Department of the Treasury

Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

For the 2006 calendar year, or tax year beginning APRIL 1 , 2006, and ending MARCH , 20 07 D Employer identification number Please C Name of organization B Check if applicable use IRS ADOPTION OPTION COMMITTEE, 41-1444119 TNC Address change print or E Telephone number Number and street (or P O box if mail is not delivered to street address) Name change type P.O. BOX 24132 952-469-1145 Initial return Specific City or town, state or country, and ZIP + 4 F Accounting method: X Cash Accrual Final return instruc-MINNEAPOLIS, MN 55424 tions Other (specify) Amended return H and I are not applicable to section 527 organizations • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable Application pending H(a) Is this a group return for affiliates? Yes X No trusts must attach a completed Schedule A (Form 990 or 990-EZ). **H(b)** If "Yes," enter number of affiliates  $\triangleright N/A$ G Website: ▶www.adoption-isit4u.aoci.org H(c) Are all affiliates included? Yes No J Organization type (check only one) ▶ 🔯 501(c) ( ) ◀ (insert no ) 🔲 4947(a)(1) or 🔲 527 (If "No," attach a list. See instructions ) H(d) Is this a separate return filed by an Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization and its gross organization covered by a group ruling? 

Yes 

No receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return Group Exemption Number ▶ Check ▶ X if the organization is not required 40,265 Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ to attach Sch. B (Form 990, 990-EZ, or 990-PF). Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.) Part I Contributions, gifts, grants, and similar amounts received 1a a Contributions to donor advised funds 35,481 1b **b** Direct public support (not included on line 1a) 1c c Indirect public support (not included on line 1a) . . . 1d d Government contributions (grants) (not included on line 1a) 35,481 1e Total (add lines 1a through 1d) (cash \$ 35,481 noncash \$ 2 Program service revenue including government fees and contracts (from Part VII, line 93) 2 3 3 Membership dues and assessments . 4 4 Interest on savings and temporary cash investments 5 5 Dividends and interest from securities 6a 6a Gross rents Less rental expense CEIVED SCANNED NOV 09 6b 0 6c Net rental income or (loss). Subtract line 6b from line 6a Other investment income toellowe 7 (B) Other (A) Securities Gross amount from sales of assets other 8a than inventory Less cost drothe Oast and S 8b 0 1 8c 0 Gain or (loss) (attach schedule) 0 b8 Net gain or (loss) Combine line 8c, columns (A) and (B) . . . . . . Special events and activities (attach schedule) If any amount is from gaming, check here Gross revenue (not including \$ **b** Less: direct expenses other than fundraising expenses 0 9c c Net income or (loss) from special events. Subtract line 9b from line 9a . | 10a Gross sales of inventory, less returns and allowances . . . Less. cost of goods sold . . . . . . . . . . . . . 0 10c С Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a 0 11 11 Other revenue (from Part VII, line 103) 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11. 12 40,265 46,722 13 13 Program services (from line 44, column (B)) 14 743 Management and general (from line 44, column (C)) 14 2.055 15 Fundraising (from line 44, column (D)) 15 16 16 Payments to affiliates (attach schedule) . . . 17 Total expenses. Add lines 16 and 44, column (A) 17 49,520 18 (9,255)18 Excess or (deficit) for the year. Subtract line 17 from line 12 19 113,350 19 Net assets or fund balances at beginning of year (from line 73, column (A)). 20 Other changes in net assets or fund balances (attach explanation). 20 Net 104,095 Net assets or fund balances at end of year Combine lines 18, 19, and 20

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

Form 990 (2006)

	Functional Expenses organizations and s  Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	ection 4	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$	22a	0			
22b	Other grants and allocations (attach schedule) (cash \$)					
	If this amount includes foreign grants, check here	22b	0			
23	Specific assistance to individuals (attach schedule)	23	0		The state of the s	
24	Benefits paid to or for members (attach schedule)	24	0			
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a	0			
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b	0			
С	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c	0			
26	Salaries and wages of employees not included on lines 25a, b, and c	26	0			
27	Pension plan contributions not included on lines 25a, b, and c	27	0		·	
28	Employee benefits not included on lines 25a - 27	28	0			
29	Payroll taxes	29	0		· · · · · · · · · · · · · · · · · · ·	
30	Professional fundraising fees	30	0			
31	Accounting fees	31	0			
32	Legal fees	32	0	1 2/1		
33	Supplies	33	1,241	1,241		
34	Telephone	34	943	426		517
35	Postage and shipping	35	0	420		317
36	Occupancy	36	0			
37	Equipment rental and maintenance	38	3,659	2,121		1,538
38	Printing and publications	39	0	2/121		1,000
39 40	Travel	40	0			
41	Interest	41	0			
42	Depreciation, depletion, etc. (attach schedule)	42	0			
43 a	Other expenses not covered above (itemize).  EDUCATIONAL MATERIAL	43a	18,363	18,363		
b	GRANT EXPENSE	43b	23,194	23,194		
C	INTERNET	43c	0	0		
d	CONSULTING	43d	1,485	742	743	
е	MISCELLANEOUS	43e	191	191		
f		43f	0			
g		43g	0	<del></del>		
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	49,520	46,722	743	2,055
Are a	Costs. Check ► ☐ If you are following SOP my joint costs from a combined educational campaign s," enter (I) the aggregate amount of these joint costs amount allocated to Management and general \$	98-2 and fur	, (ii) the		to Program service	➤ ☐ Yes ☒ No

Part III	Statement	of Program	Sarvica	Accomplishments	(See th	e instructions )
	Julioni	Oi i i Ogiaini	OCI VICE	Accomplishing		0 11131140110113.7

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose?   SEE STATEMENT ATTACHED  All organizations must describe their exempt purpose achievements in a clear and concise manner. State the num of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to other	(4) (4) orgs and 4947(a)(1)
a SEE STATEMENT ATTACHED	_
	-
	_
	,,,,,,,
(Grants and allocations \$ NONE) If this amount includes foreign grants, check here ▶	□ 46,722
b	-
	-
	_
	-
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶	
c	_
•	-
	_
	-
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶	
d	_
	-
	_
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶	
e Other program services (attach schedule)	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► f Total of Program Service Expenses (should equal line 44, column (B), Program services)	□  ▶ 46,722

Form 990 (2006)

Pa	irt IV	Balance Sheets (See the instructions	)			
N	lote:	Where required, attached schedules and amounts column should be for end-of-year amounts only	within the description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing		16,470	45	12,480
	46	Savings and temporary cash investments .		96,880	46	91,615
		, ,				
	47a	Accounts receivable	47a		· .	
	ь	Less allowance for doubtful accounts .	47b		47c	0
	48a	Pledges receivable	48a			
	b	Less allowance for doubtful accounts .	48b		48c	0
	49	Grants receivable		· · · · · · · · · · · · · · · · · · ·	49	
	50a	Receivables from current and former officers	, directors, trustees, and			
		key employees (attach schedule)			50a	
	b	Receivables from other disqualified persons (a	as defined under section			
		4958(f)(1)) and persons described in section 4958	8(c)(3)(B) (attach schedule)		50b	
_	51a	Other notes and loans receivable (attach				
ets		schedule)	51a			0
Assets	_	Less: allowance for doubtful accounts	51b		51c	0
1	52	Inventories for sale or use			52	
	53				53 54a	
		Investments—publicly-traded securities			54a	
		Investments—other securities (attach schedu	le) ▶ ☐ Cost ☐ FMV		340	
	55a	Investments—land, buildings, and	55a		1 1	
		equipment basis	334			
	þ	Less. accumulated depreciation (attach	55b		55c	0
	56	schedule)			56	
		Land, buildings, and equipment: basis	57a	<del> </del>		
		Less. accumulated depreciation (attach			1	
		schedule)	57b		57c	0
	58	Other assets, including program-related investigation	stments			
		(describe ►	_ ) [		58	
	59	Total assets (must equal line 74) Add lines	45 through 58	113,350	59	104,095
	60	Accounts payable and accrued expenses			60	
	61	Grants payable			61	
	62	Deferred revenue			62	
ies	63	Loans from officers, directors, trustees, and	key employees (attach			
Liabilitie		schedule)			63	
<u>a</u>	4	Tax-exempt bond liabilities (attach schedule)		<del></del>	64a	
_		Mortgages and other notes payable (attach s	schedule)		64b	
	65	Other liabilities (describe	······································		05	
	66	Total liabilities. Add lines 60 through 65 .		0	66	0
		anizations that follow SFAS 117, check here ▶			00	
	l	67 through 69 and lines 73 and 74.	and complete lines			
ğ	67	Unrestricted			67	
lan	68	Temporarily restricted			68	
Ва	69				69	
<b>Fund Balances</b>	Oras	anizations that do not follow SFAS 117, check	J			
Fu		complete lines 70 through 74				
ŏ	70	Capital stock, trust principal, or current fund	s	· · · · · · · · · · · · · · · · · · ·	70	<del></del>
Net Assets or	71	Paid-in or capital surplus, or land, building, a		113,350	71	104,095
58	72	Retained earnings, endowment, accumulated			72	
¥.	73	Total net assets or fund balances. Add line				
Š		70 through 72. (Column (A) must equal line		110 050	<u></u>	104 005
	74	equal line 21)		113,350	73	104,095
	, • •	rotal navinties and het assets/fully balance	ש. אשע וווופט טט מווע וט	113,350	74	104,095

Pai	t IV-A Reconciliation of Revenue per Aud instructions )	lited Financial Statem	ents With Rev	enue pe	r Ret	urn (	See the
a b	Total revenue, gains, and other support per audit Amounts included on line a but not on Part I, line				а	-	N/A
1	Net unrealized gains on investments		b1				
2	Donated services and use of facilities		b2		]		
3	Recoveries of prior year grants		b3		]		
4	Other (specify)		b4				
	Add lines <b>b1</b> through <b>b4</b>				b		0
С	-				С		0
d	Amounts included on Part I, line 12, but not on li						
1	Investment expenses not included on Part I, line	6b	d1		<u> </u>		
2	Other (specify)				,		
			d2				
	Add lines d1 and d2				d		0
e Pat	Total revenue (Part I, line 12) Add lines c and d	dited Financial Stater	nents With Ex	<u></u> ▶ penses	per R	eturr	0
а	Total expenses and losses per audited financial s				а		N/A
b	Amounts included on line a but not on Part I, line						
1	Donated services and use of facilities		b1				
2	Prior year adjustments reported on Part I, line 20		b2				
3	Losses reported on Part I, line 20		b3		]		
4	Other (specify)				.		
			b4_				0
	Add lines <b>b1</b> through <b>b4</b>				b		0
C .					С		
d	Amounts included on Part I, line 17, but not on I		d1				
1	Investment expenses not included on Part I, line		4.		†		
2	Other (specify)		d2				
	Add lines d1 and d2				d		0
e Do	Total expenses (Part I, line 17) Add lines c and t V-A Current Officers, Directors, Trustees				е		0
ΓŒI	t V-A Current Officers, Directors, Trustees or key employee at any time during the ye						director, trustee,
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	benefit pla		rreď	(E) Expense account and other allowances
		_	NONE	İ	NO		NONE
<u>SE</u>	E SCHEDULE ATTACHED		NONE	<del> </del> _	NO	NE	NONE
—		-		}			
		†					
							· ·
				<del> </del>			
		1					l

Par	Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)								
75a	Enter the total number of officers, directors, and tra	ustees permitted to vo	te on organizatio	n business at board 12					
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)								
d	c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."								
Par	Former Officers, Directors, Trustees, and officer, director, trustee, or key employee reperson below and enter the amount of comp	ceived compensation o	r other benefits (de	escribed below) during	the y	ear, lis	ormer st that		
	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	accou	Expen int and owance	other		
NON	E		NONE	NONE		No	ONE_		
Par	Other Information (Coo the instruction					Yes	No.		
76 77	Did the organization make a change in its activities	es or methods of con			76 77	43	X		
	If "Yes," attach a conformed copy of the changes Did the organization have unrelated business gro this return?	s. ss income of \$1,000	or more during t	he year covered by	78a		X		
b 79	If "Yes," has it filed a tax return on Form 990-T for Was there a liquidation, dissolution, termination, of	or this year?			78b	2	N/A		
	a statement				79	1	X		
Jua	common membership, governing bodies, truste organization?	es, officers, etc., to	any other exe	mpt or nonexempt	80a		X		
	If "Yes," enter the name of the organization ► N	and check whether it		•	,	1 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
81a b	Enter direct and indirect political expenditures. (S Did the organization file Form 1120-POL for this	ee line 81 instructions year?	s)[ <u>81a]</u> 	<u> </u>	81b	<u>-57.86</u>	X		

Pai	t VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II.  (See instructions in Part III.)		ا روز د موروز ا	
83a	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 <i>quid pro quo</i> contributions?	83b	X	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Χ
	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u></u>		
	gifts were not tax deductible?	84b		A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a		Α
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/	A Use and
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	1900	3	2
	received a waiver for proxy tax owed for the prior year.			
	Dues, assessments, and similar amounts from members	- <b>1</b>		1
	Section 102(e) lobbying and political experiorates	· -		
_	99.99.0	3		
t a	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85g	N/	A
_		100	· \$32	
n	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/	A
86	501(c)(7) orgs Enter: a Initiation fees and capital contributions included on line 12.   86a   N/A			2
b	Gross receipts, included on line 12, for public use of club facilities	1	-3-8	
87	501(c)(12) orgs Enter. a Gross income from members or shareholders 87a N/A	100		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88a	ا سرا	養 X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		X
89a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under: section 4911 ► NONE; section 4912 ► NONE, section 4955 ► NONE	1.0	1 m	
b	501(c)(3) and $501(c)(4)$ orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
C	Enter Amount of tax imposed on the organization managers or disqualified		الح.	验证
	persons during the year under sections 4912, 4955, and 4958	2	4 5	-
	Enter: Amount of tax on line 89c, above, reimbursed by the organization .   NONE		717 217	<b>建</b>
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter	89e		X
	transaction?	89f	<b></b>	X
				£ 3
9	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	N/	Ā
90a	List the states with which a copy of this return is filed ▶ MINNESOTA			
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions)			
91a	The books are in care of ▶ PHYLLIS ELLEFSON Telephone no. ▶ 952-46	9-1	<u> 145</u>	
	Located at ► 10289 WOODHILL BLVD., LAKEVILLE,MN ZIP + 4 ► 55044			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			<del></del>
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	<u> </u>	Yes	No
	account)?	91b		X
	If "Yes," enter the name of the foreign country ► N/A			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	<u> </u>	3	夢夢

	or the organization s ca	cript parpos	cs (other than by pi	Oviding i	ands for saon purposcoj.		
93A	BROCHURE REVE	NUE IS	COLLECTED	FROM	REIMBURSEMENT	OF EXPENS	SES
	INCURRED TO P	REPARE	BROCHURE.				
	·						
				<del>.</del>			
Part IX	Information Regardi	ing Taxable	Subsidiaries an	d Disreç	jarded Entities (See the	instructions.)	
(A) Name, address, and EIN of corporation, partnership, or disregarded entity		(B) Percentage of ownership interest		(C) Nature of activities	(D) Total income	(E) End-of-year assets	
				%			

	Name, address, and EIN of corporation, partnership, or disregarded entity	Percentage of ownership interest	Nature of activities	Total income	End-of-year assets
		%			
N/A		%			
		%			
		%			
Part 2	Information Regarding Transfers	Associated with Perso	nal Benefit Contracts (Se	e the instructions )	

(a)	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	⊠ No
(b)	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	☐ Yes	No
Note	e: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)		

Form 990 (2006)

Par	Information Regarding us a controlling organization			. Complete only	if the organi	zation
106	Did the reporting organization methe Code? If "Yes," complete the	ake any transfers to a co	ntrolled entity as defined	in section 512(b)	13) of	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description o transfer	f	(D) mount of tran	<u> </u>
а	N/A	N/A	N/A			N/A
b						
С						
	Totals	-, -,				0
107	Did the reporting organization re 512(b)(13) of the Code? If "Yes,"				Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	f A	(D) mount of tran	sfer
а	N/A	N/A	N/A			N/A
b		-				
С		-				
	Totals					0
108	Did the organization have a bind rents, royalties, and annuities de			covering the inter	est,	s No
Plea Sign Here	Signature of officer	plete Declaration of preparer (other				
Paid Prepar	Preparer's signature Firm's name (or yours	D	ate Check self- employ	ed ▶□	SN or PTIN (See Ge	en Inst X)
Use O	inly if self-employed), address, and ZIP + 4			Phone no ►	Form 99	0 (2006)

#### SCHEDULE A (Form 990 or 990-EZ)

#### **Organization Exempt Under Section 501(c)(3)**

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

or 4947(a)(1) Nonexempt Charitable Trust
Supplementary Information—(See separate instructions.)

2006

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number 41-1444119 ADOPTION OPTION COMMITTEE, INC. Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 2 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (e) Expense (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation mployee benefit plans & account and other than \$50,000 per week devoted to position deferred compensation allowances NONE Total number of other employees paid over \$50,000 中心學 阿里姆斯 公司 Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of other contractors receiving over \$50,000 for other services . . . . .

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2006

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

Pa	rt I\	Reason for Non-Private	Foundation S	Status (See pages 4	through 7 o	f the instruct	ions.)		
cer	tify	that the organization is not a privat	te foundation bec	ause it is (Please check	only ONE ap	plicable box)			
5		A church, convention of churches	, or association of	of churches Section 170	0(b)(1)(A)(i).				
6		A school Section 170(b)(1)(A)(ii). (Also complete Part V.)							
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).							
8		A federal, state, or local government	ent or governmen	ital unit Section 170(b)(	1)(A)(v)				
9		A medical research organization o and state ▶	perated in conjun	ction with a hospital Se	ection 170(b)(1)	(A)(III) Enter th	e hospital's name, city		
10		An organization operated for the be (Also complete the <b>Support Sched</b>	-	or university owned or op	perated by a go	overnmental un	it. Section 170(b)(1)(A)(iv)		
11a	$\boxtimes$	An organization that normally recei			a governmental	unit or from th	e general public. Sectior		
11b		A community trust. Section 170(b)	)(1)(A)(vi) (Also co	emplete the Support Sc	<b>hedule</b> in Part	IV-A)			
12		An organization that normally receifrom activities related to its charitafrom gross investment income an organization after June 30, 1975.	able, etc., function ad unrelated busii	ns—subject to certain ex ness taxable income (les	ceptions, and ss section 511	(2) no more the tax) from bus	an 331/3% of its support inesses acquired by the		
13		An organization that is not control requirements of section 509(a)(3)			f supporting o	rganizatıon:			
		☐ Type II ☐ Type II	☐Type I	II-Functionally Integrate	ed [	]Type III-Othe	er		
		Provide the following info	rmation about th	e supported organizat	ions. (See pag	e 7 of the inst	ructions )		
(a) Name(s) of supported organization(s)		* *	number (EIN) organization (described in lines 5 through 12		(d)  Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support		
			_		Yes	No			
<b>T</b> - 4									
Tota	1.	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · · · · · · · · · · · · · · · · · ·	▶			
14		An organization organized and op	erated to test for	public safety. Section 5	509(a)(4). (See	page 7 of the	nstructions.)		

Schedule A (Form 990 or 990-EZ) 2006

	: You may use the worksheet in the instruction ndar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 200		(e) Total
15	Gifts, grants, and contributions received. (Do	, , , , , , , , , , , , , , , , , , , ,	<u> </u>				
	not include unusual grants. See line 28.)	28,815	31,591	22,812	16,8	78	100,096
16	Membership fees received						0
17	Gross receipts from admissions, merchandise						
	sold or services performed, or furnishing of facilities in any activity that is related to the						
	organization's charitable, etc., purpose	178	261	413	1	00_	952
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.	4,097	988	1,161		89	6,335
19	Net income from unrelated business					1	_
	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	33,090	32,840	24,386	17,0		107,383
24	Line 23 minus line 17	32,912	32,579	23,973	16,9		106,431
25	Enter 1% of line 23	331	328	244	<u> </u>	71	N 5 35 4
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colum	n (e), line 24	▶	26a	2,129
b	Prepare a list for your records to show the na governmental unit or publicly supported organ	ization) whose tota	al gifts for 2002 th	rough 2005 exce	eded the		20.010
	amount shown in line 26a. Do not file this list v	*			iounts 🕨	26b	30,819 106,431
C	Total support for section 509(a)(1) test: Enter	•			▶	26c	100,431
ď	Add Amounts from column (e) for lines: 18	6,335 0	19	_ <u>U</u>		26d	37,154
•	22 Public support (line 26c minus line 26d total)		26b <u>30,8</u>	<u> 19</u>		26e	69,277
f	Public support percentage (line 26e (numer	ator) divided by	ine 26c (denomi			26f	65.09 %
27	Organizations described on line 12: a F person," prepare a list for your records to show Do not file this list with your return. Enter the	or amounts include the name of, and	ded in lines 15, 1 total amounts rec	6, and 17 that verience of the following the	vere receive ar from, each	d fro	m a "disqualified
b	For any amount included in line 17 that was recession 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:	year, that was mo 5 through 11b, as to 1 the larger amoun	re than the larger of well as individuals.) t described in (1) of	of (1) the amount ) Do not file this li or (2), enter the s	on line 25 fo st with your um of these	r the y <b>retur</b> i	ear or (2) \$5,000. n.After computing
	(2005)(2004)		_ (2003)		_ (2002) _		
С	Add Amounts from column (e) for lines 15		16	 · · · ·	<b>.</b>	27c	
d	Add Line 27a total	and line 27b tota				27d	
е	Public support (line 27c total minus line 27d to					27e	
f	Total support for section 509(a)(2) test Enter	amount from line	23, column (e) .	. ▶ 27f			, kuma
g	Public support percentage (line 27e (numer	rator) divided by	line 27f (denomi	inator))		27g	%
<u>h</u>	Investment income percentage (line 18, col	umn (e) (numera	tor) divided by li	ne 27f (denomir	nator)) ▶	27 <u>h</u>	%
28	Unusual Grants: For an organization describ prepare a list for your records to show, for ed description of the nature of the grant. Do not	ach year, the nam	e of the contribu	tor, the date and	l amount of	the g	rant, and a brid

rt V	Private School Questionnaire (See page 9 of the instructions.)  (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
	es the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	er governing instrument, or in a resolution of its governing body?	29	2 °= 2 °	· 3
bro	es the organization include a statement of its racially nondiscriminatory policy toward students in all its chures, catalogues, and other written communications with the public dealing with student admissions, grams, and scholarships?	30		
•	s the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	: , ,		- 1
the	period of solicitation for students, or during the registration period if it has no solicitation program, in a way t makes the policy known to all parts of the general community it serves?	31	K	الخ عدادة عدادة
If "	Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement)			
Doe	es the organization maintain the following:	1		
	cords indicating the racial composition of the student body, faculty, and administrative staff?	32a		<u> </u>
Red	cords documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	32b		
Cop	pies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	n student admissions, programs, and scholarships?	32c	-	<u> </u>
Cop	pies of all material used by the organization or on its behalf to solicit contributions?			
If yo	ou answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		**		
DOE	es the organization discriminate by race in any way with respect to	7.4	1	
Stu	dents' rights or privileges?	33a		
Adr	missions policies?	33b		
Ēm	ployment of faculty or administrative staff?	33c		_
Sch	nolarships or other financial assistance?	33d		
Edu	ucational policies?	33e		
		33f		
Use	e of facilities?	331		
Ath	letic programs?	33g		
Oth	ner extracurricular activities?	33h	2.5	ju a
If ye	ou answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement)			
		3		
Doe	es the organization receive any financial aid or assistance from a governmental agency?	34a		
Lac	s the organization's right to such aid ever been revoked or suspended?	34b		
	s the organization's right to such aid ever been revoked or suspended?	1	***	30 TE
,	· · · · · · · · · · · · · · · · · · ·	1.3	12.	

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation . . .

35

Pa	rt VI-A Lobbying Expenditures by E (To be completed ONLY by an					instruction	ns.)
Che	ck ▶ a ☐ if the organization belongs to an affilia	<del></del>				"limited contr	ol" provisions apply
	Limits on Lobbyi (The term "expenditures" mea	•				(a) Affiliated group totals	To be completed for all electing organizations
	<del>-</del>	<del></del>	<del></del>		36		
36 27	Total labburg expenditures to influence public	–	37				
37 38	Total lobbying expenditures to influence a legis Total lobbying expenditures (add lines 36 and 3	–	38				
39	Other exempt purpose expenditures	39		<del></del>			
40	Total exempt purpose expenditures (add lines)	$\cdots$	40	<del></del>			
41	Lobbying nontaxable amount Enter the amount	· · ·	ti e	· Par	The state of the s		
71		obbying nontaxa	_	_	1		
		of the amount on		_	. 7	· · · · · · · · · · · · · · · · · · ·	
		000 plus 15% of the		- L E			
		000 plus 10% of the			41		ALC ALIGNMAN
		000 plus 5% of the			,		TO THE REAL PROPERTY.
		0,000		1 1			
42	Grassroots nontaxable amount (enter 25% of li				42		
43	Subtract line 42 from line 36 Enter -0- if line 4	•			43		
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than lin	ne 38	L	44		
				1.			
	Caution: If there is an amount on either line 43	3 or line 44, you r	nust file Form 4	720	A TO	<b>《大學學》</b>	<b>《大学教育》</b>
	(Some organizations that made a section See the instructions for	or lines 45 throug		3 of the instru	ctions		····
	Calendar year (or	(a)	(h)	(c)	<del></del>	(d)	(0)
	·	(a)	(b)	(c)	l l	(d)	(e)
	fiscal year beginning in) ▶	2006	2005	2004	ľ	2003	Total
	fiscal year beginning in) ▶	2006	2005	2004		2003	Total
45	fiscal year beginning in) ►  Lobbying nontaxable amount	2006	2005	2004		2003	Total
45 46		2006	2005	2004			Total
	Lobbying nontaxable amount	2006	2005	2004		2003	Total
46	Lobbying nontaxable amount	2006	2005	2004		2003	Total
46	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures	2006	2005	2004		2003	Total
46 47 48 49	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount .  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelection	cting Public C	harities			. ,	
46 47 48 49	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount .  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures	cting Public C	harities		See p	. ,	
46 47 48 49 50 Pa	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount .  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelection	cting Public C	harities not complete	Part VI-A) (S	—— <u></u>	page 13 of	the instructions.)
46 47 48 49 50 Pa	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount .  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  It VI-B Lobbying Activity by Nonelect (For reporting only by organization)	cting Public C	harities not complete ate or local legis	Part VI-A) (Sation, includi	—— <u></u>	age 13 of	the instructions.)
46 47 48 49 50 Pa	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures	cting Public C tions that did i	harities not complete ate or local legis um, through the	Part VI-A) (Slation, including use of	ng any	page 13 of	the instructions.)
46 47 48 49 50 Pa	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  It VI-B Lobbying Activity by Noneled (For reporting only by organizating the year, did the organization attempt to influence public opinion on a legislative model of the vicinity of the	cting Public Cotions that did intercentational, standarder or referending.	harities not complete ate or local legis um, through the	Part VI-A) (Salation, including use of	ng any	page 13 of	the instructions.)
46 47 48 49 50 Pa Duri atte a b c	Lobbying nontaxable amount	cting Public C tions that did intercent or referend the continuous	harities not complete ate or local legis um, through the	Part VI-A) (Salation, including use of	ng any	page 13 of	the instructions.)
46 47 48 49 50 Pa	Lobbying nontaxable amount	cting Public C tions that did intercental intercent	harities not complete ate or local fegis um, through the	Part VI-A) (Salation, including use of c through h.)	ng any	age 13 of	the instructions.)
46 47 48 49 50 Pa Durn atte a b c c d e	Lobbying nontaxable amount	cting Public C tions that did intercentational, standard or reference on in expenses reference on in expenses reference on in expenses reference on in expenses reference on in expense reference on i	harities not complete ate or local fegis um, through the	Part VI-A) (Sation, including use of	ng any	age 13 of	the instructions.)
46 47 48 49 50 Pa Durn atte a b c d d e f	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount	cting Public C tions that did intercentational, standard or referend on in expenses references on in expenses references on the control of th	harities not complete ate or local legis um, through the	Part VI-A) (Salation, including use of	ng any	rage 13 of Y Yes N	the instructions.)
46 47 48 49 50 Pa Durn atte a b b c c d e f g	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures	cting Public Cotions that did intercent national, standarder or referend on in expenses remains and the cotion of	harities not complete ate or local legis um, through the eported on lines or a legislative	Part VI-A) (Salation, including use of	ng any	rage 13 of Y Yes N	the instructions.)
46 47 48 49 50 Pa Durn atte a b c d d e f	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount	cting Public Cotions that did intercent national, standarder or referend on in expenses remains and the cotion of	charities not complete ate or local legis um, through the eported on lines or a legislative res, or any othe	Part VI-A) (Salation, including use of	ng any	rage 13 of Y Yes N	the instructions.)  o Amount

Par	t VII			ransfers To and Transa e page 13 of the instructio	ictions and Relationships Wins.)	th Nonc	haritable	
51		the reporting organ	nization directly or	indirectly engage in any of the	following with any other organization on 527, relating to political organization		d in section	
а				to a noncharitable exempt org.			Yes No	
4						51a(i)	X_	
						a(ii)	Х	
b		r transactions			. , , , , ,			
_			es of assets with a	noncharitable exempt organiza	ition	b(i)	x	
		_		table exempt organization .		b(ii)	Х	
				ner assets		b(iii)	X	
						b(iv)	Х	
						b(v)	х	
				ship or fundraising solicitations		b(vi)	x	
С	• •			sts, other assets, or paid emplo			x	
d	good	ls, other assets, or	r services given by	the reporting organization. If the	e Column (b) should always show the fine organization received less than failed, other assets, or services received:	air market r market v	value of the value in any	
(a	ı)	(b)		(c)	(d)			
Line	no	Amount involved	Name of nonc	haritable exempt organization	Description of transfers, transactions, and	sharing arra	angements	
						<del></del>		
			<del></del>					
				·				
	$\longrightarrow$							
		_ <del>_</del>						
					<del></del>			
					<del></del>			
					<del> </del>	<del></del>		
		<del></del>						
	desc	ribed in section 50 es," complete the		other than section 501(c)(3)) or	ne or more tax-exempt organizations in section 527?		i No	
		(a) Name of organiz		(c) Description of relationship				
		<del> </del>						
		<del></del>						
			***************************************					
					<del>                                     </del>			
	_				<del> </del>			
		<del></del>	<del></del>	<u> </u>	<u> </u>			
					<del> </del>		<del></del>	

## Adoption Option Committee, Inc. 41-1444119

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

Adoption Option Committee, Inc. provides aid to individuals who place their children for adoption.

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

Adoption Option Committee, Inc. has provided financial aid to individuals who choose to place their child for adoption, for specific needs such as job search expenses, medical expenses and rent. During the period April 1, 2006 through March 31, 2007, assistance in the amount of \$23,194 was directly provided for such purposes to individuals who placed a child for adoption. The organization also assists in providing educational support, telephone counseling, and publishing educational brochures.

## Form 8868

(Rev April 2007)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return

OMB No 1545-1709

	* .			
● If you a  Do not co	re filing for an Automatic 3-Month Extension, complete only Part I and check this box re filing for an Additional (not automatic) 3-Month Extension, complete only Part II (or implete Part II unless you have already been granted an automatic 3-month extension on a property of the part of the pa	n page 2 o eviously file	f this form)	▶ 🏻
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies need	iea).		
	01(c) corporations required to file Form 990-T and requesting an automatic 6-month extens Part I only	ion—check	this box and	j ▶ □
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 e income tax returns	004 to requ	iest an exten	sion of
one of the 8868 elect returns, or	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month autoreturns noted below (6 months for section 501(c) corporations required to file Form 990-T) I ronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Form a composite or consolidated Form 990-T Instead, you must submit the fully completed and smore details on the electronic filing of this form, visit www irs gov/efile and click on e-file form.	However, y s 990-BL, 6 signed page	ou cannot file 6069, or 8870 e 2 (Part II) of	Form group Form
Type or print		Employer i	dentification r	number
File by the due date for filing your	Number, street, and room or suite no If a PO 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  Form  Form  Form  Form	990-BL		Form 4720 Form 5227 Form 6069 Form 8870	
Telepho If the or If this is	ne No ► 612-397-4056  ganization does not have an office or place of business in the United States, check this b for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _ ole group, check this box  The formula of the group, check this box the names and EINs of all members the extension will cover		 	
until for th ► □	uest an automatic 3-month (6 months for a section 501(c) corporation required to file Find November 15, 2007, to file the exempt organization return for the organization native organization's return for calendar year 20 or April 1, 2006, and ending Mar stax year beginning April 1 Initial return Final return	amed abov	e The exten	)7
				penou
less	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, any nonrefundable credits. See instructions	3a_	\$	
	s application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax nents made. Include any prior year overpayment allowed as a credit.	3b	\$	
depo	nce Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, sit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymentem) See instructions	3c	\$	
	f you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453 nt instructions		<u> </u>	)

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

Form **8868** (Rev 4-2007)