Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements. Open to Public Inspection

A	For the 20	004 calendar year, or tax year beginning JUL 1, 2004 and ending JUN 30,	200	5	
В	Check if applicable	Please use IRS	D Employe	r identification number	
Г	Address	I I	52-2252234		
	Name change	type Number and street (or P.O. hox if mail is not delivered to street address) Room/suite	Telephone number		
]initial return	Specific 9300 COLUMBIA BOULEVARD		-588-300	
	Final	lostnic-	F Accounting r		
	Amende	SILVER SPRING, MD 20910	Other (specif	y) >	
	Applicati pending	THE PROPERTY OF A PROPERTY OF	cable to se	ection 527 organizations	
		must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group re	turn for affi	liates? Yes X No	
		►HTTP://WWW.HOMESTUDIES.ORG/ H(b) If "Yes," enter nur		liates	
J	Organizat	tion type (check only one) X 501(c) (3) (insert no) 4947(a)(1) or 527 H(c) Are all affiliates in (If "No," attach a light of the control of		N/A LYes LNo	
	Check her	e ► I if the organization's gross receipts are normally not more than \$25,000. The H(d) is this a separate	return filed	by an or-	
	-	on need not file a return with the IRS; but if the organization received a Form 990 Package ganization covere			
	n me mai	I, it should file a return without financial data. Some states require a complete return.			
	O-000 -00			zation is not required to attach	
		epts: Add lines 6b, 8b, 9b, and 10b to line 12 \(\) \(\) \(\) \(\) \(\) \(\) Sch. B (Form 990 Revenue, Expenses, and Changes in Net Assets or Fund Balances	, 330°LZ, C	11 330 T 1).	
	T	Contributions, gifts, grants, and similar amounts received:		 	
	1	Direct public support			
	l å	Indirect public support	\neg		
	"	Government contributions (grants)			
	1	Total (add lines 1a through 1c) (cash \$ noncash \$) 1d	0.	
	1	Program service revenue including government fees and contracts (from Part VII, line 93)	2	162,587.	
	I	Membership dues and assessments	3		
	1	Interest on savings and temporary cash investments	4	266.	
	5	Dividends and interest from securities	5		
	6 a	Gross rents . 6a			
	Ь	Less: rental expenses 6b			
	C	Net rental income or (loss) (subtract line 6b from tine 6a)	. <u>6c</u>		
Φ	1	Other investment income (desemble)) 7		
Revenue	8 a	Gross amount from sales of assote other (A) Securities (B) Other			
ě		than inventory 8a			
_	b	than inventory Less; cost or other basis and sales expenses 8b			
7	C	Gain or (loss) (attack schidule) 8c Net gain or (loss) (combine line 8c persons (A) and (B))	┥		
√3 ⊃	ď	Net gain or (loss) (compine line the sell-trans(A) and (B))	. <u>8d</u>		
_	9	Special events and activities attach schedule). If any amount is from gaming, check here			
9	a	Gross revenue (not including \$ of contributions			
βΩ		reported on line 1a) Less: direct expenses other than fundraising expenses 9b 9b			
_	1	Net income or (loss) from special events (subtract line 9b from line 9a)	90		
ב	1	Gross sales of inventory, less returns and allowances	30		
Ž	L	Less: cost of goods sold			
Ē		Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	100	;	
K.		Other revenue (from Part VII, line 103)	11		
CANNED	1	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	. 12	162,853.	
,,		Program services (from line 44, column (B))	13	180,223.	
ses	14	Management and general (from line 44, column (C))	14	533.	
Expenses		Fundraising (from line 44, column (D))	15		
Ř	16	Payments to affiliates (attach schedule)	16		
		Total expenses (add lines 16 and 44, column (A))	17	180,756.	
Ø	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-17,903.	
Net ssets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	. 19	-91,094.	
-A		Other changes in net assets or fund balances (attach explanation)	20	100 007	
4230 01-1		Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	-108,997.	
01-1	3-05 L	.HA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2004)	

Part II Statement of All of and	rganızatıcı (4) organı	ns must complete column zations and section 4947(a	(A). Columns (B), (C), and a)(1) nonexempt charitable	l (D) are required for secti e trusts but optional for otl	on 501(c)(3)
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)			00.71000	and gondar	
(cash \$noncash \$	22				
23 Specific assistance to individuals (attach schedule) 23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc.	25	3,000.	3,000.	0.	0.
26 Other salaries and wages	26	67,970.	67,970.		
27 Pension plan contributions	27	-			
28 Other employee benefits	28				
29 Payroll taxes	29	6,505.	6,505.		
30 Professional fundraising fees	30			_	
31 Accounting fees	31			_	
32 Legal fees	32				
33 Supplies	33	5,383.	5,383.		
34 Telephone	34	2,021.	2,021.		
35 Postage and shipping	35	5 500	5 500		
36 Occupancy	36	6,600.	6,600.		
37 Equipment rental and maintenance	37				
38 Printing and publications	38			· <u> </u>	, .
39 Travel	39			·	
40 Conferences, conventions, and meetings	40				
41 Interest	41	1 010	655		
42 Depreciation, depletion, etc. (attach schedule)	42	1,210.	677.	533.	
43 Other expenses not covered above (itemize):					
a	43a				
b	43b				
c _.	43c		-		
d	43d	00 067	00 067		
e SEE STATEMENT 1 Total functional expenses (add lines 22 through 43), diganizations completing columns (8)-(0), carry these totals to lines 13-1	43e	88,067. 180,756.	88,067. 180,223.	533.	0.
		100,730.	100,223.		
Joint Costs. Check ▶ ☐ If you are following SOP ! Are any joint costs from a combined educational camp.		indraining collectation rand	orted in (B) Drogram consis		Yes X No
If "Yes," enter (i) the aggregate amount of these joint of	-	= -	• •	*	
(iii) the amount allocated to Management and general			 the amount allocated to 		· · · · · · · · · · · · · · · · · · ·
Part III Statement of Program Serv			y the amount anocated to	r unuraising φ	
What is the organization's primary exempt purpose?			2		
What is the organization's primary exempt purpose:	<u> </u>	SIATEMENT	4		Program Service
All organizations must describe their exempt purpose achieveme					Expenses (Required for 501(c)(3) and
achievements that are not measurable (Section 501(c)(3) and (4) allocations to others)	organization:	s and 4947(a)(1) nonexempt cha	antable trusts must also enter t	he amount of grants and	(4) orgs, and 4947(a)(1) trusts, but optional for others)
a PROVIDES ADOPTION HOME	STU	Y SERVICES	TN SUPPORT ()F	,
INTERNATIONAL NOT-FOR-				<u> </u>	
21122141112011122 1101 2011			2.02.102		
 		(Gr	ants and allocations \$)	180,223.
b		\ <u>-</u>			
		(Gra	ants and allocations \$)	
C					
		(Gra	ants and allocations \$)	
d					
		(Gra	ants and allocations \$)	
e Other program services (attach schedule)		(Gra	ants and allocations \$.1.	
f Total of Program Service Expenses (should equa	l line 44, c	olumn (B), Program servic	ces)	. •	180,223.
423011 01-13-05					Form 990 (2004)

Part IV Balance Sheets

Note		re required, attached schedules and amounts wit ild be for end-of-year amounts only.	(A) Beginning of year		(B) End of year	
	45 46	Cash - non-interest-bearing Savings and temporary cash investments		11,486. 34,947.		5,362. 52,786.
		Accounts receivable Less: allowance for doubtful accounts	47a 47b		47c	
	48 a	Pledges receivable Less: allowance for doubtful accounts	48a 48b		48c	
	49 50	Grants receivable Receivables from officers, directors, trustees, and key employees			49 50	
Assets	51 a	Other notes and loans receivable Less: allowance for doubtful accounts	51a 51b		51c	
	52 53 54	Inventories for sale or use	Cost FMV		52 53 54	
		Investments - land, buildings, and equipment basis	55a		-04	
	ь 56	Less: accumulated depreciation	55b		55c 56	
		Land, buildings, and equipment basis Less: accumulated depreciation STMT 3 Other assets (describe	57a 2,661. 57b 2,661.	678.	57c 58	
	59	Total assets (add lines 45 through 58) (must equal lin	ne 74)	47,111.	59	58,148.
	60 61 62	Accounts payable and accrued expenses Grants payable Deferred revenue			60 61 62	16,760.
Liabilities		Loans from officers, directors, trustees, and key emple Tax-exempt bond liabilities Mortgages and other notes payable	oyees		63 64a 64b	
L	65	Other liabilities (describe DUE TO AFFI	LIATE	138,205.	65	149,803.
	66 Organ	Total liabilities (add lines 60 through 65) nizations that follow SFAS 117, check here ► X 69 and lines 73 and 74.	and complete lines 67 through	138,205.	66	166,563.
3alances	67 68 69	Unrestricted Temporarily restricted Permanently restricted		-91,094.	67 68 69	-108,415.
Net Assets or Fund Balances	Organ	nizations that do not follow SFAS 117, check here 70 through 74.	and complete lines			
Assets (70 71 72	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equip Retained earnings, endowment, accumulated income,	***		70 71 72	
Net /	73	Total net assets or fund balances (add lines 67 throu column (A) must equal line 19; column (B) must equa	gh 69 or lines 70 through 72; I line 21)	-91,094. 47 111	73	-108,415.
	74	Total liabilities and net assets / fund balances (add l		3/,1110	74	58,148.

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.

Form 990 (2004) WORLD CHILD, INC.	
Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
a Total revenue, gains, and other support	a Total expenses and losses per
per audited financial statements	audited financial statements b Amounts included on line a but not on
b Amounts included on line a but not on line 12, Form 990:	line 17, Form 990: (1) Donated services
(1) Net unrealized gains	and use of facilities \$
on investments \$	(2) Prior year adjustments
(2) Donated services	reported on line 20,
and use of facilities \$	Form 990 \$
(3) Recoveries of prior	(3) Losses reported on line 20, Form 990 \$
year grants \$(4) Other (specify):	(4) Other (specify):
\$	<u> </u>
Add amounts on lines (1) through (4)	Add amounts on lines (1) through (4)
c Line a minus line b	c Line a minus line b
d Amounts included on line 12, Form 990 but not on line a:	d Amounts included on line 17, Form 990 but not on line a:
(1) Investment expenses	(1) Investment expenses
not included on	not included on
line 6b, Form 990\$	line 6b, Form 990 \$
(2) Other (specify):	(2) Other (specify):
\$	<u> </u>
Add amounts on lines (1) and (2)	Add amounts on lines (1) and (2)
e Total revenue per line 12, Form 990	e Total expenses per line 17, Form 990
(line c plus line d)	(line c plus line d)
Part V List of Officers, Directors, Trustees, and Key	
(A) Name and address	(B) Title and average hours per week devoted to position (If not paid, enter plans & deferred compensation other allowance
MARCIA GRETZ	DIRECTOR
WHEATON, MD	PART 0. 0 0
BARBARA LAW	DIRECTOR
ELLICOTT CITY, MD	PART 0. 0. 0
JACKIE GUENTHER	SECRETARY
ELLICOTT CITY, MD	PART 0. 0. 0
SHERRELL J. GOOLSBY	EXECUTIVE DIRECTOR
SILVER SPRING, MD	4 3,000. 0. 0
STEVE GORDON	PRESIDENT
GAITHERSBURG, MD	PART 0. 0. 0
	.
	·
	.
75 Did any officer, director, trustee, or key employee receive aggregate compensation	l ation of more than \$100,000 from your organization and all related
organizations, of which more than \$10,000 was provided by the related organizations	
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Form	990 (2004) WORLD CHILD, INC. 52-2252	234		Page 5
Pa	rt VI Other Information		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		Х
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	_77		X
	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?	78a_		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b_		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79_		X
	If "Yes," attach a statement			
80 a	, , , , , , , , , , , , , , , , , , , ,			
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	_X	<u> </u>
b	If "Yes," enter the name of the organization			
	and check whether it is exempt or nonexempt.			
	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.			
	Did the organization file Form 1120-POL for this year?	81b		X
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			
00.	expense in Part II. (See instructions in Part III.) But the expense to a complete the public processor assumption and a complete to the public processor and a complete to the			
	Did the organization comply with the public inspection requirements for returns and exemption applications? Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83a		<u>X</u>
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? Did the organization solicit any contributions or gifts that were not tax deductible?	83b		X
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not	84a		<u> </u>
	tax deductible?	0.45		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	84b 85a	\dashv	
Ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	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	630		
	owed for the prior year.			
c	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A	ļ	i	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A	l		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	İ	
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? N/A	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A	i		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A	i	į	
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.) 87b N/A			
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		<u>X</u>
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911 ► 0 . ; section 4912 ► 0 . ; section 4955 ► 0 .	- 1	ļ	
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit		- 1	
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	· · ·	89b		<u>X</u>
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			^
	sections 4912, 4955, and 4958			0.
	Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed MD			0.
91		2 - 2 (100	<u> </u>
3 I	The books are in care of ► THE ORGANIZATION Telephone no. ► 301-588	<u> </u>	, U U	
	Located at ► ADDRESS ON PAGE 1			
	ZIP+4 P			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		▶ □	٦
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A	\	_
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			(See page 33 of the instru			
Note: En	nter gross amounts unless otherwise		ted business income		ed by section 512, 513, or 514	(E)
ındıcate	d	(A) Business	(B)	(C) Exclu-	(D)	Related or exempt
93 Prog	gram service revenue;	code	Amount	sion .	Amount	function income
a HC	OME STUDY FEE INCOM	Œ				107,960.
	OST-PLACEMENT FEE I					50,098.
_	PPLICATION FEE INCO					2,300.
	THER EXMPT FNCTN IN			+		2,229.
·,	INEK EMILI PHEIN IN	ICOM		1 1		2,223.
e	vacca (A.f. a dispared in province and a		<u></u>	+-+		
	icare/Medicaid payments			- 		
-	and contracts from government agencies	•		+ +	==	
	nbership dues and assessments	-		+		*
	est on savings and temporary cash invest	ments		14	266.	. = -
96 Divid	dends and interest from securities			1 1		<u>-</u> .
97 Net r	rental income or (loss) from real estate:					
a debt	-financed property					_
b not o	debt-financed property					
98 Net r	rental income or (loss) from personal prop	perty		<u> </u>		_
99 Othe	r investment income					
100 Gain	or (loss) from sales of assets					
	r than inventory					
	ncome or (loss) from special events			1		
	s profit or (loss) from sales of inventory			1 1		
	r revenue:		-	+ +		
	i levellue.					
_				+ +		
				+		
c				+		<u>-</u>
d				+		
e						
104 Subt	otal (add columns (B), (D), and (E))		0	•	266.	162,587.
	I (add line 104, columns (B), (D), and (E))	•			▶	<u> 162,853.</u>
Note: Lin	e 105 plus line 1d, Part I, should equa	al the amount on line 1	2. Part I.			
						
Part V	III Relationship of Activitie	s to the Accompl	ishment of Exem	pt Puŋ	oses (See page 34 of the	instructions.)
Line No.	Relationship of Activitie Explain how each activity for which inc		ishment of Exem			
•		ome is reported in colum	ishment of Exem n (E) of Part VII contribute			
Line No.	Explain how each activity for which inc exempt purposes (other than by provide	come is reported in colum ding funds for such purpo	ishment of Exem n (E) of Part VII contribute ises).			
Line No. ▼ 93A	Explain how each activity for which inc exempt purposes (other than by provide FEES FOR ADOPTION	ome is reported in colum ding funds for such purpo HOME STUDIE	ishment of Exem n (E) of Part VII contribute ises). S			
Line No.	Explain how each activity for which inc exempt purposes (other than by provide	ome is reported in colum ding funds for such purpo HOME STUDIE	ishment of Exem n (E) of Part VII contribute ises). S			
Line No. ▼ 93A	Explain how each activity for which inc exempt purposes (other than by provide FEES FOR ADOPTION	ome is reported in colum ding funds for such purpo HOME STUDIE	ishment of Exem n (E) of Part VII contribute ises). S			
Line No. ▼ 93A 93B	Explain how each activity for which inc exempt purposes (other than by providing FEES FOR ADOPTION FEES RELATED TO AD	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME	ishment of Exem n (E) of Part VII contribute ses). S STUDIES	ed importa	intly to the accomplishment	of the organization's
Line No. ▼ 93A 93B Part IX	Explain how each activity for which inc exempt purposes (other than by providing FEES FOR ADOPTION FEES RELATED TO AD Information Regarding 7	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES Ites and Disregare	ed importa	tities (See page 34 of the	of the organization's
Line No. ▼ 93A 93B Part IX	Explain how each activity for which inc exempt purposes (other than by provide FEES FOR ADOPTION FEES RELATED TO AD (Information Regarding To address, and EIN of corporation, Per	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME [axable Subsidiar (B) reentage of	ishment of Exem n (E) of Part VII contribute ses). S STUDIES	ed importa	intly to the accomplishment	of the organization's instructions.) (E) End-of-year
Line No. ▼ 93A 93B Part IX	Explain how each activity for which inc exempt purposes (other than by provide FEES FOR ADOPTION FEES RELATED TO AD (Information Regarding To address, and EIN of corporation, Per	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME Taxable Subsidiar (B) reentage of rship interest	ishment of Exem In (E) of Part VII contribute (Ses). S STUDIES ies and Disregard (C)	ed importa	tities (See page 34 of the	of the organization's
Line No. ▼ 93A 93B Part IX	Explain how each activity for which inc exempt purposes (other than by providing the purposes for the purpose	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME [Axable Subsidiar (B) reentage of rship interest	ishment of Exem In (E) of Part VII contribute (Ses). S STUDIES ies and Disregard (C)	ed importa	tities (See page 34 of the	of the organization's instructions.) (E) End-of-year
Line No. ▼ 93A 93B Part IX	Explain how each activity for which inc exempt purposes (other than by provide FEES FOR ADOPTION FEES RELATED TO AD (Information Regarding To address, and EIN of corporation, Per	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME Taxable Subsidiar (B) centage of rship interest %	ishment of Exem In (E) of Part VII contribute (Ses). S STUDIES ies and Disregard (C)	ed importa	tities (See page 34 of the	of the organization's instructions.) (E) End-of-year
Line No. ▼ 93A 93B Part IX	Explain how each activity for which inc exempt purposes (other than by providing the purposes for the purpose	ome is reported in colum ding funds for such purported in STUDIE COPTION HOME Taxable Subsidiar (B) recentage of riship interest % % %	ishment of Exem In (E) of Part VII contribute (Ses). S STUDIES ies and Disregard (C)	ed importa	tities (See page 34 of the	of the organization's instructions.) (E) End-of-year
Line No. ▼ 93A 93B Part IX Name, a part	Explain how each activity for which inc exempt purposes (other than by provide the purposes for adoption of the purposes for adoption of the purposes for adoption of the purposes for address, and EIN of corporation, nership, or disregarded entity ownership, or disregarded entity ownership.	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME (B) (centage of rship interest % % % %	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities	d importa	tities (See page 34 of the	of the organization's instructions.) (E) End-of-year assets
Line No. ▼ 93A 93B Part IX	Explain how each activity for which inc exempt purposes (other than by provide the purposes for adoption fees for adoption fees related to adoption fees, and EIN of corporation, nership, or disregarded entity N/A	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME (B) (centage of rship interest % % % %	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities	d importa	tities (See page 34 of the	instructions.) End-of-year assets e 34 of the instructions.)
Part IX	Explain how each activity for which inc exempt purposes (other than by provide the purposes for adoption of the purposes for adoption of the purposes for adoption of the purposes for address, and EIN of corporation, nership, or disregarded entity ownership, or disregarded entity ownership.	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME Taxable Subsidiar (B) recentage of riship interest % % % % % Transfers Associa	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities	led En	tities (See page 34 of the (D) Total income	instructions.) End-of-year assets e 34 of the instructions.) Yes X No
Part IX Part X (a) Did	Explain how each activity for which inc exempt purposes (other than by provide the purposes for an exempt purposes (other than by provide the purposes for an exempt purposes (other than by provide the purposes for an exempt purposes for a first purposes for a first purpose for a first	come is reported in column ding funds for such purported in Column HOME STUDIE DOPTION HOME [Axable Subsidiar (B) (B) (Centage of rship interest) [Comparison of the column Home of th	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities ted with Persona rectly, to pay premiums of	d importa	tities (See page 34 of the (D) Total income	instructions.) End-of-year assets e 34 of the instructions.)
Part X (a) Did (b) Did	Explain how each activity for which inc exempt purposes (other than by provide the purposes for the purposes (other than by provide the purposes for the purposes for the organization, describing the purposes for the organization, during the year, received the purposes for the p	ome is reported in colum ding funds for such purpo HOME STUDIE OPTION HOME Taxable Subsidiar (B) centage of rship interest % % % % % Transfers Associa any funds, directly or indirectly or indirectl	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES Ites and Disregard (C) Nature of activities ted with Persona Irectly, to pay premiums of Ity, on a personal benefit of	d importa	tities (See page 34 of the (D) Total income	instructions.) End-of-year assets e 34 of the instructions.) Yes X No
Part IX (a) Did (b) Did Note: If	Explain how each activity for which inc exempt purposes (other than by provide the purposes (other tha	Transfers Associa any funds, directly or indirect 4720 (see instructions	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities ted with Persona rectly, to pay premiums of thy, on a personal benefit of	led En	tities (See page 34 of the (D) Total income fit Contracts (See page 34 of the (D))	e 34 of the instructions.) Yes X No Yes X No
Part IX (a) Did (b) Did Note: If	Explain how each activity for which inc exempt purposes (other than by provide the exempt purposes (other than	Transfers Associa any funds, directly or indirect 4720 (see instructions	ishment of Exem In (E) of Part VII contribute (Ses). S STUDIES ies and Disregard (C) Nature of activities ted with Persona rectly, to pay premiums of thy, on a personal benefit of (). () g accompanying schedules an all information of which prepar	I Benen a person ontract?	tities (See page 34 of the (D) Total income fit Contracts (See page all benefit contract?	e 34 of the instructions.) Yes X No Yes X No
Part IX (a) Did (b) Did Note: If	Explain how each activity for which inc exempt purposes (other than by provide the purposes (other tha	Transfers Associa any funds, directly or indirect 4720 (see instructions	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities ted with Persona rectly, to pay premiums of thy, on a personal benefit of). In accompanying schedules an all information of which prepar	led En Bene a person ontract?	tities (See page 34 of the (D) Total income fit Contracts (See page 34 of the (D))	e 34 of the instructions.) Yes X No Yes X No
Part X (a) Did (b) Did Note: If	Explain how each activity for which inc exempt purposes (other than by provide the organization, during the year, pay present the organization, during the year, pay present the organization, during the year, pay present to (b), file Form 8870 and Form Under pegalties of persury, I declare that I have correct, and complete Declaration of present (signature of officer).	Transfers Associa any funds, directly or indirect 4720 (see instructions	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities ted with Persona rectly, to pay premiums of tly, on a personal benefit of). If accompanying schedules an all information of which preparal Date	led En Bene a person ontract?	tities (See page 34 of the (D) Total income fit Contracts (See page all benefit contract? Its, and to the best of my knowled to the best of my knowledge RELL GOOLSBY, and name and title. Check if	e 34 of the instructions.) Yes X No Yes X No
Part X (a) Did (b) Did Note: If	Explain how each activity for which inc exempt purposes (other than by provide the organization, during the year, pay present the organization of prepare (other than become that I have correct, and complete Declaration of prepare (other than by provide the provide that I have correct, and complete Declaration of prepare (other than by provide that I have correct, and complete Declaration of prepare (other than by provide the provide that I have correct, and complete Declaration of prepare (other than by provide the purposes (other than by provide the purposes (other than by provide the provide than by provide the purposes (other than by provide the purposes (other than by provide the provide than by provide the purposes (other than by provide	Transfers Associa any funds, directly or indirect 4720 (see instructions	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities ted with Persona rectly, to pay premiums of tly, on a personal benefit of). If accompanying schedules an all information of which preparal Date	I Bene I a persor ontract? d statemen er has any SHERF	tities (See page 34 of the (D) Total income fit Contracts (See page all benefit contract? Is, and to the best of my knowled knowledge (BELL GOOLSBY, and name and title. Check if self-	e 34 of the instructions.) Per State of the instructions.
Part IX (a) Did (b) Did Note: If Please Sign Here	Explain how each activity for which inc exempt purposes (other than by provide the purposes (other than by provide than by pro	come is reported in column ding funds for such purported in the purported	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities ted with Persona rectly, to pay premiums of thy, on a personal benefit co). g accompanying schedules and all information of which prepara all information of which prepara	I Bene I a person ontract? d statemen er has any SHERF	tities (See page 34 of the (D) Total income fit Contracts (See page 34 of the rotal income fit Contracts (See page 34 of the rotal income	e 34 of the instructions.) Per State of the instructions.
Part IX (a) Did (b) Did Note: /f Please Sign Here	Explain how each activity for which inc exempt purposes (other than by provide the purposes (other than by provide than by	ome is reported in column ding funds for such purported in the purported i	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES ies and Disregard (C) Nature of activities ted with Persona rectly, to pay premiums of thy, on a personal benefit co). g accompanying schedules and all information of which prepara all information of which prepara	I Bene I a persor ontract? d statemen er has any SHERF	tities (See page 34 of the (D) Total income fit Contracts (See page all benefit contract? Is, and to the best of my knowled knowledge (BELL GOOLSBY, and name and title. Check if self-	e 34 of the instructions.) Per State of the instructions.
Part X (a) Did (b) Did Note: If Please Sign Here Paid Preparer's Use Only	Explain how each activity for which inc exempt purposes (other than by provide the purpose (other than by provide the purpose (other than by provide than by provide than by purpose (other than by provide than	come is reported in column ding funds for such purported in the purported	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES Ites and Disregard (C) Nature of activities Ited with Persona rectly, to pay premiums of thy, on a personal benefit of). g accompanying schedules an all information of which prepara Date I Bene I a persor ontract? d statemen er has any SHERF	tities (See page 34 of the (D) Total income fit Contracts (See page 34 of the rotal income fit Contracts (See page 34 of the rotal income ELL GOOLSBY, and to the best of my knowledge RELL GOOLSBY, and name and title. Check if self-employed EIN EIN	e 34 of the instructions.) Preparer's SSN or PTIN	
Part IX (a) Did (b) Did Note: If Please Sign Here Paid Preparer's	Explain how each activity for which inc exempt purposes (other than by provide the purpose (other than by provide the purpose (other than by provide than by provide than by purpose (other than by provide than	ome is reported in column ding funds for such purported in the purported i	ishment of Exem In (E) of Part VII contribute Ises). S STUDIES Ites and Disregard (C) Nature of activities Ited with Persona rectly, to pay premiums of thy, on a personal benefit of). g accompanying schedules an all information of which prepara Date I Bene I a persor ontract? d statemen er has any SHERF	tities (See page 34 of the (D) Total income fit Contracts (See page 34 of the rotal income fit Contracts (See page 34 of the rotal income ELL GOOLSBY, and to the best of my knowledge RELL GOOLSBY, and name and title. Check if self-employed EIN EIN	e 34 of the instructions.) Per State of the instructions. Per X No	

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

OMB No 1545-0047

Department of Internal Reven		► MUST be completed by the above				z	
Name of the	organization			<u> </u>	I		fication number
	,	WORLD CHILD, INC.				52 2252	234
Part I	Compens	ation of the Five Highest Paid Er			icers, Directo	rs, and Trus	stees
	(a) Name an	f the instructions. List each one. If there are none d address of each employee paid more than \$50,000	e, enter	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions t employee benefit plans & deferred compensation	(e) Expense account and oth allowances
NONE_							
							
Total number	er of other emplo	oyees paid	•••	0			
Part II	Compens	ation of the Five Highest Paid Inc the instructions. List each one (whether individu	-	ndent Contractors for		al Services	**
		nd address of each independent contractor paid in			(b) Type of s	ervice	(c) Compensation
NONE							
			· – – -				
						_	
_							
					.		
							
	r of others rece professional ser		•	0			

Sche	dule A (F	orm 990 or 990-EZ) 2004 WORLD CHILD, INC. 52-	<u> 225223</u>	4	age 2
Pa	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
 	oublic op obbying or line i o Organizat	the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence inition on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the activities \$	A, <u>1</u>		х
2 1	Ouring th rustees, person is	e year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," detailed statement explaining the transactions.)			
a S	Sale, exc	hange, or leasing of property?			X
b i	ending o	of money or other extension of credit?	_2b		X.
c l	urnishin	g of goods, services, or facilities?	2c		х
d l	Payment	of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		Х
e 7	ransfer (of any part of its income or assets?	2e		Х
3 a [Oo you m	nake grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	3a		x
p [ou deter Oo you h	mine that recipients qualify to receive payments.) ave a section 403(b) annuity plan for your employees?	3b		X
		naintain any separate account for participating donors where donors have the right to provide advice e or distribution of funds?	4a		Х
		rovide credit counseling, debt management, credit repair, or debt negotiation services?	4b_		Х
Pa	rt IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The c	rganızatı	on 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	Ц	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	닏	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III).			
8	닏	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, cit and state	ly, 		
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).		
11a		(Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general public.			
		Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
11b	빌	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12	LX.	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			
		ts support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquirely by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	ea		
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations			
		(1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(2).	3).)		
		Provide the following information about the supported organizations. (See page 5 of the instructions.)	/h\l m	e numi	ner
		(a) Name(s) of supported organization(s)		m abo	
14 42311 12-03-	 1,,	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.) Schedule A (I	Form 990 or 9	90-E7	2004
14-03-	U-7				

<u>-</u>	T abile support percentage (time recentation) divided by time recitationing			14/11 /0
	Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that we	· · · · · · · · · · · · · · · · · · ·	,	•
	records to show the name of, and total amounts received in each year from, each "disqualific	ed person. " Do not file this list with y	our return.	Enter the sum of
	such amounts for each year:			
	(2003) 0. (2002) 0. (2001)	0. (2)	000)	0.
b	For any amount included in line 17 that was received from each person (other than "disquali	fied persons"), prepare a list for your	records to s	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. (Inclu	ide in the list	torganizations
	described in lines 5 through 11, as well as individuals.) Do not file this list with your return.	After computing the difference betw	een the amo	ount received and
	the larger amount described in (1) or (2), enter the sum of these differences (the excess am	. •		
	(2003) 0 • (2002) 0 • (2001)	0. (20	000)	0.
Ç	Add: Amounts from column (e) for lines: 15 16	S		
	17 609,280. 20 2	· •	27c	609,280.
d	Add: Line 27a total O . and line 27b total	<u> </u>	27d	0.
e	Public support (line 27c total minus line 27d total)	. ,	27e	609,280.
f	Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	271 609,735	<u>.</u>	
g	Public support percentage (line 27e (numerator) divided by line 27f (denomin	ator))	27g	99.9254%
h	Investment income percentage (line 18, column (e) (numerator) divided by lin	e 27f (denominator))	- 27h	0746%
ι	Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusu	al grants during 2000 through 2003	prepare a li	st for your records
t(to show, for each year, the name of the contributor, the date and amount of the grant, and a bryour return. Do not include these grants in line 15.	iet description of the nature of the gr	ant Do not	lile this list with
.,	NONE		Schedule 4	/Form 000 or 000-F21 2004

28

Does the organization discriminate by race in any way with respect to:

34 a Does the organization receive any financial aid or assistance from a governmental agency?

If you answered "Yes" to either 34a or b, please explain using an attached statement.

1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Has the organization's right to such aid ever been revoked or suspended?

Students' rights or privileges?

Other extracurricular activities?

Employment of faculty or administrative staff?

Scholarships or other financial assistance?

Admissions policies?

Educational policies?

Use of facilities?

Athletic programs?

If you answered "No" to any of the above, please explain, (If you need more space, attach a separate statement.)

If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,

Schedule A (Form 990 or 990-EZ) 2004

33a

33b

33c 33d

33e

33f 33g

33h

34a

34b

35

	-EZ) 2004 WORLD CH					<u>5</u> 2-	-2252234 Page
	ng Expenditures by E pleted ONLY by an eligible orga	_		ige 9 of	the instructions.)		N/A
Check ▶ a if the org	anızatıon belongs to an affılıate	d group. Check	▶ b if	you ch	ecked "a" and "limited	control [®] j	provisions apply.
/Th	Limits on Lobbying	-			(a) Affiliated group totals		(b) To be completed for ALL electing organizations
(riid	e term "expenditures" means an	iourits paid of iliculted.)		Γ	N/A		
36 Total lobbying expenditur	res to influence public opinion (arassroots lobbying)		36	N/A		
	res to influence a legislative boo			37			
38 Total lobbying expenditur				38			
39 Other exempt purpose ex	penditures			39			
	penditures (add lines 38 and 39			40			
	ount. Enter the amount from the						
If the amount on line 40	•	ing nontaxable amount is -	_			ļ	
Not over \$500,000 Over \$500,000 but not over \$	•	mount on line 40	. }			1	
Over \$1,000,000 but not over		is 10% of the excess over \$1,000	· 1	41			
Over \$1,500,000 but not over		s 5% of the excess over \$1,500,0					
Over \$17,000,000	\$1,000,000		J				
42 Grassroots nontaxable an	· ·			42			
	36. Enter -0- if line 42 is more			43	_		
44 Subtract line 41 from line	38. Enter -0- if line 41 is more	than line 38		44		-	+ =
Caution: If there is an a	amount on either line 43 or l	ine 44, you must file Form	n 4720.				
	(Some organizations that m	Averaging Period ade a section 501(h) election structions for lines 45 throu	n do not have to	compl	lete all of the five colum	ากร	
		Lobbying Exp	enditures Durin	g 4-Ye	ar Averaging Period		N/A
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	<u>!</u>	(d) 2001		(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 amoun	t						
(150% of line 48(e)) 50 Grassroots lobbying	- -				- -		0.
expenditures							0.
Part VI-B Lobbyin	g Activity by Nonelecting only by organizations that dis	•		ıa ınetri	uctions)		
	ization attempt to influence nation				'		N/A
- ·	egislative matter or referendum	· ·	i, including any	u	Yes	No	Amount
a Volunteers							
b Paid staff or management	(Include compensation in expe	nses reported on lines c thr	ough h.)				
c Media advertisements	•						
d Mailings to members, legi	•				<u> </u>		
e Publications, or published					<u> </u>		
	ons for lobbying purposes	ficials or a logislators body			·		
=	tors, their staffs, government of eminars, conventions, speeche				·		
	es (Add lines c through h .)	o, .socaroo, or any outle Hills		•• •••		-+	0.
	e, also attach a statement giving	g a detailed description of th	e lobbying activ	rties.	. \		

Schedule A (Form 990 or 990-EZ) 2004

	•			
+				
				
			1	
2 a Is the organization directly or indirectly	y affiliated with, or related to, o	ne or more tax-exempt org	anizations described in section 501(c) of t	
Code (other than section 501(c)(3)) or	in section 527?		•	Yes X No
b If "Yes," complete the following schedu				
		·	,	
(a) Name of organizat		(b)	(c)	
Name of organizat	on	Type of organization	Description of relatio	inship
			 	-
				
	·			
				
				
			<u> </u>	
-	_			
	i			

423151 11-24-04

Schedule A (Form 990 or 990-EZ) 2004

c	7	
1	PAGE	
	ν ν	
	F C K	

Amount Of Depreciation	533
Current Sec 179	0 0
Accumulated Depreciation	2,128.
Basis For Depreciation	2,661.
Reduction In Basis	
Bus % Excl	
Unadjusted Cost Or Basis	2,661.
No o	9
Life	000.
Method	IS.
Date Acquired	010101SL
Description	MACHINERY & EQUIPMENT * 990 PAGE 2 TOTAL MACHINERY & EQUIPMENT * GRAND TOTAL 990 PAGE 2 DEPR
Asset No	н ————————————————————————————————————
	L

(D) - Asset disposed

428102 10-08-04

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

FORM 990	C	OTHER E	XPENSES		STATEMENT	
DESCRIPTION	(A) TOTAL		(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAI	(D) J FUNDRAISI	:NG
DIRECT COSTS OF HOME STUDIES ADVERTISING AND	76,49	90.	76,490			
PROMOTION INSURANCE PROFESSIONAL FEES	4,85 4,48 2,23	32.	4,857 4,482 2,238	•		
TOTAL TO FM 990, LN 43	88,06	57.	88,067	•	·	
FORM 990 DEPRECIATION	N OF ASSE	TS NOT	HELD FOR	INVESTMENT	STATEMENT	:
DESCRIPTION		COST OTHER	r OR	ACCUMULATED DEPRECIATION		
			DUSIS		BOOK VALU	E
COMPUTER EQUIPMENT			2,661.	2,661.	BOOK VALU	E 0
	7, LN 57			2,661. 2,661.	BOOK VALU	0
TOTAL TO FORM 990, PART I	IFICATION	OF REI	2,661.		BOOK VALU	0
COMPUTER EQUIPMENT TOTAL TO FORM 990, PART IN FORM 990 IDENT: NAME OF ORGANIZATION	IFICATION	OF REI	2,661. 2,661. ZATED ORGA	2,661.		0 .