Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 Open to Public Inspection

A	rut the 2	2007 calendar year, or tax year beginning and end	ing				
В	Check if applicable	Please C Name of organization) Employer i	dentification number		
_	Addres	USE INSCRINESE CHILDREN CHARITIES			000000		
F	change	print or DBA CHINESE CHILDREN ADOPTION INT'L	<u></u>		208720		
F	change lnitial	See Number and Street (or P.O. box it mail is not delivered to street address)	Room/suite E	Telephone			
H	return Termin-	Specific 6920 SOUTH HOLLY CIRCLE		(303) 850-9998			
누	lation lAmend	tions City of town, state of country, and ZIP + 4		Accounting me Other (specify)			
┝	lreturn ∏Applica	CENTENNIAL, CO 80112 ton • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts					
_	lpendin	must attach a completed Schedule A (Form 990 or 990-F7)	n <i>ario i are not applic</i> H(a) Is this a group ret		ction 527 organizations.		
G	Weheito		H(b) If "Yes," enter num				
			H(c) Are all affiliates in		N/A Yes No		
_	Check he	of the organization is not a E00(a)/2) supporting organization and its gross	(If "No," attach a li	st.)			
		are normally not more than \$25,000. A return is not required, but if the organization	H(d) Is this a separate i ganization coverei	return tiled b d bv a group	ruling? Yes X No		
		to file a return, be sure to file a complete return.	I Group Exemption		N/A		
					tion is not required to attach		
<u>L</u>	Gross re	ceipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 6,891,295.	Sch. B (Form 990,				
	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balan	ces				
2008	1	Contributions, gifts, grants, and similar amounts received:					
7	a	Contributions to donor advised funds					
igorphi	b	Direct public support (not included on line 1a)	<u>968,85</u>	3.			
67 8	C	Indirect public support (not included on line 1a)					
200	d	Government contributions (grants) (not included on line 1a)					
7	e	Total (add lines 1a through 1d) (cash \$ 968,853. noncash \$)	1e	968,853.		
j	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	4,581,975.			
	3	Membership dues and assessments		3			
	5	Interest on savings and temporary cash investments Dividends and interest from securities	5	1,185,850.			
	6 a	Gross rents SEE STATEMENT 1 6a	47,73		1,105,050.		
•	° a	Less: rental expenses SEE STATEMENT 2 6b	25,82				
		Net rental income or (loss). Subtract line 6b from line 6a	23,02	6c	21,908.		
Revenue	7	Other investment income (describe) 7	21,300.		
š	8 a	Gross amount from sales of assets other (A) Securities	(B) Other				
æ	-	than inventory 8a	(= / = ====				
	Ь	Less: cost or other basis and sales expenses 12,483.8b					
	C	Gain or (loss) (attach schedule) <12,483.>8c					
	d	Net gain or (loss). Combine line 8c, columns (A) and (B) STMT 3		8d	<u><12,483.</u> >		
	9	Special events and activities (attach schedule). If any amount is from gaming, check here					
	a	Gross revenue (not including \$ 0 of contributions reported on line 1b)	23,09	3.			
	b	Less: direct expenses other than fundraising expenses 9b		i			
	C	1 1	TATEMENT 4	9c	23,093.		
	10 a	Gross sales of inventory, less returns and allowances					
	b	Less: cost of goods sold		⊢			
	C	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 105 from line 10 Other revenue (from Part VII. line 103)	VFD	10c	83,787.		
	11 12	Other revenue (from Part VII, line 103) Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11		11	6,852,983.		
_	13	Program services (from line 44, column (B))	2000 0	13	4,129,822.		
es	14	Program services (from line 44, column (B)) Management and general (from line 44, column (C)) APR 2 1	2008	14	780,195.		
ens	15	Fundraising (from line 44, column (D))		15	100/12531		
Expenses	16	Payments to affiliates (attach schedule) OGDEN	1, UŢ	16			
	17	Total expenses. Add lines 16 and 44, column (A)		17	4,910,017.		
	18	Excess or (deficit) for the year. Subtract line 17 from line 12		18	1,942,966.		
e et	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	20,523,873.		
Net Assets	20	Other changes in net assets or fund balances (attach explanation) SEE S	TATEMENT 5		38,918.		
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20		21	22,505,757.		
7230	001 7-07	HA For Privacy Act and Paperwork Reduction Act Notice see the senarate instructions			Form 990 (2007)		

Form 990 (2007)

Page 2

Pá					nd (D) are required for section le 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
	Grants paid from donor advised funds (attach schedule) (cash \$ 0 • noncash \$ 0	•				
22b	If this amount includes foreign grants, check here Other grants and allocations (attach schedule (cash \$ 541349 • noncash \$ 0	إ			STATEMENT 6	
23	If this amount includes foreign grants, check here X Specific assistance to individuals (attach schedule)	22b 23	541,349.	541,349.		
	Benefits paid to or for members (attach schedule)	24				
	Compensation of current officers, directors, key employees, etc. listed in Part V-A Compensation of former officers, directors, key	25a	361,646.	325,482.	36,164.	0.
C	employees, etc. listed in Part V-B Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in	25b	0.	0.	0.	0.
26	section 4958(c)(3)(B) Salaries and wages of employees not	25c		1 004 546	252 452	
27	included on lines 25a, b, and c Pension plan contributions not included on lines 25a, b, and c	26 27	2,177,905.	1,804,746.	373,159.	
	Employee benefits not included on lines 25a - 27	28				
30	Payroll taxes Professional fundraising fees Accounting fees	29 30 31				
33	Legal fees Supplies Telephone	32 33 34	182,234. 52,634.	144,818. 45,168.	37,416.	
35	Postage and shipping Occupancy	35 36	136,879. 346,038.	123,459. 312,192.	7,466. 13,420. 33,846.	
38	Equipment rental and maintenance Printing and publications Travel	37 38 39	233,486.	217,434.	16.052	
40	Travei Conferences, conventions, and meetings Interest	40 41	233,400.	217,434.	16,052.	
43	Depreciation, depletion, etc (attach schedule) Other expenses not covered above (itemize) CONTRACT SERVICES	42 43a	525,743.	489,715.	36,028.	
C	INSURANCE AND MISCELLANEOUS GRANTS AND ASSISTANCE	43b 43c 43d	348,752.	125,459.	223,293.	
	TO OTHERS	43e 43f	3,351.		3,351.	
	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	43g 44	4,910,017.	4,129,822.	780,195.	0.
Are a	It Costs. Check if you are following in yount costs from a combined educational campaies, enter (i) the aggregate amount of these joint cost the amount allocated to Management and general \$	gn an sts \$	d fundraising solicitation rep	orted in (B) Program servi ii) the amount allocated to iv) the amount allocated to	Program services \$	Yes X No N/A ;

84-1208720 CHINESE CHILDREN ADOPTION INT'L Page 3 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	at is the organization's primary exempt purpose? ► <u>SEE STATEMENT</u> 10		Program Service Expenses
che	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ents 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	SEE STATEMENT 7		
	(Grants and allocations \$) If this amount includes foreign grants, check here		2,900,426.
b	SEE STATEMENT 8		
		-	
	(Grants and allocations \$) If this amount includes foreign grants, check here		663,309.
С	Grants and allocations \$) If this amount includes foreign grants, check here SEE STATEMENT 9		063,309.
	(Grants and allocations \$) If this amount includes foreign grants, check here		367,741.
d	CHINA ROOTS PROGRAM ARRANGES HERITAGE TOURS BACK TO THE		
	ORPHANAGE FOR ADOPTEE AND FAMILIES. COUNSELING PROGRAM OFFERS EMOTIONAL SUPPORT TO ADOPTEE AND THEIR FAMILIES.	-	
	OFFERS EMOTIONAL SUPPORT TO ADOPTEE AND THEIR FAMILIES.		
	(Grants and allocations \$) If this amount includes foreign grants, check here		198,346.
е	Other program services (attach schedule)		
_	(Grants and allocations \$) If this amount includes foreign grants, check here		
Ť	Total of Program Service Expenses (should equal line 44, column (B), Program services)		<u>4,129,822.</u>
			Form 990 (2007)

Form 990 (2007)

Form	1 990 ((2007) DBA CHINESE CH	ILL	REN ADOPTION	INT'L		<u> 84-</u>	<u> 1208720 </u>	Page 4
		Balance Sheets (See the instructions)							
Note		ere required, attached schedules and amounts wit uld be for end-of-year amounts only.	hin the	e description column	(A) Beginning of yea	r		(B) End of ye	ar
	45	Cash - non-interest-bearing	1,460,9		45	3,843			
	46	Savings and temporary cash investments			10,103,0	61.	46	1,211	,125.
	47 a	Accounts receivable	47a]				
	b	Less allowance for doubtful accounts	47b		_		47c	-	
	48 a	Pledges receivable	48a						
	b		48b	L			48c		
	49	Grants receivable					49		
	50 a	Receivables from current and former officers, di key employees	rectors	s, trustees, and			50a		
		Receivables from other disqualified persons (as	dofina	d under cention			oua		
	ן י	4958(f)(1)) and persons described in section 495					50b		
Assets	51 2	Other notes and loans receivable	51a) 		$\overline{}$	300		
As			51b			ľ	51c		
	52	Inventories for sale or use	010	<u> </u>	20,1	12.	52	27	,494.
	53	Prepaid expenses and deferred charges			69,9		53		,505.
		Investments · publicly-traded securities		Cost FMV			54a		7000
		· •		Cost FMV			54b		
	55 a	Investments - land, buildings, and	_						
		equipment basis	55a		_	-			
		Least continuitated depresenting	55b				55c		
	56	· · · · · · · · · · · · · · · · · · ·		TATEMENT 11	12,677,8	77	56	20,440	801
	1	Land, buildings, and equipment basis	57a	4,890,173.		′′•	- 30	20,440	,001.
		Less: accumulated depreciation STMT 12	57b	498,677.		32.	57c	4,391	.496.
	58	Other assets, including program-related investments					-		, _ , , ,
		(describe ► SE	10,3	45.	58	25	,578.		
	59	Total assets (must equal line 74). Add lines 45 t	hroug	h 58	27,922,9	95.	59	30,028	,895.
	60	Accounts payable and accrued expenses			435,0	04.	60	307	,439.
	61	Grants payable					61		
40	62	Deferred revenue			6,558,5	10.	62	6,884	<u>,199.</u>
ties	63	Loans from officers, directors, trustees, and key	emplo	oyees			63		
Liabiliti		a Tax-exempt bond liabilities					64a		
Ë		Mortgages and other notes payable		22222	105 6		64b		F 0 0
	65	Other liabilities (describe POST-ADOPTI	ON	DEPOSITS)	405,6	08.	65	331	<u>,500.</u>
	66	Total liabilities. Add lines 60 through 65			7,399,1	22.	66	7,523	.138.
		anizations that follow SFAS 117, check here	X	and complete lines					7 =
	•	67 through 69 and lines 73 and 74		·			İ		
Ses	67	Unrestricted			19,009,4	38.	67	20,789	,882.
<u>a</u>	68	Temporarily restricted			1,514,4	35.	68	1,715	,875.
Ва	69	Permanently restricted					69		
ဋ	Orga	anizations that do not follow SFAS 117, check h	nere 🕽	▶ and					
Ē		complete lines 70 through 74.				1			
Net Assets or Fund Balances	70	Capital stock, trust principal, or current funds					70		
SSE	71	Paid-in or capital surplus, or land, building, and			<u> </u>		71		
t A	72	Retained earnings, endowment, accumulated in					72		
Š	73	Total net assets or fund balances. Add lines 67 throu	-	•		_		00	
	Ì . .	(Column (A) must equal line 19 and column (B) must			20,523,8		73	22,505	
	74	Total liabilities and net assets/fund balances.	Add III	ies ob and 73	27,922,9	95.	74	30,028	<u>,895.</u>

Form 990 (2007) CHINESE CHILDREN ADOPTION INT'L 84-1208720 Page 5 Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.) Total revenue, gains, and other support per audited financial statements 6,917,730. Amounts included on line a but not on Part I, line 12 38,918 1 Net unrealized gains on investments b2 2 Donated services and use of facilities Recoveries of prior year grants b3 Other (specify): RENTAL EXPENSES 25,829 Add lines b1 through b4 64,747. 6,852,983. 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 Total revenue (Part I, line 12). Add lines c and d 852 983. 6, Part IV-B | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 4,935,846. 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): RENTAL EXPENSES 25,829. b4 Add lines b1 through b4 25,829. Subtract line b from line a 4,910,017. С Amounts included on Part I, line 17, but not on line a: Investment expenses not included on Part I, line 6b d1 2 Other (specify). d2 Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d 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) (B) Title and average hours (C) Compensation (D) Contributions to employee benefit (E) Expense (A) Name and address per week devoted to employee benefit plans & deferred account and (If not paid, enter position other allowances 0-) compensation plans SEE STATEMENT 341,040 20,606

Form **990** (2007)

CHINESE CHILDREN CHARITIES

CHINESE CHILDREN CHARTTIES Form 990 (2007) CHINESE CHILDREN ADOPTION INT'L 84-1208720 Page 6 Current Officers, Directors, Trustees, and Key Employees (continued) Part V-A Yes No 75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board 8 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) SEE STATEMENT 15 75b X 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 organization" Х 75c If "Yes," attach a statement that includes the information described in the instructions d Does the organization have a written conflict of interest policy? 75d Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.) (C) Compensation (D) Contributions to (E) Expense employee benefit plans & deferred (A) Name and address (B) Loans and Advances (if not paid, account and NONE enter -0-) other allowances compensation plans Part VI Other Information (See the instructions.) Yes No Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change 76 Were any changes made in the organizing or governing documents but not reported to the IRS? 77 If "Yes," attach a conformed copy of the changes. 78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X 78a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 78b Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement X 79 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80a b If "Yes," enter the name of the organization exempt or nonexempt 81 a Enter direct and indirect political expenditures. (See line 81 instructions.) 0 81a |

Form **990** (2007)

b Did the organization file Form 1120-POL for this year?

CHINESE CHILDREN CHARITIES Form 990 (2007) DBA CHINESE CHILDREN ADOPTION INT'L 84-1208720 Other Information (continued) Part VI Yes No 82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially 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 N/A (See instructions in Part III.) 82b 83 a Did the organization comply with the public inspection requirements for returns and exemption applications? 83a b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? X 83b 84 a Did the organization solicit any contributions or gifts that were not tax deductible? X 84a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A 84b 85 a 501(c)(4), (5), or (6) Were substantially all dues nondeductible by members? N/A 85a b Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A 85b If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. c Dues, assessments, and similar amounts from members N/A 85c Section 162(e) lobbying and political expenditures 85d N/A Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A 85g If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A 85h 86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 N/A 86a b Gross receipts, included on line 12, for public use of club facilities N/A 86b 501(c)(12) organizations Enter a Gross income from members or shareholders N/A 87a b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them) N/A 87Ь 88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX 88a X b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning 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. section 4911► 0 • ; section 4912 ► 0. b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit 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 sections 4912, 4955, and 4958 0. 0. Enter. Amount of tax on line 89c, above, reimbursed by the organization All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 89e All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89f g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 89g 90 a List the states with which a copy of this return is filed ▶NONE b Number of employees employed in the pay period that includes March 12, 2007 90b 69 91 a The books are in care of ▶ THE ORGANIZATION (303) 850-9998 Telephone no. Located at ▶ 6920 SOUTH HOLLY CIRCLE, CENTENNIAL, CO ZIP+4 ► 80112 No b At any time during the calendar year, did the organization have an interest in or a signature or other authority over Yes a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 91b

and Financial Accounts.

If "Yes," enter the name of the foreign country

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank

•		ESE CHILI		· ·			
Form 990 (2007)	DBA	<u>CHINESE (</u>	CHILDR	EN ADOPTION	INT	<u>'L 84-</u>	1208720 Page 8
	ner Information (c						Yes No
				ntain an office outside o	f the Ur	rited States?	91c X
	er the name of the fore						
		_		in lieu of Form 1041- C	heck he	ere ▶ 92	▶ ∟
	e amount of tax-exemple alysis of Income-					92	N/A
	s amounts unless other			ted business income	Exclud	ed by section 512, 513, or 514	
indicated	s amounts unless other	Wise	(A)	(B)	(C)	(D)	(E) Related or exempt
93 Program serv	IICe tevenire.		Business code	Amount	Exclu-	Amount	function income
•	ON FEES				code		4,349,998.
	N AND FEES						99,114.
	ROOTS AND						
	LING FEES						132,863.
e							
f Medicare/Me	edicaid payments						
	ntracts from governme	nt agencies					
94 Membership	dues and assessment	s					
95 Interest on sav	ings and temporary cash	investments					
96 Dividends an	d interest from securiti	es			14	1,185,850.	
97 Net rental inc	come or (loss) from real	estate					
a debt-financed	d property	_					
b not debt-final	nced property	L			30	21,908.	
98 Net rental inc	come or (loss) from per	sonal property					
99 Other investr	nent income	L			ļ <u>l</u>		
100 Gain or (loss)	from sales of assets				1		
other than in	•	<u> </u>					<u> <12,483.</u>
	r (loss) from special ev				1	· · · · · · · · · · · · · · · · · · ·	23,093.
•	or (loss) from sales of in	ventory		_			
103 Other revenu							
	TORE SALE				 		<u>83,787.</u>
b							
				-	\vdash		
a	· · · · -				\vdash		
ee	1 and (D) (D) and	(D)		0.	╁	1 207 750	4 676 272
	l columns (B), (D), and e 104, columns (B), (D)		!	<u>U•</u>	<u> </u>	1,207,758.	4,676,372.
	is line 1e, Part I, should		nt on line 1:	2 Part I		▶_	5,884,130.
					t Puri	OOSES (See the instruction	
						antly to the accomplishment o	
	purposes (other than by				, milporto	and to the abbomphomner o	Title organization 5
SE	E STATEMENT	16		·			
			ubsidiar	ies and Disregard	ed En	tities (See the instruction	1S.)
	(A) nd EIN of corporation,	(B) Percentage of		(C) Nature of activities		(D)	(E)
partnership, or	disregarded entity	ownership interest		Nature of activities		Total income	End-of-year assets
		%					
	N/A_	%					
		%					
Barry III		<u>%</u>				<u></u>	
						fit Contracts (See the	
				ectly, to pay premiums on		nal benefit contract?	Yes X No
• •			-	ly, on a personal benefit co	ntract?		Yes X No
Note: If "Yes" to	(b), file Form 8870 and	rom 4/20 (see	instruction:	s)			

Form **990** (2007)

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Pa	controlling organization as defined in section 512(b)(13)	ontrollea Entitle N/A	S. Complete only if the organi	zation is a	
106	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	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount transfe	
а					
b					
С					
	Totals				
107	Did the reporting organization receive any transfers from a controlled en complete the schedule below for each controlled entity	tity as defined in sect	cion 512(b)(13) of the Code? If	Yes,"	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount transfe	
а					
b					
С					
	Totals				
108	Did the organization have a binding written contract in effect on August 1 annuities described in question 107 above?	7, 2006, covering the	interest, rents, royalties, and	Yes	No
Plea	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	ng schedules and statement h preparer has any knowled	s, and to the best of my knowledge and by		rect,
Sign Here	oliginature of officer	E0	Date		
Paid Prepa	Preparer's Sugnature But R Avail CPA		Check if lelf- mployed		Inst X)
Jse (BONDI & CO. LLC	1 7	Phone no. ► 303-	 799-682	
			1	Form 990	

Form 990 (2007)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

OMB No 1545-0047

2007

Marie of the organization CHINESE CHILDREN CHARITIE	-		curpioyer identili	cation number
DBA CHINESE CHILDREN ADOP	TION INT'L_		<u>84 12087</u>	<u>'20</u>
Part I Compensation of the Five Highest Paid Emp	oloyees Other Tha	n Officers, Dire	ctors, and Ti	rustees
(See page 1 of the instructions. List each one. If there are none, et				
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hou per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JUDY WINGER	CHILD PLACEN	יווס מווס	Compensation	allowarices
5770 CHEETAH CHASE, LITTLETON, CO 801	-	68,926		
JEAN ROHRBACH	COI DIRECTOR		'	
	45.00 IT DIRECTOR	56,950	'	
TING DONG HE	·	70 252		
8986 S SANDERLING WAY, LITTLETON, CO	50.00	79,352	'	
RICHARD DIETZ	GA OFFICE DI	f		
122 WESTCHESTER DR, SMYRNA, GA 30082	50.00	58,590	-	
Total number of other employees paid				
over \$50,000	l 0			
Part II-A Compensation of the Five Highest Paid Inde	pendent Contract	tors for Profess	ional Service	es
(See page 2 of the instructions. List each one (whether individuals				
(a) Nome and address of each undersadent contracts and many the	#F0 000	(1) T (
(a) Name and address of each independent contractor paid more the	an \$50,000	(b) Type of	service ((c) Compensation
				
				
		-		
Total number of others receiving over				
\$50,000 for professional services	0			
Part II-B Compensation of the Five Highest Paid Inde		tore for Other S		
(List each contractor who performed services other than profession	•		ei vices	
firms. If there are none, enter "None." See page 2 of the instruction	•	iduais oi		
(a) Name and address of each independent contractor paid more that	ın \$50,000	(b) Type of	service (c) Compensation
	<u> </u>			
NONE				
NONE				
				
	-			
· · · · · · · · · · · · · · · · · · ·				
		 -		
Total number of other contractors receiving over		 		
\$50,000 for other services	0			
				

Ξ	Part III Statements About Activities (See page 2 of the instructions.)	<u>0012</u>		No
1	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		ŀ	
	lobbying activities 🕨 \$ \$ (Must equal amounts on line 38, Part VI-A, or	.]		
	line i of Part VI-B.)	<u> </u>		X
	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.	- [
2	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	L	X
	b Lending of money or other extension of credit?	_2b		X
	c Furnishing of goods, services, or facilities?	_2c		X
	d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	L	Х
	e Transfer of any part of its income or assets?	2e		X
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		X
	b Did the organization have a section 403(b) annuity plan for its employees?	3b		X
	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	3c		Х
	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f			1
	and 4g	4a		X
	b Did the organization make any taxable distributions under section 4966? N/A	4b		
	c Did the organization make a distribution to a donor, donor advisor, or related person? N/A	4c		
	d Enter the total number of donor advised funds owned at the end of the tax year			0
	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		N/	<u> </u>
	f 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			0.
	n. Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year			Λ_

Schedule A (Form 990 or 990-EZ) 2007

Schedule A (Form 990 or 990-EZ) 2007 DBA CHINESE CHILDREN ADOPTION INT'L

84-1208720 Page 3

Par	t IV	Reason for Non-Private Foundation S	Status (See pages 4 t	through 8 of the instruction	ons.)					
l certif	y that th	he organization is not a private foundation because it is: (Please check only ONE a	applicable box.)						
5		A church, convention of churches, or association of ch	urches. Section 170(b)(1)(A)(ı).						
6		A school. Section 170(b)(1)(A)(II). (Also complete Par	t V.)							
7		A hospital or a cooperative hospital service organization	n. Section 170(b)(1)(A)(m).						
8	Щ	A federal, state, or local government or governmental (, , ,						
9		A medical research organization operated in conjunction	on with a hospital. Sectio	n 170(b)(1)(A)(III). Enter	the hospital's	name, city,				
		and state								
10		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.)								
11a	لـــا	An organization that normally receives a substantial pa		governmental unit or from	the general (public.				
		Section 170(b)(1)(A)(vi). (Also complete the Support								
11b		A community trust. Section 170(b)(1)(A)(vi). (Also cor								
12	X	An organization that normally receives: (1) more than receipts from activities related to its charitable, etc., fur								
		its support from gross investment income and unrelate								
		by the organization after June 30, 1975. See section 5								
13		An organization that is not controlled by any disqualifie	ud norcone (other than fo	undation managers) and	athoriusa ma	ata tha raguer	amonto of coation			
10		509(a)(3). Check the box that describes the type of sup	•	unualion managers) and	Offici Mise His	ets the require	ements of section			
		Type I Type II	· 	inctionally Integrated		Type III-	.Other			
			Type iii tu	motionally integrated	'	Type III-	Other			
		Provide the following information al	out the supported orga	nizations. (See page 8 of	the instruction	ns.)				
	(a) (b) (c) (d) (e)									
		(a)	(b)	(c)	(d))	(e)			
		(a) Name(s) of supported organization(s)	Employer	Type of organization	is the su	pported	Amount of			
			Employer identification	Type of organization (described in lines	Is the su organization	pported on listed in				
			Employer	Type of organization	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	pported on listed in porting	Amount of			
			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			
			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			
			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			
			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			
Fotal			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 number (EIN)	Type of organization (described in lines 5 through 12 above or IRC section)	Is the su organization the sup organiz governing of Yes	pported on listed in porting ration's documents?	Amount of			

Page 4

Schedule A (Form 990 or 990-EZ) 2007

Sche	dule A (Form 990 or 990-EZ) 2007 D	BA CHINESE	CHILDREN AD	OPTION INT'	L	84-	1208720	Page 4
Pa	Support Schedule (C Note: You may use the	complete only if you che e worksheet in the insti	ecked a box on line 10 ructions for converting), 11, or 12) Use cash I from the accrual to th	method of ace	counting of acco	n g. ountina.	
	ndar year (or fiscal year	(a) 2006	(b) 2005	(c) 2004				
15	nning in) Gifts, grants, and contributions	(a) 2006	(b) 2005	(C) 2004	(d) 2003		(e) Tota	<u>-</u>
	received. (Do not include unusual grants. See line 28.)	531,207.	584,249.	420,750.	356,3	317.	1,892,	523.
16	Membership fees received							<u> </u>
17	Gross receipts from admissions,							
	merchandise sold or services performed, or furnishing of							
	facilities in any activity that is							
	related to the organization's charitable, etc., purpose	6 605 233	6 582 308	5,012,580.	3 335 (าวถ	21 535	150
18	Gross income from interest, divid-	0,003,233.	0,302,300.	3,012,300.	3,333,0		21,333,	109.
	ends, amounts received from pay-							
	512(a)(5)), rents, royalties, income from similar sources, and unrelated							
	business taxable income (less section 511 taxes) from businesses							
	acquired by the organization after June 30, 1975	1,632,678.	444,038.	186,247.	143,6	10	2,406,	<i>C</i> 1 1
19	Net income from unrelated business	, , , , , , , , , , , , , , , , , , , 	444,030.	100,247.	143,0	40.	4,400,	011.
	activities not included in line 18							
20	Tax revenues levied for the organization's benefit and either							
	paid to it or expended on its behalf							
21	The value of services or facilities furnished to the organization by a							
	governmental unit without charge.							
	Do not include the value of services or facilities generally furnished to							
	the public without charge							
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets							
23	Total of lines 15 through 22			5,619,577.	3,835,0		25,83 4 ,	
24	Line 23 minus line 17 Enter 1% of line 23	2,163,885.	1,028,287.	606,997.	499,9		4,299,	<u>134.</u>
25 26	Organizations described on lines 10	87,691.	76,106.	56,196.	38,3	26a	N/	<u> </u>
b	-		, ,,		_	20a	II/	Δ
_	unit or publicly supported organization			•				
	Do not file this list with your return.	. Enter the total of all thes	e excess amounts		>	26b	N/	
	Total support for section 509(a)(1) to		• •		>	26c	N/	<u>A</u>
d	Add: Amounts from column (e) for li	' <u>-</u>	19				37 /	•
	Public support (line 26c minus line 2	22	26b		<u> </u>	26d 26e	N/ N/	
f	Public support percentage (line 266	•	line 26c (denominator))			26f	N/	
27	Organizations described on line 12:				disqualified perso			
	records to show the name of, and to	tal amounts received in ea	ach year from, each "disqi	ualified person." Do not fi	le this list with yo	ur retu	rn. Enter the sum	of
	such amounts for each year:		•		•			_
_	•	• (2005)	0 . (2)	,	0. (200	,	A	0.
Ь	For any amount included in line 17 th and amount received for each year, to		•		-			oī,
	described in lines 5 through 11b, as			•			-	and
	the larger amount described in (1) or	•	•	, -				
	(2006) 0	• (2005)	0. (2	•	0. (200)3)		0.
C	Add: Amounts from column (e) for li		1,892,523.			1 1		
		35,159. 20_	d line 075 4-4-4	21		27c	23,427,	
d	Add: Line 27a total Public support (line 27c total minus l		d line 27b total		<u> </u>	27d 27e	23,427,	682
f	Total support for section 509(a)(2) to	•	23. column (e)	► 27f 25,	834,293.	218	<u> </u>	<u> </u>
g	Public support percentage (line 27e		• •		• • • • • • • • • • • • • • • • • • •	27g	90.6	84 <u>4%</u>
<u>h</u>	Investment income percentage (line	-	, ,,	(denominator))		27h		156%
28	Jnusual Grants: For an organization de	escribed in line 10, 11, or	12 that received any unus	sual grants during 2003 t	hrough 2006, pre	pare a li	st for your records	s to

NONE

return. Do not include these grants in line 15.

723131 12-27-07

Schedule A (Form 990 or 990-EZ) 2007 DBA CHINESE CHILDREN ADOPTION INT'L

84-1208720

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)

N/A

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	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.)			
		_		
		_		
		-		
32	Does the organization maintain the following:	-		
а	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.)			10000
		— İ 🔝		
33	Does the organization discriminate by race in any way with respect to:	-		
a	Students' rights or privileges?	33a	İ	
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	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.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,		j	
	1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Schedule A (Form 990 or 990-EZ) 2007

<u>84 –</u>	1	2	0	8	7	2	0	

Schedule A (Form 990 or 990-EZ) 2007 DBA CHINESE CHILDREN ADOPTION I	NT'L 84	<u>-1208720</u>	Page
Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 o	of the instructions.)	N/	A A
. (To be completed ONLY by an eligible organization that filed Form 5768)			
Check ▶ a	ecked "a" and "limited control"	provisions apply.	
Limits on Lobbying Expenditures	(a) Affiliated group	(b) To be completed f	or all

une	ck 🕨 a 🔃 if the organization belon	gs to an affiliated group. Check 🕨 b	ıf you che	cked "a" and "limited contro	ol" provisions apply.
		Lobbying Expenditures tures' means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		· · · · · · · · · · · · · · · · · · ·		N/A	
36	Total lobbying expenditures to influence	public opinion (grassroots lobbying)	36	,	
7	Total lobbying expenditures to influence	a legislative body (direct lobbying)	37		
8	Total lobbying expenditures (add lines 3	6 and 37)	38		
9	Other exempt purpose expenditures		39		
0	Total exempt purpose expenditures (add	lines 38 and 39)	40		
1	Lobbying nontaxable amount. Enter the	amount from the following table -			
	If the amount on line 40 is -	The lobbying nontaxable amount is -			
	Not over \$500,000	20% of the amount on line 40			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
2	Grassroots nontaxable amount (enter 25	% of line 41)	42		
3	Subtract line 42 from line 36. Enter -0- if	line 42 is more than line 36	43		
4	Subtract line 41 from line 38. Enter -0- if	line 41 is more than line 38	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) 2007	(b) 2006	(c) 2005	(d) 2004	(e) 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	Ü				0
49 Grassroots ceiling amount (150% of line 48(e))					0
Grassroots lobbying expenditures					0

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 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:

- Paid staff or management (Include compensation in expenses reported on lines c through h.)
- Media advertisements
- Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- 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.)

If "Yes" to any of the above.	also attach a statemen	t giving a detailed description of the lobbying activities.

Yes	No	Amount		
-				
		0.		

Part V	(Form 990 or 990-E2) 200	/ DBA_CHINESE_CHI garding Transfers To an	LLDREN ADOPT	ION INT'L 84-1 d Relationships With Noncha	.20872 ritable	0	Page
·		zations (See page 14 of the inst		- Helationships With Noticinal	Itabie		
		lirectly or indirectly engage in any of					
		section 501(c)(3) organizations) or i	•	olitical organizations?		<u> </u>	T
	nsters from the reporting org	ganization to a noncharitable exemp	t organization or.		51a(i)	Yes	No
	Other assets				a(ii)	 	X
	er transactions:				4(11)		├ ^
		ets with a noncharitable exempt orga	ınızatıon		b(i)		x
(ii)	Purchases of assets from a	noncharitable exempt organization			b(ii)		Х
(iii)	Rental of facilities, equipme	ent, or other assets			b(iii)		Х
٠.,	Reimbursement arrangeme	ents			b(iv)		X
	Loans or loan guarantees				b(v)		X
		membership or fundraising solicital			b(vi)		X
		mailing lists, other assets, or paid e e is "Yes " complete the following sci		always show the fair market value of the	C		X
		given by the reporting organization					
		nent, show in column (d) the value o				N/A	
(a)	(b)	(c)		(d)			
Line no.	Amount involved	Name of noncharitable ex	empt organization	Description of transfers, transactions, and	d sharing ar	rangen	nents ———
				<u> </u>			
							
	·	· · · · · · · · · · · · · · · · · · ·				_	
							_
-	<u> </u>			-			
			·				
					-		
Cod	le (other than section 501(c)	(3)) or in section 527?	one or more tax-exempt org	anizations described in section 501(c) of the	Yes	X	No
b_lf "Y	es," complete the following s						
	(a) Name of org	ganization	(b) Type of organization	(c) Description of relations	ship		
						_	
		 					
		 					
							
			<u> </u>				
							
							
723152 12-27-07				Schedule A (Fo	rm 990 or 9	90-EZ)	2007

FORM 990	RENTA	L INCOM	Œ			STATEMENT	. 1
KIND AND LOCATION OF PROPERT	Y			1	ACTIVITY NUMBER	GROSS RENTAL IN	
RENTAL PROPERTY				_	1	47,	737.
TOTAL TO FORM 990, PART I, L	INE 6A					47,	737.
FORM 990	RENTA	L EXPEN	ISES			STATEMENT	. 2
DESCRIPTION			IVITY MBER		DUNT	TOTAL	1
ALLOCATED RENTAL EXPENSES	SUBTOTAL	-	1		25,829.	25,	829.
TOTAL TO FORM 990, PART I, L	INE 6B					25,	829.
FORM 990 GAIN (LOSS)	FROM PUB	LICLY I	'RADEI	SECURIT	PIES	STATEMENT	3
DESCRIPTION		OSS PRICE		OST OR ER BASIS	EXPENSE OF SALE		
	-	0.		12,483.	0	. <12,	483.
TO FORM 990, PART I, LINE 8				12,483.	0	. <12,	483.
FORM 990 SPE	CIAL EVE	NTS AND	ACTI	VITIES		STATEMENT	4
	GROSS ECEIPTS	CONTRI INCLU		GROSS REVENUE	DIRE EXPEN		
OTHER FUNDRAISING EVENTS	23,093.			23,09	3.	23,	093.
TO FM 990, PART I, LINE 9	23,093.			23,09	3.	23,	093.
							

CHINESE	CHILDREN	CHARITIES	DBA	CHINESE	C

84	-1	2	n	R	7	2	n
~ -		- 4	v	·	•	~	u

FORM 990 OTH	HER CHANGES IN NET ASSETS OR FUND BALAN	CES STATEMENT 5
DESCRIPTION		AMOUNT
UNREALIZED GAINS		38,918.
TOTAL TO FORM 990,	PART I, LINE 20	38,918.
FORM 990	CASH GRANTS AND ALLOCATIONS TO OTHERS	STATEMENT 6
CLASS OF ACTIVITY/D	OONEE'S NAME AND ADDRESS	AMOUNT
GRANTS AND ASSISTAN	ICE TO OTHERS	541,349.
70711 TUGUNDO OU -		
TOTAL INCLUDED ON F	FORM 990, PART II, LINE 22B	541,349.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

DESCRIPTION OF PROGRAM SERVICE ONE

PLACEMENT OF CHILDREN: 613 ORPHANED INFANTS AND CHILDREN (UP TO FOURTEEN YEARS OF AGE) FROM THE PEOPLE'S REPUBLIC OF CHINA WERE PLACED WITH AMERICAN ADOPTIVE FAMILIES IN 2007. AN ADDITIONAL 800 FAMILIES HAD APPLIED AND WERE IN VARIOUS ADOPTION STAGES (INCLUDING THE FOLLOWING STAGES: APPLICATION, ORIENTATION, HOME STUDY, COMPILAITON OF ADOPTION DOSSIER, TRANSLATION, WAITING TO BE MATCHED WITH A CHILD BY THE CHINESE GOVERNMENT ADOPTION AGENCY, TRAVELING, COURT VALIDATION OF ADOPTION, POST ADOPTION SUPERVISION AND FAMILY SUPPORT). AT 12/31/07, 2600 FAMILIES WERE AT VARIOUS STAGES OF THE ADOPTION PROCESS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		2,900,426.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT

DESCRIPTION OF PROGRAM SERVICE TWO

CHINESE CHILDREN CHARITY FUND: A RESTRICTED FUND DEDICATED TO HUMANITARIAN ASSISTANCE TO ORPHANAGES IN CHINA. THE FUND HAS BEEN USED TO PURCHASE FOOD AND CLOTHING, EDUCATIONAL MATERIALS, TOYS AND MEDICAL INTERVENTION FOR CHINESE ORPHANS. CCC HAD ALSO DEVELOPED THREE ADDITIONAL ORPHAN CARE CENTERS IN ZHEJIANG, HUNAN AND CHONG QING. AS A SPECIAL PROJECT, CCC CARES FOR 800+ CHILDREN WHO ARE UNDER THE AGE OF 13 IN FOSTER FAMILIES IN CHINA. A SPONSHORSHIP PROGRAM FOR THE MANY CHILDREN WHO WILL REMAIN IN ORPHANAGES HAS BEEN SET UP TO ASSURE THAT THE CHILDREN'S NEEDS ARE BEING MET BEFORE THEY ARE ADOPTED, AS WELL AS FOR THE CHILDREN WHO WILL NOT BE ADOPTED. IN 2007, CCC SPONSORED 800 FOSTER CARE CHILDREN.

						 GRANTS	EXPENSES
то	FORM	990,	PART	III,	LINE		663,309.

EXPENSES

FORM 990	STATEMENT OF	PROGRAM	SERVICE ACCOMPLISHMENTS	STATEMENT	9
					_

DESCRIPTION OF PROGRAM SERVICE THREE

FAMILY DEVELOPMENT SERVICES: IN ORDER TO ENSURE THE SUCCESS OF ADOPTION PLACEMENTS, CCC HAS DEVELOPED POST-ADOPTION SERVICES DESIGNED TO ASSIST FAMILY UNDERSTANDING AND BONDING. A PARENT COUNCIL CONTINUES TO DETERMINE NEEDS OF ADOPTIVE FAMILES. A PARENT-TODDLER/PRESCHOOLER/KINDERGARTEN/ELEMENTARY PROGRAM CONTINUES CALLED THE JOYOUS CHINESE CULTURE CENTER WITH THE GOAL OF OVERCOMING SOME OF THE ISSUES FACED IN CROSS-CULTURAL, INTERRACIAL ADOPTIONS. MORE THAN 450 CHILDREN AND THEIR FAMILIES HAVE PARTICIPATED IN THESE ACTIVITIES, WHICH WILL CONTINUE TO BE EXPANDED. REUNIONS OF ADOPTIVE FAMILIES WERE HELD IN THE WESTERN, THE SOUTHEASTERN, THE NORTHEASTERN AND MIDWESTERN UNITED STATES, WITH MORE THAN 2,000 FAMILIES ATTENDING.

TO FORM 990, PART III, LIN	E C				367,7	41.
FORM 990 STATEMENT OF O		ON'S PRIMARY RT III	EXEMPT	PURPOSE	STATEMENT	10
EXPLANATION FACILITATE FOREIGN ORPHAN A ORPHANS; PROVIDE ASSISTANCE						
FORM 990		INVESTMENTS			STATEMENT	11
DESCRIPTION			VALUAT: METH		AMOUNT	1
DESCRIPTION RESTRICTED INVESTMENTS INVESTMENTS - ENDOWMENT ACCRUED INVESTMENT RECEIVAN	BLE			VALUE VALUE	1,715,8 18,724,2	75.

GRANTS

FORM 990 DEPRECIATION OF ASS	ETS NOT HELD FOR	INVESTMENT	STATEMENT 12
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND BUILDINGS AND IMPROVEMENTS FURNITURE AND EQUIPMENT ACCUMULATED DEPRECIATION	1,043,698. 3,669,652. 176,823. 0.	0. 0. 0. 498,677.	1,043,698. 3,669,652. 176,823. <498,677.>
TOTAL TO FORM 990, PART IV, LN 57	4,890,173.	498,677.	4,391,496.
FORM 990	OTHER ASSETS		STATEMENT 13
DESCRIPTION			AMOUNT
DEPOSITS AND OTHER ASSETS ACCRUED INVESTMENT RECEIVABLE			10,758. 14,820.
TOTAL TO FORM 990, PART IV, LINE	58, COLUMN B		25,578.

TOTALS INCLUDED ON FORM 990, PART V-A

TRUSTEES AND KEY EMPLOYEES EMPLOYEE TITLE AND COMPEN- BEN PLAN EXPENSE AVRG HRS/WK SATION CONTRIB ACCOUNT NAME AND ADDRESS PAUL RADY CHAIRMAN 6920 SOUTH HOLLY CIRCLE 0. 0. 1.00 0. CENTENNITAL, CO 80112 CRAIG PONZIO VICE CHAIRMAN 6920 SOUTH HOLLY CIRCLE 1.00 0. 0. 0. CENTENNITAL, CO 80112 TREASURER CHARLES BERLING 0. 0. 6920 SOUTH HOLLY CIRCLE 0. CENTENNITAL, CO 80112 SUSAN HENDEE SECRETARY 6920 SOUTH HOLLY CIRCLE 1.00 0. 0. 0. CENTENNITAL, CO 80112 PETER LANSING DIRECTOR 6920 SOUTH HOLLY CIRCLE 1.00 0. 0. 0. CENTENNITAL, CO 80112 DR. RALPH COVELL DIRECTOR 6920 SOUTH HOLLY CIRCLE 1.00 0. 0. 0. CENTENNITAL, CO 80112 DIRECTOR WILLIAM ROWLAND 0. 0. 6920 SOUTH HOLLY CIRCLE 1.00 CENTENNITAL, CO 80112 JERRY GRAHAM DIRECTOR 6920 SOUTH HOLLY CIRCLE 0. 0. 1.00 0. CENTENNITAL, CO 80112 LILY NIE 80.00 175,680. 10,515. 6920 SOUTH HOLLY CIRCLE 0. CENTENNITAL, CO 80112 JOSHUA ZHONG PRESIDENT 6920 SOUTH HOLLY CIRCLE 70.00 165,360. 10,091. 0. CENTENNITAL, CO 80112

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, STATEMENT 14

341,040. 20,606. 0.

FORM 990 EXPLANATION OF RELATIONSHIP PART V-A, LINE 75B

STATEMENT 15

INDIVIDUAL'S NAME

TITLE OR ROLE

LILY NIE

CEO

INDIVIDUAL'S NAME

TITLE OR ROLE

JOSHUA ZHONG

PRESIDENT

EXPLANATION OF RELATIONSHIP

THEY ARE MARRIED TO EACH OTHER.

PART VIII - RELATIONSHIP OF ACTIVITIES TO FORM 990 ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 16

EXPLANATION OF RELATIONSHIP OF ACTIVITIES LINE

- 93A ADOPTION FEES ENABLE THE PLACEMENT OF ORPHANED CHINESE INFANTS AND CHILDREN.
- 93B CHINESE CULTURE CENTER PROVIDES ADOPTED CHILDREN AND THEIR FAMILES A SENSE OF IDENTITY WITH AND PRIDE IN THE CHILDREN'S ORIGINAL HISTORY, LANGUAGE, AND CULTURE.
- FEES ENABLE THE CONTINUATION OF CULTURAL AWARENESS, ADOPTED CHILDREN 93D AND FAMILIES' MENTAL HEALTH, AND IMPROVES SUCCESS OF THE ADOPTIONS.
- 103A ACTIVITIES FOCUSED ON ADOPTIVE FAMILIES AND SUPPORT OF CULTURAL ACTIVITIES.

Form **8868**

(Rev. April 2007)

Department of the Treasury Internal Revenue 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)

HITCHIA	Aevenue Service Princ a Separate application for each return.						
• If y	ou 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).							
	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form	8868					
Pai	Automatic 3-Month Extension of Time. Only submit original (no copies needed).						
Secti	on 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box						
and o	omplete Part I only	▶ □					
All ot to file	ner corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension Income tax returns	n of time					
noted the a 990-1	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 elected ditional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite of a lostead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronyww.irs.gov/efile and click on e-file for Charities & Nonprofits.	ctronically if (1) you want or consolidated Form					
Туре		Employer identification number					
print	CHINESE CHILDREN CHARITIES						
File by	the Number street and many surfaces (for D.O.)	-1208720					
due da filing ye return	6920 SOUTH HOLLY CIRCLE						
ınstruc	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CENTENNIAL, CO 80112						
Chec	k 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-BL						
一	Form 990-PF Form 1041-A Form 8870						
<u> </u>	Total 33047 Politi 104194 Politi 8670						
• Th	e books are in the care of THE ORGANIZATION						
Te	ephone No ▶ <u>(303) 850-9998</u> FAX No ▶						
	he organization does not have an office or place of business in the United States, check this box	▶ □					
• If t	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the	e whole group, check this					
box]	. If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all members	the extension will cover					
1	I request an automatic 3-month (6-months for a section 501(c) corporation required to file Form 990-T) extension of time AUGUST 15, 2008 , to file the exempt organization return for the organization named above. The						
	is for the organization's return for:						
	► X calendar year <u>2007</u> or						
	tax year beginning, and ending						
2	If this tax year is for less than 12 months, check reason Initial return Final return Cha	ange in accounting period					
За	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
	nonrefundable credits. See instructions. 3a \$						
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated						
	tax payments made. Include any prior year overpayment allowed as a credit. 3b \$						
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,						
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	•-					
	See instructions 3c \$	N/A					
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO f	for payment instructions.					

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.