER PROFESSIONAL FEES	1,709 25,046 31,763	9. 1,4 5. 18,9	187. 970.	222. 2,835. 31,763.	3,241.

FAMILIES THRU INTERNA	ATIONAL ADOPTION, I	N		35-1961430
TRAINING. UTILITIES	4,607. 20,380.	4,607. 17,731.	2,649.	
TOTAL TO FM 990, LN 43	710,943.	648,952.	58,750.	3,241.

FORM 990 OFFIC	CER COMPENSATIO			STATEMENT 5
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
KEITH WALLACE	86,177.	16,011.		102,188.
A. PROGRAM SERVICES	74,974.	13,930.		88,904.
B. MANAGEMENT AND GENERAL C. FUNDRAISING	11,203.	2,081.		13,284.
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
MAUREEN O'CONNOR	69,012.	6,963.		75,975.
A. PROGRAM SERVICES	60,040.	6,058.		66,098.
B. MANAGEMENT AND GENERAL	8,972.	905.		9,877.
C. FUNDRAISING	_			
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
TINA JI	66,984.	10,062.		77,046.
A. PROGRAM SERVICES	58,276.	8,754.		67,030.
B. MANAGEMENT AND GENERAL	8,708.	1,308.		10,016.
C. FUNDRAISING				
TOTAL PROGRAM SERVICES				222,032.
TOTAL MANAGEMENT AND GENER	AL			33,177.
TOTAL FUNDRAISING				
TOTAL OFFICER, ETC., COMPE	NSATION INCLUDE	D ON PART II	, LINE 25A	255,209.

FORM 990	SPECIFIC ASSISTANCE TO INDIVIDUALS	STATEMENT	6
DESCRIPTION		AMOUNT	
HUMANITARIAN AID	ENMINE (CHILDWICTON INC.) FOR	146,68	34.
DONATION TO AFFILIATED HUMANITARIAN AID	ENTITY (CHILDVISION, INC) FOR	28,50	00.
TOTAL TO FORM 990, PAR	T II, LINE 23	175,18	34.
FORM 990 STATEMENT	OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	7

EXPLANATION

THE ORGANIZATION PROVIDES ADOPTION SERVICES TO PLACE CHILDREN FROM CHINA, RUSSIA, GUATEMALA, VIETNAM, INDIA ND OTHER COUNTRIES WITH U.S. FAMILIES

FORM 990	DEPRECIATION	OF ASS	ETS NOT	HELD F	OR INV	VESTMENT	STATEMENT	8
DESCRIPTION				r or Basis		CUMULATED PRECIATION	BOOK VALU	E
LAND BUILDING EQUIPMENT			8	198,848 878,454 292,679	•	0. 85,591. 147,283.	198,8 792,8 145,3	63.
						 -	· · · · · · · · · · · · · · · · · · ·	
TOTAL TO FORM	990, PART IV	, LN 57	1,3	369,981	• ===	232,874.	1,137,1	07.
TOTAL TO FORM FORM 990	990, PART IV	· · · · · · · · · · · · · · · · · · ·	1,3		• 	232,874.	1,137,1 STATEMENT	9
FORM 990	990, PART IV	· · · · · · · · · · · · · · · · · · ·			-	232,874.		
	SITS	· · · · · · · · · · · · · · · · · · ·			•	232,874.	STATEMENT	9

FAMILIES THRU I	NTERNATIONAL	ADOPTION, I	N -		35-1961	1430
FORM 990*	4	ORTGAGES PA	YABLE		STATEMENT	10
DESCRIPTION					BALANCE DU	JE
OLD NATIONAL BANK						0.
TOTAL INCLUDED ON	FORM 990, PA	ART IV, LINE	64B, COLUMN	і В		-
FORM 990	NON-G	GOVERNMENT SI	ECURITIES		STATEMENT	11
SECURITY DESCRIPT	ION COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV SECURITI	
CORPORATE BONDS	FMV	0.				
TO FORM 990, LINE	54A, COL B	0.				
FORM 990		OREIGN COUNT			STATEMENT	12
NAME OF COUNTRY						
VIETNAM RUSSIA						
FORM 990		REIGN COUNTR ATION HAS AN			STATEMENT	13
NAME OF COUNTRY						
CHINA * GUATEMALA * RUSSIA - OFFICIAL JIETNAM - OFFICIAL		CHINA, G AGENCY W	GUATEMALA, OR VE HAVE UNOFFI	REGISTERED OR INDIA, HOWEVER CIAL OFFICES I	, AS AN ADOPT N THESE COUNT	ΓΙΟΝ ΓRΙΕ

[NDIA *

WITH THE ADOPTION AUTHORITIES FULL KNOWLEDGE.

Form 8868

(Rev.-Ap: =2007)

Department of the Treasury
Internal Beverue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev 4-2007)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) of the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated 1990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this	
Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) is the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated	
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noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) y the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated	
visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.	Form
Type or Name of Exempt Organization Employer identificatio	n number
print FAMILIES THRU INTERNATIONAL	
ADOPTION, INC 35-1961430	
Number, street, and room or suite no. If a P.O. box, see instructions. 400 BENTEE WES COURT	
City, town or post office, state, and ZIP code. For a foreign address, see instructions. EVANSVILLE, IN 47715-4060	
Check type of return to be filed (file a separate application for each return):	
X Form 990 ☐ Form 990-T (corporation) ☐ Form 4720	
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227	
Form 990-EZ Form 990-T (trust other than above) Form 6069	
☐ Form 990-PF ☐ Form 1041-A ☐ Form 8870	
The books are in the care of MAUREEN O'CONNOR	
Telephone No. ► 812-479-9900 FAX No. ►	
If the organization does not have an office or place of business in the United States, check this box	· 🗀
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group,	check this
DOX ► . If it is for part of the group, check this box ► . and attach a list with the names and EINs of all members the extension v	
XX 🚩 📖 . If it is for part of the group, check this box 🚩 🔛 and attach a list with the names and Elivs of all members the extension v	
and attach a list with the names and Elivs of all members the extension value.	
1 I request an automatic 3-month (6-months for a section 501(c) corporation required to file Form 990-T) extension of time until AUGUST 15, 2007 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:	
1 I request an automatic 3-month (6-months for a section 501(c) corporation required to file Form 990-T) extension of time until AUGUST 15, 2007 , to file the exempt organization return for the organization named above. The extension	
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For Privacy Act and Paperwork Reduction Act Notice, see instructions.