Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Rovenue Service

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Α	For the	e 2004 c			31 ,2005
В	Check if a	applicable:	Floaso Grame or organization		er identification number
		chango	labol or Lab		444119
$\overline{}$	Nomo ch	•	print or Number and street (or P.O. box if mail is not delivered to street address) Room/sulto ET	•	ono numbor
$\overline{}$	initial rot	•		<u> 52 -</u>	469-1145
	Final rate		Specific City or town, state or country, and ZIP + 4	ecountin	ng method: 🔯 Cash 🔲 Accrual
		d return	tions. MINNEAPOLIS, MN 55424	<u> </u>	hor (specify) >
		on ponding			to section 527 organizations.
			trusts must attach a completed Schedule A (Form 990 or 990-EZ).		n for affiliates? Yes 🔯 No
G	Website	o: ► wwv			er of affiliates > N/A
$\overline{}$	O	adlam Assa	e (check only one) ► 🖾 501(c) () ◄ (insert no.) 🗌 4947(a)(1) or 🔲 527 H(c) Are all affiliate		ided? Yes No t. See instructions.)
			M/d) le this a conser		•
			I if the organization's gross receipts are normally not more than \$25,000 line	vered b	by a group ruling? Yes X No
			not file a return with the IRS; but if the organization received a Form 990 Package Id file a return without financial data. Some states require a complete return.		
_		-	the control of the co		the organization is not required
L	Gross i		Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 32, 840 to attach Sch	n. B (F	Form 990, 990-EZ, or 990-PF).
Р	art I	Rever	nue, Expenses, and Changes in Net Assets or Fund Balances (See page	18 c	of the instructions.)
	1	Contrib	utions, gifts, grants, and similar amounts received:		
	a		public support		
	1		public support		
			ment contributions (grants)		
	ď		add lines 1a through 1c) (cash \$ noncash \$)	1d	11,400
	2		n service revenue including government fees and contracts (from Part VII, line 93)	2	261
	3	•	rship dues and assessments	3	20,191
	4		t on savings and temporary cash investments	4	988
	5		ds and interest from securities	5	
	1 -		rents		
			ental expenses		
			Ital income or (loss) (subtract line 6b from line 6a)	6c	o
0	7		nvestment Income (describe)	7	
Revenue	'		(A) Securities (B) Other		
9	oa		amount from sales of assets other (A) Securities (S) (S) (S)		
×			ventory		
	I	GRE	(see (see Dchedule)		
		Call Oi	Troop (and the control of the contr	8d	o
	1 46	Spier Sail	n or (loss) (combined he 8c, columns (A) and (B))		
	14	phanel	Events and activities attach schedule). If any amount is from gaming, check here		
		Gross I	revenue (not including \$ of		
	نما	OG	revenue (not including \$ of		
		Not inc	come or (loss) from special events (subtract line 9b from line 9a)	9c	l o
	1		sales of inventory, less returns and allowances 10a		
	b		cost of goods sold		
_	C		2000 01 g0000 00.0	10c	0
rnn7	11		revenue (from Part VII, line 103)	11	0
7	12		evenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	32,840
$\overline{}$	 		m services (from line 44, column (B))	13	18,572
UC! な Expenses	14	-	ement and general (from line 44, column (C))	14	1,047
ے چ	15	_	ising (from line 44, column (D))	15	469
⊃ <u>×</u>	16		ents to affiliates (attach schedule)	16	
→ Ш	17		expenses (add lines 16 and 44, column (A))	17	20,088
 U "				18	12,752
Z X	18		s or (deficit) for the year (subtract line 17 from line 12)	19	90,652
ANAINEL Net Assets	19 20		sets or fund balances at beginning of year (from line 73, column (A))	20	- 20,032
ŢŽ	21		sets or fund balances at end of year (combine lines 18, 19, and 20).	21	103,404
بر	1 1		The second of the control of the second of t	<u> </u>	203,104

(For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2004)

Cash 3	Par	Statement of All organizations mu and section 4947(a)	ist comple (1) nonex	ete column (A). Columns empt charitable trusts bu	(B), (C), and (D) are real optional for others. (Se	quired for section 501(c) e page 22 of the instruct	(3) and (4) organizations ions.)
Cash 3				(A) Total			(D) Fundraising
Cash S Concept S Specific assistance to individuals (altach schedule) 23 Specific assistance to individuals (altach schedule) 23 24	22	Grants and allocations (attach schedule)					
23 Specific assistance to includidusis (sitant schedule) 24 25 26 26 26 26 27 28 28 28 28 28 28 29 29		·	22				
25	23		23				1
28 Other alleries and weges 22 Pension plan contributions 27	24	Benefits paid to or for members (attach schedule)	24				
28 Other seleries and wages	25	Compensation of officers, directors, etc	25				
27	26		26				
28	27		27				
28 29	28	•	28				
30	29		29				
31			30				
32							
33 33 139 139 34 429 429 429 37 38 36 36 36 36 36 36 36	-						
10 10 10 10 10 10 10 10		-	-	139	139		
Seguration Seg		7.3	$\overline{}$				
Occupancy 38 Occupancy 38 Cocupancy 39 Cocupancy 30 Cocupancy						- · · · · · · · · · · · · · · · · ·	367
### Equipment rental and maintenance		- '' -					
Printing and publications 38			-				
Travel		· ·		1 997	1 705		102
40 Conferences, conventions, and meetings 41 Interest 42 Depreciation, depletion, etc. (attach schedule) 42 Depreciation, depletion, etc. (attach schedule) 43 Other expenses not covered above (temize): a MISC b EDUCATIONAL MATERIAL 43 693 693 c GRANT EXPENSE 43 392 392 d TINTERNET 50 CONSULTING 43 13,964 13,964 4 Total functional expenses (eddlines 22 brough 43). Organizations completing columns (8/0), carry these totals to times 19-15 b Joint Costs. Check >		•		1,897	1,795		102
Interest A1	39						
A2 Depreciation, depletion, etc. (attach schedule) A2 A3a G93 G93 G93 G87 GRANT EXPENSE A3b G92 GRANT EXPENSE A3d G93 G93 G93 G87 GRANT EXPENSE A3d G93	40	Conferences, conventions, and meetings				 	
A3a 693	41						
b EDUCATIONAL MATERIAL c GRANT EXPENSE d3c 13,964 13,964 d INTERNET d3d 1,341 341 d3e 1,412 706 706 d4 907eran services (attach schedule) d3e 1,412 706 706 d4 907eran services (attach schedule) d3e 1,412 706 706 d4 907eran services (attach schedule) d3e 1,412 706 706 d4 907eran services (attach schedule) d3e 1,412 706 706 d4 907eran services (attach schedule) d3e 1,412 706 706 d4 907eran services (attach schedule) d3e 1,412 706 706 d4 907eran services (attach schedule) d3e 1,412 706 706 d4 907eran services (att	42		-				
CONSULTING 43d 341 341 341 43d 341 341 44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B/O). carry these totals to lines 13-15 44 20,088 18,572 1,047 469 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 \$ If 'Yes,' enter (I) the aggregate amount of these joint costs \$	43	Other expenses not covered above (itemize): a MISC					
d INTERNET CONSULTING 1 Total functional expenses (add lines 22 through 43). Organizations completing columns (8/40), carry these totals to lines 19-15 44 Total functional expenses (8/40), carry these totals to lines 19-15 44 Total functional expenses (8/40), carry these totals to lines 19-15 44 Total functional expenses (8/40), carry these totals to lines 19-15 44 20,088 18,572 1,047 469 Joint Costs. Check In If you are following SOP 98-2. Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? If yes, "enter (I) the aggregate amount of these joint costs [10], the amount allocated to Program services [10] the amount allocated to Program services [10] the amount allocated to Fundraising \$ Part III Statement of Program Service Accomplishments (See page 25 of the instructions.) What is the organizations primary exempt purpose? SEE STATEMENT ATTACHED 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.) b (Grants and allocations \$ NONE) (Grants and allocations \$ NONE) 18,572 (Grants and allocations \$) 18,572	b						
43	C				13,964		
Total functional expenses (add lines 22 through 43). Organizations completing columns (8)(0), carry these totals to times 13-15 44 20,088 18,572 1,047 469 Joint Costs. Check	d		43d				
completing columns (8)(0), carry these totals to times 13–15	θ	CONSULTING	43e	1,412	706	706	
Joint Costs. Check	44		44	20,088	18,572	1,047	469
(Grants and allocations \$ NONE) (Grants and allocations \$) (Total of Program Service Expenses (should equal line 44, column (B), Program services)	If "Ye (iii) the Par Wha All or of cli organ	s," enter (I) the aggregate amount of these joint cost e amount allocated to Management and general \$ III Statement of Program Service Access is the organization's primary exempt purpose? ganizations must describe their exempt purpose agents served, publications issued, etc. Discuss achializations and 4947(a)(1) nonexempt charitable trusts	omplis SEI chievemer	; (II) the ; and (Iv) the shments (See p E STATEMENT nents in a clear and its that are not me	amount allocated amount allocated age 25 of the in ATTACHED concise manner.	to Program services to Fundralsing \$ structions.) State the number 501(c)(3) and (4)	Program Service Expenses (Required for 501(c)(3) and (4) orgs . and 4947(a)(1) trusts; but optional for
(Grants and allocations \$) (Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)	а.	SEE STATEMENT ATTACHED					
(Grants and allocations \$) (Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)							
(Grants and allocations \$) (Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)							
(Grants and allocations \$) c	_	(0	3rants	and allocations	\$	NONE)	18,572
C	b						
C							
C							
(Grants and allocations \$) d (Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)		(0	3rants	and allocations	\$		
(Grants and allocations \$) d (Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)	_			<u> </u>		<u></u>	
(Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)							
(Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)							
(Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)		((Grants a	and allocations	\$	<u> </u>	
(Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)	_				<u> </u>		
e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)	a .						
e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)							
e Other program services (attach schedule) (Grants and allocations \$) f Total of Program Service Expenses (should equal line 44, column (B), Program services)		10	Frants :	and allocations	\$		
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	. 7						
							10 573
		otaroi Program Service Expenses (snould equ	Jai IIIIe	TT, COIUITIT (D), F	rogram services)		Form 990 (2004)

Part IV Balance Sheets (See page 25 of the instructions.)

column should be for end-of-year amounts only. 45 Cash—non-interest-bearing	83,199
46 Savings and temporary cash Investments	0 0
b Less: allowance for doubtful accounts	0
b Less: allowance for doubtful accounts	0
48a Piedges receivable	
48a Piedges receivable	
Age	
b Less, allowance for doubtful accounts	
49 Grants receivable	
50 Receivables from officers, directors, trustees, and key employees (attach schedule)	
51a Other notes and loans receivable (attach	
schedule)	<u> </u>
52 Inventories for sale or use	
53 Prepaid expenses and deferred charges	
54 Investments—securities (attach schedule) ▶ □ Cost □ FMV	<u> </u>
55a Investments—land, buildings, and equipment: basis	
b Less: accumulated depreciation (attach	
schedule)	0
56 Investments—other (attach schedule)	
57a Land, buildings, and equipment: basis 57a	
b Less: accumulated depreciation (attach	
schedule)	<u> </u>
58 Other assets (describe ►) 58	<u> </u>
59 Total assets (add lines 45 through 58) (must equal line 74)	103,404
60 Accounts payable and accrued expenses	
61 Grants payable	<u> </u>
62 Deferred revenue	2
63 Loans from officers, directors, trustees, and key employees (attach	
schedule)	3
63 Loans from officers, directors, trustees, and key employees (attach schedule)	a
D MORGROS and other notes pavable (attach schedule)	
65 Other liabilities (describe >) 65	5
66 Total liabilities (add lines 60 through 65) 0 66	0
Organizations that follow SFAS 117, check here ▶ ☐ and complete lines	
67 through 69 and lines 73 and 74.	
67 through 69 and lines 73 and 74. 67 Unrestricted 68 Temporarily restricted 69 Permanently restricted Organizations that do not follow SFAS 117, check here and complete lines 70 through 74.	
69 Permanently restricted	9
© Organizations that do not follow SFAS 117, check here ▶ □ and	
complete lines 70 through 74.	
5 70 Capital stock trust principal or current funds	o
71 Paid-in or capital surplus, or land, building, and equipment fund 90,652 7	1 103,404
71 Paid-in or capital surplus, or land, building, and equipment fund	2
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)	
74 Total liabilities and net assets / fund balances (add lines 66 and 73) 90,652 74	103,404

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.

(See page 27 of the state of th	a b c	N/A	(2)		ancial statement necluded on line Form 990: services facilities \$	s •	a	N/I
\$ ines (1) and (2) bline 12, Form 990	d		(2) e	Line a minima Amounts in Form 990 Investment on included 6b, Form 99 Other (speed amount of the control of the	d on line 30 \$ cify): state of lines (1) a nses per line 17, stine d)	and (2) Form 990	b c	
ons.)	————	(B) Title a	and aver	age hours per	(C) Compensation (If not paid, enter	(D) Contributions employee benefit p	to tans &	(E) Expenso account and other
ATTACHED		-			NONE			NON
	line 12, Form 990 icers, Directors, Tons.) amound address ATTACHED	line 12, Form 990 cleers, Directors, Trustees, a ons.) amo and address ATTACHED actor, trustee, or key employee rec	line 12, Form 990 icers, Directors, Trustees, and Key Ions.) amo and addross ATTACHED Actor, trustee, or key employee receive aggre	line 12, Form 990 licers, Directors, Trustees, and Key Employons.) amo and address (B) Titlo and aven weak devoted ATTACHED	line 12, Form 990 British 12, Form 990 Bri	line 12, Form 990 Bine 13, (line c plus line 1)	line 12, Form 990 e Total expenses per line 17, Form 990 (line c plus line d) Position of line c plus	line 12, Form 990 By Cline 12, Form 990 Cline c plus line d)

Par	Other Information (See page 28 of 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?	77		X
	If "Yes," attach a conformed copy of the changes.			
78a	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		<u>X</u>
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common	80a		X
h	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? If "Yes," enter the name of the organization >	ova		
U	and check whether it is exempt or nonexempt.			i
81a	Enter direct and indirect political expenditures. See line 81 instructions			, ;
	Did the organization file Form 1120-POL for this year?	81b		X
	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			1 .
	as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		X	زـــــــــــــــــــــــــــــــــــــ
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b 84a		X
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	0-ta		<u> </u>
D	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?		N/A	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		N/A	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization			
	received a walver for proxy tax owed for the prior year.			!
С	Dues, assessments, and similar amounts from members			
d	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
θ	Aggregate nondeductible amount of section doos(e)(1)(A) does notices			
T	Taxable amount of lobbying and political expenditures (line 850 less 859)	85a	N/Ā	
9	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	<u> </u>	-17.5.	
n	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 N/A			
b	Gross receipts, included on line 12, for public use of club facilities			ĺ
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Sources against amounts due of received from them./			
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		\mathbf{x}
89a			-	1
	section 4911 ► NONE ; section 4912 ► NONE ; section 4955 ► NONE			i
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	L	<u> </u>
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under		N	ONE
د ۔	sections 4912, 4955, and 4958			ONE
	List the states with which a copy of this return is filed MINNESOTA			<u> </u>
	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)		N	ONE
91	The books are in care of PHYLLIS ELLEFSON Telephone no. > 952-4	59-3		
	Located at ▶ 10289 WOODHILL BLVD., LAKEVILLE, MN ZIP+4 ▶ 55044			
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			N/A
		For	ი 990	(2004)

	VII Analysis of Income-Producing A	Activities (See pa	age 33 of the i	instructions.)		-
Note	: Enter gross amounts unless otherwise	Unrelated by	usiness income	Excluded by sec	tion 512, 513, or 514	(E)
indic	eted.	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income
93	Program service revenue: BROCHURES		7.000		741104111	261
a		-		 		201
b		_		 		
C			 	 		
d			-	 		
f	Medicare/Medicaid payments					
9	Fees and contracts from government agencie	es				
94	Membership dues and assessments					20,191
95	Interest on savings and temporary cash investmen	nts		14	988	
96	Dividends and interest from securities				<u> </u>	
97	Net rental income or (loss) from real estate:			1		
a	debt-financed property		-			
ь	not debt-financed property			 		
98	Net rental income or (loss) from personal propert					
99	Other investment income			 		
100 101	Net income or (loss) from special events	• 1				
102	Gross profit or (loss) from sales of inventory			1		
103	Other revenue: a					
ь	Other revenue. a					
c					****	· · · · · · · · · · · · · · · · · · ·
d						
9					-	
104	Subtotal (add columns (B), (D), and (E))		0		988	20,452
105	Total (add line 104, columns (B), (D), and (E				·	21,440
	Line 105 plus line 1d, Part I, should equal th	e amount on line	12, Part I.			
Part	VIII Relationship of Activities to the Activities					
				contributed im		
Line		e is reported in colu ther than by providing	imn (E) of Part VII g funds for such	purposes).	portantly to the a	ccomplishment
Line	of the organization's exempt purposes (or	ther than by providing	g funds for such	purposes).	· · ·	•
Line	of the organization's exempt purposes (or	ther than by providing LLECTED FRO	g funds for such	purposes).	· · ·	•
Line	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO	ther than by providing LLECTED FRO	g funds for such	purposes).	· · ·	•
Line 93	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO INCURRED TO PREPARE TH	ther than by providing LLECTED FROE BROCHURE.	g funds for such	purposes). SEMENT (OF EXPENSE	ES
Line	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO-INCURRED TO PREPARE THE	ther than by providing LLECTED FROE BROCHURE.	g funds for such	purposes). SEMENT (OF EXPENSE	ctions.)
Line 93	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO-INCURRED TO PREPARE THE INCURRED Regarding Taxable Subsequences (A) Name, address, and EIN of corporation.	ther than by providing LLECTED FROE BROCHURE.	g funds for such	purposes). SEMENT (es (See page	OF EXPENSE	ES
93	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO-INCURRED TO PREPARE THE	ther than by providing LLECTED FROM E BROCHURE. Desidiaries and Discontinuous (B) Percentage of	g funds for such DM REIMBUR regarded Entiti (C)	purposes). SEMENT (es (See page	OF EXPENSE	ctions.) (E) End-of-year
Line 93	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO-INCURRED TO PREPARE THE	ther than by providing LLECTED FROM E BROCHURE. Disidiaries and Disidiaries a	g funds for such DM REIMBUR regarded Entiti (C)	purposes). SEMENT (es (See page	OF EXPENSE	ctions.) (E) End-of-year
93	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO-INCURRED TO PREPARE THE	ther than by providing LLECTED FROM E BROCHURE. Desidiaries and Discontinuous (B) Percentage of ownership interest % % %	g funds for such DM REIMBUR regarded Entiti (C)	purposes). SEMENT (es (See page	OF EXPENSE	ctions.) (E) End-of-year
Part	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO INCURRED TO PREPARE THE INCURRED TO PREPARE THE INCURRED Regarding Taxable Subsequence (A) Name, address, and EIN of corporation, partnership, or disregarded entity	ther than by providing LLECTED FROM E BROCHURE. Desidiaries and Discontinuous (B) Percentage of ownership interest % % % %	g funds for such DM REIMBUR regarded Entiti (C) Nature of a	purposes). LSEMENT (es (See page ctivitles	34 of the instru	ctions.) (E) End-of-year assets
93	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO INCURRED TO PREPARE THE INCURRED TO PREPARE THE INCURRED REGARDING Taxable Subsequence (A) Name, address, and EIN of corporation, partnership, or disregarded entity	ther than by providing LLECTED FROM E BROCHURE. Desidiaries and Discontinuous (B) Percentage of ownership interest % % % %	g funds for such DM REIMBUR regarded Entiti (C) Nature of a	purposes). LSEMENT (es (See page ctivitles	34 of the instru	ctions.) (E) End-of-year assets
Part N/A Part	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO INCURRED TO PREPARE THE INCURRED TO	ther than by providing LLECTED FROM E BROCHURE. Disidiaries and Disipination of the percentage of the ownership interest with the ownersh	g funds for such DM REIMBUR regarded Entiti (C) Nature of a pay premiums on a	purposes). SEMENT (es (See page ctivitles atracts (See page)	34 of the instru (D) Total income	ctions.) (E) End-of-year assets tructions.) Yes X No
Part N/A Part (a) (b)	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO-INCURRED TO PREPARE THE INCURRED THE INCURRED TO PREPARE THE INCURRED TH	ther than by providing the than by providing the than by providing the than the	g funds for such DM REIMBUR regarded Entiti (C) Nature of a pay premiums on a r indirectly, on a	purposes). SEMENT (es (See page ctivitles atracts (See page)	34 of the instru (D) Total income	ctions.) (E) End-of-year assets
Part N/A Part (a) (b)	of the organization's exempt purposes (of A BROCHURE REVENUE IS COINCURRED TO PREPARE THE INCURRED TO	ther than by providing the than by providing	regarded Entition Nature of a pay premiums on a r indirectly, on a cons).	es (See page ctivitles atracts (See page personal benefit personal benefi	34 of the instru (D) Total income age 34 of the inscontract?	ctions.) (E) End-of-year assets tructions.) Yes X No Yes X No
Part N/A Part (a) (b)	of the organization's exempt purposes (of A BROCHURE REVENUE IS CO INCURRED TO PREPARE THE INCURRED TO	ther than by providing the than by providing	regarded Entition Nature of a pay premiums on a r indirectly, on a cons).	es (See page ctivitles atracts (See page personal benefit personal benefi	34 of the instru (D) Total income age 34 of the inscontract?	ctions.) (E) End-of-year assets tructions.) Yes X No Yes X No
Part (a) (b) Not	of the organization's exempt purposes (of A BROCHURE REVENUE IS COINCURRED TO PREPARE THE INCURRED TO	ther than by providing the than by providing	g funds for such OM REIMBUR regarded Entiti (C) Nature of a nature of a pay premiums on a r indirectly, on a ons). ing accompanying sethan officer) is base	es (See page ctivitles atracts (See page personal benefit personal benefi	34 of the instru (D) Total income age 34 of the inscentract? effit contract?	ctions.) (E) End-of-year assets tructions.) Yes X No Yes 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.)

2004

Employer Identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

41-1444119 ADOPTION OPTION COMMITTEE, INC. 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.") (d) Contributions to employee benefit plans & (o) Exponso secount and other (a) Name and address of each employee paid more (b) Title and average hours (c) Componsation than \$50,000 per week devoted to position deferred componention atlowances NONE Total number of other employees paid over Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II (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) Typo of service (c) Componsation Total number of others receiving over \$50,000 for professional services ▶

_		(Form 990 or 990-EZ) 2004			age
Part	Ш	Statements About Activities (See page 2 of the instructions.)		Yes	No
6	atter or In	ng the year, has the organization attempted to influence national, state, or local legislation, including any npt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid accurred in connection with the lobbying activities NONE (Must equal amounts on line 38, VI-A, or line I of Part VI-B.)	1		х
(Orga orga	anizations that made an election under section 501(h) by filling Form 5768 must complete Part VI-A. Other inizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities.			
: •	subs with own	ng the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority er, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the sactions.)			
а	Sale	exchange, or leasing of property?	2a		Х
		ding of money or other extension of credit?	2b		Х
		nishing of goods, services, or facilities?	2c		X
d I	Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
Θ .	Tran	nsfer of any part of its income or assets?	2е		X
a I	Do y	you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			l
		determine that recipients qualify to receive payments.)	3a		X
		you have a section 403(b) annuity plan for your employees?	3b	ļ	X
		you maintain any separate account for participating donors where donors have the right to provide advice		}	١.,
		he use or distribution of funds?	4a 4b		X
			1	L	^
art	١٧	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
ne o	rgar	nization is not a private foundation because it is: (Please check only ONE applicable box.)			
; [⊒ ,	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
. !	_	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
	_ ;	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hosp and state ▶			
) 10	_ '	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Secti (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 gene			
	_	170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	iai put	. J	JCII
Ь		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33½% of its support from contributions, membershi _l	n foar	224	ar-
•		receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no mo its support from gross investment income and unrelated business taxable income (less section 511 tax) from business taxable income (less section 511 taxable taxa	re tha siness	n 331	13%
3		An organization that is not controlled by any disqualified persons (other than foundation managers) and suppled described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(3).)			
		Provide the following information about the supported organizations. (See page 5 of the instructions.	.)		
		(a) Name(s) of supported organization(s) (b) Line from		er	

14 An organization organized and operated to test for public safety Section 509(a)(4). (See page 5 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2004

	You may use the worksheet in the instructions ndar year (or fiscal year beginning in)				i vi accuunnin	
		_ (a) 3/31/04		(c) 2002	(હે) <u>૨૦૦ </u> ૧	(e) Total
	Gifts, grants, and contributions received. (Do	7 - 10 1				1-/ 1
	not include unusual grants. See line 28.)	8,153	10,375	12,255	2,260	33,043
16	Membership fees received	14,659	6,503	22,850	41,676	85,688
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	413	100	518	993	2,024
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalities, and unrelated business taxable income (less section 511 taxes) from businesses acquired					
	by the organization after June 30, 1975	1,161	89	1,301	3,690	6,241
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
23	Total of lines 15 through 22	24,386	17,067	36,924	48,619	126,996
24	Line 23 minus line 17	23,973	16,967	36,406	47,626	124,972
25	Enter 1% of line 23	244	171	369	486	
26	Organizations described on lines 10 or 11:		amount in colum	n (e) line 24	▶ 26a	2,499
b	Prepare a list for your records to show the nan governmental unit or publicly supported organiz amount shown in line 26a. Do not file this list wi	ne of and amount cation) whose tota	t contributed by eal gifts for 2000 th	each person (other crough 2003 exce	er than a seded the nounts > 26b	20,505
C	Total support for section 509(a)(1)test: Enter li	ne 24, column (e)		▶ <u>26c</u>	124,972
d	Add: Amounts from column (e) for lines: 18 22	6,241	19 26b20,5	<u> 0 </u>	▶ 26d	
е f	Public support (line 26c minus line 26d total) . Public support percentage (line 26e (numera	ator) divided by i	Ine 26c (denomi	nator))	> 26e > 26f	98,226 78.60 %
27	Organizations described on line 12: a For person," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and	total amounts red	ceived in each yea	vere received fro ar from, each "dis	om a "disqualified equalified person."
	(2003) (2002)		(2001)		(2000)	
b	For any amount included in line 17 that was received show the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year:	ved from each per year, that was mo 5 through 11, as w the larger amoun	rson (other than "d ore than the larger well as individuals.) t described in (1)	lisqualified person of (1) the amount Do not file this it or (2), enter the s	s"), prepare a list on line 25 for the lst with your retu sum of these diffe	for your records to year or (2) \$5,000 m. After computing rences (the excess
	(2003) (2002)				(2000)	
C	Add: Amounts from column (e) for lines: 15		16 21	<u> </u>	▶ <u>27c</u>	
d	Add: Line 27a total	and line 27b tota	ıl		▶ 27d	
e f	Public support (line 27c total minus line 27d to Total support for section 509(a)(2)test: Enter a	otal)			> 27e	
g	Public support percentage (line 27e (numeral investment income percentage (line 18, column)	ator) divided by	line 27f (denomi	nator))	▶ 27g	
	Unusual Grants: For an organization describe					

Par	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)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
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	ì	
	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		32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32ь		
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.)			:
33	Does the organization discriminate by race in any way with respect to:			.
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b	-	
C	Employment of faculty or administrative staff?	33c		<u> </u>
d	Scholarships or other financial assistance?	33d	-	
8	Educational policies?	33e	<u> </u>	
f	Use of facilities?	33f	<u> </u>	
8	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.)	:		
34a	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		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associate and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associate and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associate and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associate and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associated and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associated and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associated and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associated and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associated and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associated and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associated and the applicable requirements of sections 4.01 through 4.05 of Pay 175 50, 1075 2.0 P. 507, associated and the applicable requirements are applicable requirements and the applicable requirements and the applicable requirements are applicable requirements.			
	of Rev. Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	1	1

Pa	t VI-A Lobbying Expenditures by Ele (To be completed ONLY by an	eligible organiz	zation that file	d Form 5768)	•	Page 3		
Chec	★ ► a ☐ if the organization belongs to an affilia	ted group. Che	ck ▶ b ☐ if	you checked "a" a	nd "limited control"	provisions apply.		
	Limits on Lobbyli				(a) Affiliated group totals	(b) To be completed for ALL electing		
	(The term "expenditures" mean					organizations		
36	Total lobbying expenditures to influence public							
37	Total lobbying expenditures to influence a legis			 				
38	Total lobbying expenditures (add lines 36 and 3			 				
39	Other exempt purpose expenditures			· · · · · · · — 		 		
40	Total exempt purpose expenditures (add lines :			40				
41	Lobbying nontaxable amount. Enter the amount if the amount on line 40 is—		-					
	Not over \$500,000	obbying nontaxa						
	Over \$500,000 but not over \$1,000,000 \$100,0							
	Over \$1,000,000 but not over \$1,500,000 \$175,0							
		100 plus 5% of the		.00,000				
	Over \$17,000,000 \$1,000					•		
42	Grassroots nontaxable amount (enter 25% of ii				,			
43	Subtract line 42 from line 36. Enter -0- if line 4							
44	Subtract line 41 from line 38. Enter -0- if line 4							
	Caution: If there is an amount on either line 43	or line 44, you n	nust file Form 47	20.	. <u> </u>			
	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.) Lobbying Expenditures During 4-Year Averaging Period							
					,			
	Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total		
	instal year beginning in /	2004	2003	2002	2001	Total		
<u>45</u>	Lobbying nontaxable amount							
46_	Lobbying celling amount (150% of line 45(e))			I				
47	Total lobbying expenditures							
48	Grassroots nontaxable amount							
49	Grassroots ceiling amount (150% of line 48(e))		*	Í	·			
50	Grassroots lobbying expenditures							
Pa	t VI-B Lobbying Activity by Nonelec	tina Public Cl	narities	l	<u> </u>	<u></u>		
	(For reporting only by organiza			Part VI-A) (See	page 11 of th	e instructions.)		
	ng the year, did the organization attempt to influence public opinion on a legislative m				any Yes No	Amount		
а	Volunteers		•					
b	Paid staff or management (Include compensation			c through h.)				
c	Media advertisements	•	•	• ,				
d	Mailings to members, legislators, or the public				1 1			
е	Publications, or published or broadcast statem							
f	Grants to other organizations for lobbying purp							
g	Direct contact with legislators, their staffs, government				I I			
	5 40				1 1	i		
n	Rallies, demonstrations, seminars, conventions		res, or any other	means		<u> </u>		
n i	Rallies, demonstrations, seminars, conventions Total lobbying expenditures (Add lines c through "Yes" to any of the above, also attach a state	gh h.)						

Pa	rt VII	,		nsfers To and Transaction of the instructions.)	s and Relationships With Nonch	aritable	Exe	empt
51		he reporting organ	nization directly or	indirectly engage in any of the	following with any other organization on 527, relating to political organization		l in s	ection
а	-	•			• •	31	Yes	No
		ransfers from the reporting organization to a noncharitable exempt organization of: (i) Cash						X
						a(II)		X
b		r transactions:						
	(1)	Sales or exchange	es of assets with a	noncharitable exempt organizat	llon	b(I)		X
	(ii)	Purchases of asse	ets from a nonchari	table exempt organization		b(II)		X
			• •			b(III)		_X_
			-			b(Iv)		X
		_			• • • • • • • • • • • • • • • • • • • •	b(v)	 	 X
				•	•••••	b(vl)	-	X
					yees			
u	goods	s, other assets, o	r services given by	the reporting organization. If the	he organization received less than fair s, other assets, or services received:	market v	value /alue	in any
	(a)	(b) Amount involved	Name of some	(c) haritable exempt organization	(d) Description of transfers, transactions, and a			
Cine	e no.	Amount involved	Name of nonc	nantable exempt organization	Description of transfers, transactions, and a	nanng am	angem	ents
					<u> </u>			
								
	\dashv		<u> </u>					
	-+							
_	-			· · · · · · · · · · · · · · · · · · ·				
							•	
					<u> </u>			
	desc	ribed in section 50		other than section 501(c)(3)) or	ne or more tax-exempt organizations in section 527? ▶	☐ Yes	s [] No
		(a)		(b)	(c)	.1-		
		Name of organiz	zauon	Type of organization	Description of relationsh	пр		
		·						
								
					<u> </u>			
					 			
					 			
					 			
		 		-				
		 -						

Adoption Option Committee, Inc. 41-1444119

Statement 1
Form 990, Part III - Organization's Primary Exempt Purpose

Aid to individuals who place their children for adoption.

Statement 2
Form 990, Part III, Line a – Statement of Program Service Accomplishments

Financial aid to individuals who choose to place their child for adoption, for specific needs; such as job search expenses, medical expenses and rent. Also educational support, telephone counseling, and publishing educational brochures.

Form 8868 (Rev. December 2004) 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

 If you ar 	e filing for an Automatic 3-Month Extension, complete only Part I and check this box of filing for an Additional (not automatic) 3-Month Extension, complete only Part II (opplete Part II unless you have already been granted an automatic 3-month extension on a part Automatic 3-Month Extension of Time—Only submit original (no copies needs)	n page 2 of this form). reviously filed Form 8868.				
Form 990-	F corporations requesting an automatic 6-month extension—check this box and compl	ete Part I only ▶ □				
All other co	prporations (including Form 990-C filers) must use Form 7004 to request an extension of ps, REMICs, and trusts must use Form 8736 to request an extension of time to file Form	time to file income tax returns.				
returns not (not autom	Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extend below (6 months for corporate Form 990-T filers). However, you cannot file it electronatic) 3-month extension, instead you must submit the fully completed signed page 2 (the electronic filing of this form, visit www.irs.gov/efile.	ically if you want the additional				
Type or	Type or Name of Exempt Organization Employer id					
print	Adoption Option Committee, Inc.	41-1444119				
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 24132					
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Minneapolis, MN 55424-0132					
Check typ	e of return to be filed (file a separate application for each return):					
☑ Form 9		☐ Form 4720				
☐ Form 9	<u> </u>	☐ Form 5227				
☐ Form 9		☐ Form 6069				
Form 9		☐ Form 8870				
د ۱۰۱۱۱۱ ک	90-71 🗀 101111 1041-7	LJ FOIII 6670				
Telephor If the or If this is Is for the	e No. > 612-397-4056 FAX No. > 612-692-4056 ganization does not have an office or place of business in the United States, check this for a Group Return, enter the organization's four digit Group Exemption Number (GEI whole group, check this box >	box ▶ □				
to file ▶ □	est an automatic 3-month (6-months for a Form 990-T corporation) extension of time un the exempt organization return for the organization named above. The extension is for the calendar year 20 or tax year beginningApril 1, 20 04 and endingMarc.	organization's return for:				
2 If this	tax year is for less than 12 months, check reason: Initial return Final return	☐ Change in accounting period				
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative ta fundable credits. See instructions					
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated tag. Include any prior year overpayment allowed as a credit					
with instru	nce Due. Subtract line 3b from line 3a. Include your payment with this form, or, if require FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Syctions	stem). See ····· \$ _ None				
	you are going to make an electronic fund withdrawal with this Form 8868, see Form 84 nt instructions.					
For Privacy	Act and Paperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev 12-2004)				