

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)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2005 calendar year, or tax year beginning _____, **and ending** _____

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
CONGRESSIONAL COALITION ON ADOPTION INSTITUTE
 Number and street (or P O box if mail is not delivered to street address) | Room/suite
6723 WHITTIER AVENUE SUITE 406
 City or town | State or country | ZIP + 4
MCLEAN VA 22101

D Employer identification number
54-2035617

E Telephone number

F Accounting method: Cash Accrual
 Other (specify) _____

G Website: **WWW.CCAINSTITUTE.ORG**

J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **818,009**

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates _____
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number _____

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1 Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	818,009	
b	Indirect public support	1b	0	
c	Government contributions (grants)	1c	0	
d	Total (add lines 1a through 1c) (cash \$ <u>743,679</u> noncash \$ <u>74,330</u>)	1d	818,009	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	0	
3	Membership dues and assessments	3	0	
4	Interest on savings and temporary cash investments	4	0	
5	Dividends and interest from securities	5	0	
6a	Gross rents	6a		
b	Less: rental expenses	6b		
6c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	0	
7	Other investment income (describe _____)	7	0	
8a	Gross amount from sales of assets other than inventory	(A) Securities	0	(B) Other
8a		0	0	0
8b	Less: cost or other basis and sales expenses	0	0	0
8c	Gain or (loss) (attach schedule)	0	0	0
8d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	0	
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	0	
b	Less: direct expenses other than fundraising expenses	9b	0	
9c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	0	
10a	Gross sales of inventory, less returns and allowances	10a	0	
b	Less: cost of goods sold	10b	0	
10c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	0	
11	Other revenue (from Part VII, line 103)	11	0	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	818,009	
Expenses	13 Program services (from line 44, column (B))	13	698,132	
	14 Management and general (from line 44, column (C))	14	314,584	
	15 Fundraising (from line 44, column (D))	15	22,074	
	16 Payments to affiliates (attach schedule)	16	0	
17	Total expenses (add lines 16 and 44, column (A))	17	1,034,790	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	-216,781	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	480,668	
	20 Other changes in net assets or fund balances (attach explanation)	20	-84,000	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	179,887	

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Part I Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ 0 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	22	0		
23	Specific assistance to individuals (attach schedule)	23	359,485	359,485	
24	Benefits paid to or for members (attach schedule)	24	0		
25	Compensation of officers, directors, etc.	25	87,202	40,113	41,857
26	Other salaries and wages	26	213,384	98,158	102,424
27	Pension plan contributions	27	0		
28	Other employee benefits	28	0		
29	Payroll taxes	29	0		
30	Professional fundraising fees	30	0		
31	Accounting fees	31	0		
32	Legal fees	32	0		
33	Supplies	33	7,784	878	6,875
34	Telephone	34	4,444	3,992	452
35	Postage and shipping	35	3,643	1,832	1,733
36	Occupancy	36	30,000	20,833	9,167
37	Equipment rental and maintenance	37	2,400		2,400
38	Printing and publications	38	4,018	1,943	2,075
39	Travel	39	98,855	94,343	3,331
40	Conferences, conventions, and meetings	40	0		
41	Interest	41	0		
42	Depreciation, depletion, etc. (attach schedule)	42	2,673		2,673
43	Other expenses not covered above (itemize):				
a	See attached statement	43a	220,902	76,555	141,597
b		43b	0	0	0
c		43c	0	0	0
d		43d	0	0	0
e		43e	0	0	0
f		43f	0	0	0
g		43g	0	0	0
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	1,034,790	698,132	314,584

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ 0; (ii) the amount allocated to Program services \$; (iii) the amount allocated to Management and general \$; and (iv) the amount allocated to Fundraising \$

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.

What is the organization's primary exempt purpose? ▶ See attached statement. All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others)
a Served as an informational and educational resource on adoption issues to policy makers at the local, state and national levels, particularly the Congressional Caucus on Adoption. Carried out training/briefing programs for Congress members and staffers on domestic and international adoption issues. Developed relationships and increased communication with foreign adoption officials involved in adoption policy. (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	698,132
b (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
c (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
d (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	698,132

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)		
		Beginning of year		End of year		
Assets	45 Cash—non-interest-bearing		397,248	45	178,440	
	46 Savings and temporary cash investments			46		
	47 a Accounts receivable	47a	14,977			
	b Less: allowance for doubtful accounts	47b	0	53,447	47c	14,977
	48 a Pledges receivable	48a	0			
	b Less: allowance for doubtful accounts	48b	0	0	48c	0
	49 Grants receivable				49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			0	50	0
	51 a Other notes and loans receivable (attach schedule)	51a	0			
	b Less: allowance for doubtful accounts	51b	0	0	51c	0
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges			34,155	53	2,126
	54 Investments—securities (attach schedule)			0	54	0
	55 a Investments—land, buildings, and equipment: basis	55a	0			
b Less: accumulated depreciation (attach schedule)	55b	0	0	55c	0	
56 Investments—other (attach schedule)			0	56	0	
57 a Land, buildings, and equipment: basis	57a	20,315				
b Less: accumulated depreciation (attach schedule)	57b	15,494	6,977	57c	4,821	
58 Other assets (describe)			0	58	0	
59 Total assets (must equal line 74). Add lines 45 through 58			491,827	59	200,364	
Liabilities	60 Accounts payable and accrued expenses		11,159	60	20,477	
	61 Grants payable			61		
	62 Deferred revenue			62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			0	63	0
	64 a Tax-exempt bond liabilities (attach schedule)			0	64a	0
	b Mortgages and other notes payable (attach schedule)			0	64b	0
	65 Other liabilities (describe)			0	65	0
66 Total liabilities. Add lines 60 through 65			11,159	66	20,477	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.					
	67 Unrestricted		480,668	67	179,887	
	68 Temporarily restricted			68		
	69 Permanently restricted			69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds			70		
	71 Paid-in or capital surplus, or land, building, and equipment fund			71		
	72 Retained earnings, endowment, accumulated income, or other funds			72		
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)			480,668	73	179,887
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73.			491,827	74	200,364

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

	Yes	No
75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings		
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	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 this organization through common supervision or common control?	75c	X
Note. Related organizations include section 509(a)(3) supporting organizations. If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.		
d Does the organization have a written conflict of interest policy?	75d	X

Part V-B 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.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name <u>NONE</u> Str City ST ZIP		0	0	0
Name _____ Str City ST ZIP				
Name _____ Str City ST ZIP				
Name _____ Str City ST ZIP				
Name _____ Str City ST ZIP				
Name _____ Str City ST ZIP				
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Part VI Other Information (See the instructions.)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
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	X
b If "Yes," enter the name of the organization ▶ _____ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a Enter direct and indirect political expenditures. (See line 81 instructions.)	81a	
b Did the organization file Form 1120-POL for this year?	81b	X

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b	N/A	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b	N/A	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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.	X	
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12.	86a	0
b	Gross receipts, included on line 12, for public use of club facilities	86b	0
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	0
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	818,009
88	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	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ N/A; section 4912 ▶ N/A; section 4955 ▶ N/A		
b	501(c)(3) and 501(c)(4) orgs. 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		N/A
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		N/A
90 a	List the states with which a copy of this return is filed		
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions)	90b	
91 a	The books are in care of ▶ Name DEANNA CARLSON STACY Telephone no. ▶ 703-288-9700 Located at ▶ 6723 Whittier Avenue #406 City MCLEAN ST VA ZIP + 4 ▶ 22101		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 and Financial Accounts.	91b	X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶	91c	X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041— Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 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 other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		0	0
105 Total (add line 104, columns (B), (D), and (E))					0

Note: Line 105 plus line 1d, 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).
N/A	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%		0	0
	%		0	0
	%		0	0
	%		0	0

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, from a personal benefit contract?
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, for a personal benefit contract?
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer: Deanna Carlson Stacy
 Type or print name and title: DEANNA CARLSON STACY

Paid Preparer's Use Only

Preparer's signature: WALTER FERGUSON
 Firm's name (or yours if self-employed), address, and ZIP + 4: FERGUSON'S ACCOUNTING SERVICES, 4200 MAYPORT LANE, FAIRFAX, VA

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

2005

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

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

Name of the organization

CONGRESSIONAL COALITION ON ADOPTION INSTITUTE

Employer identification number

54-2035617

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE		0	0	0
		0	0	0
		0	0	0
		0	0	0
		0	0	0
		0	0	0
		0	0	0
Total number of other employees paid over \$50,000 ▶	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
		0
		0
		0
		0
		0
		0
Total number of others receiving over \$50,000 for professional services ▶	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
		0
		0
		0
		0
		0
Total number of other contractors receiving over \$50,000 for other services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	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 lobbying activities ► \$ <u>0</u> (Must equal amounts on line 38, Part VI-A, or 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.		X
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	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	X
e Transfer of any part of its income or assets?	2e	X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)	3a	
b Do you have a section 403(b) annuity plan for your employees?	3b	X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c	X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____ City _____ ST _____ Country _____
- 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.)
- 11 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.)
- 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ► Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28)	1,200,937	1,234,558	296,772	333,820	3,066,087
16 Membership fees received					0
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					0
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					0
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
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					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
23 Total of lines 15 through 22	1,200,937	1,234,558	296,772	333,820	3,066,087
24 Line 23 minus line 17	1,200,937	1,234,558	296,772	333,820	3,066,087
25 Enter 1% of line 23	12,009	12,346	2,968	3,338	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26a 0
b 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 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					26b
c Total support for section 509(a)(1) test. Enter line 24, column (e) ▶					26c 0
d Add: Amounts from column (e) for lines: 18 <u>0</u> 19 <u>0</u> ▶					26d 0
22 <u>0</u> 26b <u>0</u> ▶					26e 0
e Public support (line 26c minus line 26d total) ▶					26f 0.00%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					
27 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: (2004) _____ (2003) _____ (2002) _____ (2001) _____					
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: (2004) _____ (2003) _____ (2002) _____ (2001) _____					
c Add: Amounts from column (e) for lines: 15 <u>3,066,087</u> 16 <u>0</u> ▶					27c 3,066,087
17 <u>0</u> 20 <u>0</u> 21 <u>0</u> ▶					27d 0
d Add: Line 27a total <u>0</u> and line 27b total <u>0</u> ▶					27e 3,066,087
e Public support (line 27c total minus line 27d total) ▶					27f 3,066,087
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶					27g 100.00%
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27h 0.00%
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 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
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)	0	0
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39)	0	0
41	Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 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	0	0
42	Grassroots nontaxable amount (enter 25% of line 41)	0	0
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	0	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	0	0

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(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				0
49	Grassroots ceiling amount (150% of line 48(e))				0
50	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 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

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

Yes	No	Amount
		0

Line 1 (990) - Public Support and Contributions

	Cash		Non Cash
Line 1a - Direct public support			
1 Contributions	743,679	1	74,330
2 Membership dues and assessments (contributions from the public)	_____	2	_____
3 Commercial co-venture	_____	3	_____
4 Special events contributions (Line 9 - Special Events)	0	4	_____
5 _____	_____	5	_____
6 _____	_____	6	_____
7 _____	_____	7	_____
8 _____	_____	8	_____
9 _____	_____	9	_____
10 Total	743,679	10	74,330
Line 1b - Indirect public support	_____		_____
Line 1c - Government contributions (grants)	_____		_____

Line 20 (990) - Other changes in net assets or fund balances

1 PRIOR PERIOD ADJUSTMENT		1	-84,000
2		2	_____
3		3	_____
4		4	_____
5		5	_____
6		6	_____
7		7	_____
8		8	_____
9		9	_____
10 Total		10	-84,000

Line 43 (990) - Other Deductions

220,902

76,555

141,597

2,750

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
1 ADVERTISING	296		296	
2 BANK SERVICE CHARGES	2,202		2,202	
3 BOARD OF DIRECTORS EXPENSE	1,460		1,460	
4 COMPUTER SUPPORT	3,550		3,550	
5 COURIER	609	569	40	
6 DUES AND SUSCRIPTIONS	3,469	3,429	40	
7 EVENTS	3,100	3,100		
8 GIFTS	3,963	3,727	236	
9 INSURANCE	30,163		30,163	
10 INTERNET	2,128		2,128	
11 LATE FEES	194		194	
12 LICENSES AND PERMITS	902		902	
13 MISCELLANEOUS	1,551	300	1,251	
14 PAYROLL SERVICE	1,518		1,518	
15 PROFESSIONAL FEES	93,629		90,879	2,750
16 PROFIT (LOSS) ON SALE OF ASSET	-200		-200	
17 CONGRESSIONAL RESOURCE PROGRAM	6,104	6,079	25	
18 FOSTER YOUTH INTERNS	44,449	44,449		
19 INTERNATIONAL RELATIONS	10,499	10,499		
20 INTERNET/WEBSITE	5,206	438	4,768	
21 VASAPOLI-IN-KIND	3,965	3,965		
22 RECRUITING	384		384	
23 REPAIRS	496		496	
24 TRAINING	1,265		1,265	
25	0			
26	0			
27	0			
28	0			
29	0			
30	0			

Line 47 (990) - Accounts receivable

		Accounts receivable		Allowance for doubtful accounts	
		Beginning	End	Beginning	End
1	ACCOUNTS RECEIVABLE	53,447	14,977		
2	.....			
3	.....			
4	.....			
5	.....			
6	.....			
7	.....			
8	.....			
9	.....			
10	.....			
11	Total accounts receivable	53,447	14,977	0	0

Line 57 (990) - Land, buildings, and equipment

		Land (net of any amortization)	
		Beginning	End
1	.....	
2	.....	
3	.....	
4	.....	
5	.....	
6	Total land (net of any amortization)	0	0

		Buildings and equipment		Accumulated depreciation	
		Beginning	End	Beginning	End
7	Furniture and Fixtures	19,798	20,315	12,821	15,494
8	Machinery and Equipment				
9	.....			
10	.....			
11	.....			
12	.....			
13	.....			
14	.....			
15	.....			
16	.....			
17	Total buildings and equipment	19,798	20,315	12,821	15,494
18	Buildings and equipment (less accumulated depreciation)			6,977	4,821
19	Total land, buildings and equipment			6,977	4,821

Category or Item	Cost/Other Basis	Accumulated Depreciation	Book Value
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11	0	0	0

Attached statement
Form 990, Part III
Organization's Primary Exempt Purpose

To represent interest of orphans and other children through the promotion of adoption and the study of adoption policy on a non-partisan, non-political basis.

**Attached Statement, Tax Year 2005
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees**

Name and address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Kerry Marks Hasenbalg 4663 Welton Terrace Sterling, VA 20165	Executive Director 1/1 - 1/26/05 40	\$ 8,250	\$ 0	\$ 0
Windy Cosby 6723 Whittier Avenue McLean, VA 22101	Interim Director 1/26 - 6/30/05 40	\$ 24,080	\$ 0	\$ 0
Deanna Carlson Stacy 6723 Whittier Avenue McLean, VA 22101	Executive Director 7/1/05 & after 40	\$ 54,873	\$ 0	\$ 0
Congressman James Oberstar 2365 Rayburn House Office Bldg. Washington, DC 20515	Director 2.5	\$ 0	\$ 0	\$ 0
Senator Larry Craig 520 Senate Hart Office Bldg. 2nd & C Streets, NE Washington, DC 20510	Director 2.5	\$ 0	\$ 0	\$ 0
Senator Mary Landrieu 724 Senate Hart Office Bldg. 2nd & C Streets, NE Washington, D.C. 20510	Director 2.5	\$ 0	\$ 0	\$ 0
The Honorable Dave Camp 137 Cannon Building Washington, DC 20515	President/Director 2.5	\$ 0	\$ 0	\$ 0
Cheryl Clarke 8250 Jones Branch Dr. Mailstop A-40 McLean, VA 22101	Director 2.5	\$ 0	\$ 0	\$ 0
Valdur Koha 85 Hancock Street Lexington, MA 02420	Treasurer/Director 2.5	\$ 0	\$ 0	\$ 0
Terry Scully 3701 Wayzata Blvd., TFS-4AO Minneapolis, Minnesota	Secretary/Director 2.5	\$ 0	\$ 0	\$ 0
Paul Singer 18506 Bear Path Trail Eden Prairie, Minnesota 55347	Director 2.5	\$ 0	\$ 0	\$ 0
Rita Soronen 4150 Tuller Road, 204 Dublin, Ohio 43017	Director 2.5	\$ 0	\$ 0	\$ 0
Maxine B. Baker Freddie Mac Foundation 8200 Jones Branch Drive McLean, VA 22102-3110	Director 2.5	\$ 0	\$ 0	\$ 0
Barbara Walzer 100 West Market Street Box 425 Danville, PA 17821	Director 2.5	\$ 0	\$ 0	\$ 0

Detail Report

CONGRESSIONAL COALITION ON ADOPTION INSTITUTE

54-2035617 990 2005

						19,798	0	7,998	11,800			12,821	2,673	15,494		
Item No	Description of Property	Date Placed in Service	Asset Code	Activity	Bus Use %	Cost or Other Basis	Less Sec 179 Deduction	Special Allowance	Recovery Basis	AMT Type	Recovery Penod (years)	Method	Con-vention Code	Pnor Accum Deprec , 179, Bonus	2005 Current Deprec	2005 Accum Deprec
1	FURNITURE	1/1/2002	F-11	990	100.00%	1,607	0	0	1,607		5	200DB	HY	1,143	185	1,328
2	COMPUTER/PERIPHIALS	1/1/2002	F-5	990	100.00%	2,198	0	0	2,198		3	SL/GDS	FM	2,135	0	2,135
3	FURNITURE	1/7/2004	F-11	990	100.00%	1,157		579	578		7	200DB	HY	662	142	804
4	FURNITURE	2/23/2004	F-11	990	100.00%	749		375	374		7	200DB	HY	428	92	520
5	COMPUTER/PERIPHIALS	5/6/2004	F-5	990	100.00%	4,087		2,044	2,043		5	200DB	HY	2,453	654	3,107
6	COMPUTER/PERIPHIALS	7/15/2004	F-5	990	100.00%	2,000		1,000	1,000		5	200DB	HY	1,200	320	1,520
7	COMPUTER/PERIPHIALS	9/15/2004	F-5	990	100.00%	2,000		1,000	1,000		5	200DB	HY	1,200	320	1,520
8	COMPUTER/PERIPHIALS	9/15/2004	F-5	990	100.00%	6,000		3,000	3,000		5	200DB	HY	3,600	960	4,560