

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)

2006

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2006 calendar year, or tax year beginning 7/01, 2006, and ending 6/30, 2007

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Open Adoption and Family Services, Inc. 5200 SW Macadam Avenue #250 Portland, OR 97239. D Employer Identification Number 93-0896522. E Telephone number. F Accounting method: Cash, Accrual, Other (specify).

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). H and I are not applicable to section 527 organizations. H (a) Is this a group return for affiliates? Yes No. H (b) If 'Yes,' enter number of affiliates. H (c) Are all affiliates included? Yes No. H (d) Is this a separate return filed by an organization covered by a group ruling? Yes No.

G Web site: www.openadopt.com

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

K Check here if the organization is not a 509(a)(3) supporting organization and its gross 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. I Group Exemption Number. M Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12. 1,129,193.

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

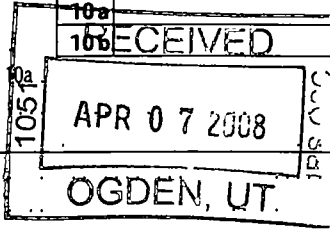
Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, Amount. Includes sections for Revenue (lines 1-12), Expenses (lines 13-17), and Assets (lines 18-21). Total revenue: 1,129,193. Total expenses: 1,124,354. Net assets at end of year: 736,680.

SCANNED APR 23 2008

REVENUE

EXPENSES

ASSETS



Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach sch) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b	Other grants and allocations (att sch) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25a	Compensation of current officers, directors, key employees, etc listed in Part V-A (attach sch)	77,408.	65,410.	8,902.	3,096.
25b	Compensation of former officers, directors, key employees, etc listed in Part V-B (attach sch)	0.	0.	0.	0.
25c	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)	0.	0.	0.	0.
26	Salaries and wages of employees not included on lines 25a, b, and c	554,547.	468,592.	63,773.	22,182.
27	Pension plan contributions not included on lines 25a, b, and c				
28	Employee benefits not included on lines 25a - 27	47,992.	40,553.	5,519.	1,920.
29	Payroll taxes	51,420.	43,450.	5,913.	2,057.
30	Professional fundraising fees				
31	Accounting fees	2,938.	2,483.	338.	117.
32	Legal fees	380.	321.	44.	15.
33	Supplies				
34	Telephone	26,640.	22,511.	3,063.	1,066.
35	Postage and shipping	12,724.	10,752.	1,463.	509.
36	Occupancy	66,598.	56,275.	7,659.	2,664.
37	Equipment rental and maintenance	9,987.	8,439.	1,149.	399.
38	Printing and publications	19,956.	16,863.	2,295.	798.
39	Travel	23,356.	19,736.	2,686.	934.
40	Conferences, conventions, and meetings				
41	Interest	2,767.	2,338.	318.	111.
42	Depreciation, depletion, etc (attach schedule)	9,328.	7,882.	1,073.	373.
43	Other expenses not covered above (itemize):				
43a	See Statement 1	218,313.	184,473.	25,106.	8,734.
43b					
43c					
43d					
43e					
43f					
43g					
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	1,124,354.	950,078.	129,301.	44,975.

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____.

Part III Statement of Program Service Accomplishments

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? Promotion of Mediated Adoption. All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a <u>Provided free counseling to pregnant women regarding adoption, placed children in adoptive homes and counseled prospective adoptive parents.</u> ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	950,078.
b ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	
c ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	
d ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	
e Other program services (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) <input type="checkbox"/>	950,078.

BAA

Part IV Balance Sheets (See the instructions.)

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

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash – non-interest-bearing	60,485.	45	114,557.
	46 Savings and temporary cash investments	384,201.	46	313,056.
	47a Accounts receivable	47a 48,097.		
	b Less: allowance for doubtful accounts	47b	35,209.	47c 48,097.
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b		48c
	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 (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		13,989.	53 18,947.
	54a Investments – publicly-traded securities	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		54a
	b Investments – other securities (attach sch)	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	170,227.	54b 211,202.
55a Investments – land, buildings, & equipment: basis	55a			
b Less accumulated depreciation (attach schedule)	55b		55c	
56 Investments – other (attach schedule)		30,926.	56	
57a Land, buildings, and equipment: basis	57a 198,410.			
b Less accumulated depreciation (attach schedule) Statement 2	57b 100,724.	99,662.	57c 97,686.	
58 Other assets, including program-related investments (describe See Statement 3)		6,522.	58 4,607.	
59 Total assets (must equal line 74) Add lines 45 through 58		801,221.	59 808,152.	
LIABILITIES	60 Accounts payable and accrued expenses	11,255.	60	16,774.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		16,156.	64b 11,771.
	65 Other liabilities (describe See Statement 4)		41,969.	65 42,927.
66 Total liabilities. Add lines 60 through 65		69,380.	66 71,472.	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		706,423.	67 736,680.
	68 Temporarily restricted		25,418.	68
	69 Permanently restricted			69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds			70
	71 Paid-in or capital surplus, or land, building, and equipment fund			71
	72 Retained earnings, endowment, accumulated income, or other funds			72
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		731,841.	73 736,680.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		801,221.	74 808,152.	

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 12:			
	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 b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 12, but not on line a :			
	1 Investment expenses not included on Part I, line 6b	d1		
	2 Other (specify): _____	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12). Add lines c and d		e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 17:			
	1 Donated services and use of facilities	b1		
	2 Prior year adjustments reported on Part I, line 20	b2		
	3 Losses reported on Part I, line 20	b3		
	4 Other (specify): _____	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 17, but not on line a :			
	1 Investment expenses not included on Part I, line 6b	d1		
	2 Other (specify): _____	d2		
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17). Add lines c and d		e	

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
See Statement 5		77,408.	0.	0.

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
82 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.)		
		N/A	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83 b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85 a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?		N/A
85 b	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 waiver for proxy tax owed for the prior year.		
85 c	Dues, assessments, and similar amounts from members		N/A
85 d	Section 162(e) lobbying and political expenditures		N/A
85 e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		N/A
85 f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		N/A
85 g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A
85 h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		N/A
86 a	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12		N/A
86 b	Gross receipts, included on line 12, for public use of club facilities		N/A
87 a	501(c)(12) organizations. Enter: a Gross income from members or shareholders		N/A
87 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX		X
88 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		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
89 b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction.		X
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
89 e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
89 f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
89 g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
90 a	List the states with which a copy of this return is filed <u>OR</u>		
90 b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)		17
91 a	The books are in care of <u>Open Adoption and Family Svcs</u> Telephone number <u>503-233-9660</u> Located at <u>5200 SW Macadam Ave, #250 Portland, OR,</u> ZIP + 4 <u>97239</u>		
91 b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

	Yes	No
91 c		X

c At any time during the calendar year, did the organization maintain an office outside of the United States?

If 'Yes,' enter the name of the foreign country .

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here

N/A

and enter the amount of tax-exempt interest received or accrued during the tax year

92 N/A

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Counseling & Studies					1,058,585.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			14	24,796.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property.					
98 Net rental income or (loss) from pers prop					
99 Other investment income			14	21,636.	
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue. a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E)).				46,432.	1,058,585.
105 Total (add line 104, columns (B), (D), and (E))					1,105,017.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93A	Prospective adoptive parents receive counseling and screening. Birth parents receive counseling both before and after placement. Fees are charged for home studies and supervision.

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

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

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

a Did the organization, during the year, receive any funds, directly or indirectly, 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: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity

Yes	No
	X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity

Yes	No
	X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	X

Please Sign Here

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

Signature of officer: Shan Herrin Date: 3/31/08

Executive Director

Paid Preparer's Use Only

Preparer's signature: Diana Chung Date: 3-22-08 Check if self-employed: Preparer's SSN or PTIN (See General Instruction W): P00001763

Firm's name (or yours if self-employed), address, and ZIP + 4: Schwindt & Co.
3407 SW Corbett Avenue
Portland, OR 97239

EIN: 93-1057961 Phone no: (503) 227-1165

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

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

Supplementary Information — (See separate instructions.)

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

OMB No 1545-0047

2006

Name of the organization

Open Adoption and Family Services, Inc.

Employer identification number

93-0896522

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
See Statement 6		50,084.	4,200.	0.
Total number of other employees paid over \$50,000		0		

Part II - A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See 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		0

Part II - B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See 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		0

Part III Statements About Activities (See instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>N/A</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
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)		X
b Did the organization have a section 403(b) annuity plan for its employees?	X	
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement		X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4f and 4g		X
b Did the organization make any taxable distributions under section 4966?		N/A
c Did the organization make a distribution to a donor, donor advisor, or related person?		N/A
d Enter the total number of donor advised funds owned at the end of the tax year ▶		N/A
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		N/A
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶		0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶		0.

Part IV Reason for Non-Private Foundation Status (See instructions.)

I certify that the organization is not a private foundation because it is. (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives **(1) more than 33-1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions — subject to certain exceptions, and **(2) no more than 33-1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization: ▶
 Type I Type II Type III-Functionally Integrated Type III-Other

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

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					0.

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

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

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

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	48,999.	21,571.	28,013.	15,469.	114,052.
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	1,170,249.	962,490.	888,515.	1,009,341.	4,030,595.
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	16,507.	10,945.	7,873.	5,830.	41,155.
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. See Stmt 7	4,645.	22,677.	23,438.	4,163.	54,923.
23 Total of lines 15 through 22	1,240,400.	1,017,683.	947,839.	1,034,803.	4,240,725.
24 Line 23 minus line 17	70,151.	55,193.	59,324.	25,462.	210,130.
25 Enter 1% of line 23	12,404.	10,177.	9,478.	10,348.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 **N/A**

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts

c Total support for section 509(a)(1) test Enter line 24, column (e).

d Add. Amounts from column (e) for lines: 18 _____ 19 _____
22 _____ 26b _____

e Public support (line 26c minus line 26d total).

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))**

26a	
26b	
26c	
26d	
26e	
26f	%

27 Organizations described on line 12:

a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year:
(2005) 3,550. (2004) 3,515. (2003) 2,065. (2002) 2,155.

b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:
(2005) 119,702. (2004) 206,285. (2003) 85,616. (2002) 139,755.

c Add. Amounts from column (e) for lines: 15 114,052. 16 _____
17 4,030,595. 20 _____ 21 _____

d Add Line 27a total 11,285. and line 27b total 551,358.

e Public support (line 27c total minus line 27d total)

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) **27f** 4,240,725.

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** **27g** 84.47 %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** **27h** 0.97 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

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

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? ..		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? ..		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement.) ----- ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

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

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations												
(The term 'expenditures' means amounts paid or incurred)															
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38	Total lobbying expenditures (add lines 36 and 37)	38													
39	Other exempt purpose expenditures	39													
40	Total exempt purpose expenditures (add lines 38 and 39)	40													
41	Lobbying nontaxable amount Enter the amount from the following table –														
<table border="0"> <tr> <td>If the amount on line 40 is –</td> <td>The lobbying nontaxable amount is –</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>		If the amount on line 40 is –	The lobbying nontaxable amount is –	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 40 is –	The lobbying nontaxable amount is –														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
42	Grassroots nontaxable amount (enter 25% of line 41)	42													
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43													
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44													
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.															

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots non-taxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See instructions.)

N/A

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

Yes	No	Amount

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

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

ASSET DEPRECIATION SHORT REPORT

Open Adoption & Family Services, Inc. Jun. 30, 2007

Sorted. ASSET A/C#

Method. 1-FEDERAL-Std Conv Applied

Range - 1500

Include All assets

Date Acq	Description	Meth/Life	Cost	Section 179	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: - EQUIPMENT								
05/30/86	Fully depreciated assets	SL/ 7 00	31,998 84	0 00	31,998 84	31,998.84	0 00	31,998 84
01/01/93	Filing Cabinet	SL/ 5 00	144 57	0 00	144 57	144 57	0.00	144.57
04/30/93	(4) Filing cabinets	SL/ 5 00	484 12	0.00	484.12	484 12	0.00	484 12
09/14/94	Used desk, chair, file cabinet	SL/ 5 00	225 00	0 00	225 00	225 00	0 00	225 00
05/01/95	Konbo Binder	SL/ 3 00	299 99	0 00	299 99	299 99	0 00	299 99
04/01/96 D	Dark green loveseat	SL/ 5 00	279.00	0 00	279 00	279 00	0 00	279 00
05/01/96	2 white loveseats	SL/ 5 00	298 00	0 00	298 00	298 00	0 00	298 00
10/28/98 D	Compaq Deskpro EN PII 333 MT	M*200/ 5 00	1,569 99	0.00	1,569 99	1,569 99	0 00	1,569 99
10/28/98	HP Laserjet 4000SE 4MB	M*200/ 5.00	1,254 95	0 00	1,254 95	1,254 95	0 00	1,254 95
04/07/99	Telephone system	M*200/ 7 00	3,610 00	0 00	3,610.00	3,610 00	0 00	3,610 00
06/25/99	Computers for Office	M*200/ 5 00	12,467 00	0 00	12,467.00	12,467 00	0 00	12,467.00
03/07/00	Sharp AR-205 Digital Copier (Eugene	M*200/ 5 00	4,700 00	0 00	4,700 00	4,700 00	0 00	4,700.00
03/21/00	[LKT000001] TRADED 06/01/04 NBV-F 2	M*200/ 5 00	4,700 00	0.00	4,700 00	4,700 00	0 00	4,700 00
02/01/01	Advantage Telephone Systems	M*200/ 7 00	2,510 00	0 00	2,510 00	2,173 98	224 01	2,397 99
02/16/01	Capital One - 3 Dimension L Series	M*200/ 5 00	2,874 00	0 00	2,874 00	2,874 00	0 00	2,874 00
02/16/01	Technical Support on new system	M*200/ 5 00	1,110 00	0 00	1,110 00	1,110 00	0.00	1,110 00
03/21/01	Tech Support on New Sys - Fred Lee	M*200/ 5.00	480 00	0 00	480.00	480 00	0 00	480 00
04/05/01	Tech Support on New Sys - Fred Lee	M*200/ 5 00	870 00	0.00	870 00	870 00	0 00	870 00
04/12/01	Advantage Phone System - addition	M*200/ 7 00	547 50	0 00	547 50	474 20	48 87	523 07
04/23/01	Tech Support on New Sys - Fred Lee	M*200/ 5 00	1,495 00	0 00	1,495 00	1,495 00	0 00	1,495 00
04/24/01	HP Laser Printer - Capital One	M*200/ 5 00	1,996 00	0.00	1,996 00	1,996.00	0 00	1,996 00
05/01/01	Tech Support on New Sys - Fred Lee	M*200/ 5 00	600 00	0 00	600.00	600 00	0 00	600 00
05/10/01	Advantage Telephone - add to phone	M*200/ 7 00	1,015.00	0 00	1,015.00	879 12	90.59	969 71
05/10/01	The Closet Factory-2 custom station	M*200/ 7 00	2,315 00	0 00	2,315 00	2,005 08	206 61	2,211 69
05/16/01	The Closet Factory	M*200/ 7 00	635 00	0.00	635.00	549.99	56 67	606 66
05/16/01	Conference chairs paid by VISA	M*200/ 7 00	817 92	0 00	817 92	708 43	72.99	781 42
06/01/01	Advantage Telephone - add to phone	M*200/ 7 00	577 00	0 00	577 00	499 76	51 49	551 25
06/01/04	[LKA000001] Sharp AR-M 205 Copier (SL/ 5 00	0 00	0 00	0 00	0 00	0 00	0 00
06/08/04	Sharp M550N Digital Copier + - Leas	SL/ 5 00	22,500 00	0 00	22,500 00	11,250 00	4,500 00	15,750.00
12/31/05	Advantage Telephone Phone System -	MA200/ 7 00	1,985 00	0 00	1,985 00	283 57	486 12	769 69
07/26/06 A	Susan's laptop	MA200/ 5 00	570.03	0 00	570.03	0 00	114 01	114 01
03/22/07 A	Kim's super-fast computer	MA200/ 5 00	2,715 89	0 00	2,715 89	0 00	543 18	543 18
04/25/07 A	Eugene Server	MA200/ 5 00	821 47	0 00	821 47	0 00	164 29	164 29
Grand totals: - EQUIPMENT (33 assets)			108,466 27	0 00	108,466 27	90,280 59	6,558 83	96,839.42
Less 2 Disposed assets (Current Depreciation: \$0 00)			1,848 99	0.00	1,848 99	1,848 99		1,848 99
Net totals - EQUIPMENT (31 assets)			106,617 28	0 00	106,617 28	88,431 60	6,558 83	94,990.43
ASSET A/C#: 1-3310 - FURNITURE & FIXTURES								
09/06/01	Stanton Sofa	M*200/ 7 00	549 00	0 00	549 00	426 51	49 00	475 51
11/22/06 A	Front Office Desk	MA200/ 7 00	3,244 00	0 00	3,244 00	0.00	463 43	463 43
Grand totals 1-3310 - FURNITURE & FIXTURES (2 assets)			3,793 00	0 00	3,793.00	426.51	512 43	938.94
ASSET A/C#: 1500 - BUILDING								
05/20/05	Eugene Office Building	MACRS/39 00	88,000 00	0 00	88,000 00	2,538 46	2,256 41	4,794.87
Grand totals. 1500 - BUILDING (1 assets)			88,000 00	0 00	88,000 00	2,538 46	2,256 41	4,794 87

ASSET DEPRECIATION SHORT REPORT

Open Adoption & Family Services, Inc. Jun. 30, 2007

Sorted ASSET A/C#

Method: 1-FEDERAL-Std Conv Applied

Range - 1500

Include All assets

Date Acq	Description	Meth/Life	Cost	Section 179	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
Grand totals for all accounts: (36 assets)			200,259.27	0.00	200,259.27	93,245.56	9,327.67	102,573.23
Less: 2 Disposed assets (Current Depreciation: \$0.00)			1,848.99	0.00	1,848.99	1,848.99		1,848.99
Net totals for all accounts: (34 assets)			198,410.28	0.00	198,410.28	91,396.57	9,327.67	100,724.24

Codes that may appear next to the date acquired include: A - Addition, D - Disposal, T - Traded, MQ - Mid Quarter Applied

Additional Summary Statistics:	Cost	Curr Yr 179	Prior Yr 179	Depr Basis	Beg A/Depr	Curr Depr	Ending A/Depr	Net Book Val
Grand Totals for All Assets	200,259.27	0.00	0.00	200,259.27	93,245.56	9,327.67	102,573.23	97,686.04
Less: Inactive Assets	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Disposed Assets	1,848.99	0.00	0.00	1,848.99	1,848.99	0.00	1,848.99	0.00
Traded Assets	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net Totals (Active Assets)	198,410.28	0.00	0.00	198,410.28	91,396.57	9,327.67	100,724.24	97,686.04
Total Additional First Year Depreciation Taken at 30% Rate:				0.00				
Total Additional First Year Depreciation Taken at 50% Rate:				0.00				
Total Additional First Year Depreciation Taken:				0.00				

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service

See Separate Instructions.

Attach this form to your return.

2006

Attachments
Sequence No. **67**

Name(s) shown on return

Business or activity to which this form relates

Identifying number
93-0896522

Open Adoption & Family Services, Inc.

Mediated Adoption

Part I Election to Expense Certain Property Under Section 179

NOTE: If you have any "listed property", complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	108,000
2 Total cost of section 179 property placed in service (see instructions)	2	7,351
3 Threshold cost of section 179 property before reduction in limitation	3	430,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	108,000
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	0
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	108,000
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	0
13 Carryover of disallowed deduction to 2007. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special allowance for New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	4,500

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2006	17	3,544
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property			3 yrs.	HY		
b 5-year property		4,107	5 yrs.	HY	200DB	821
c 7-year property		3,244	7 yrs.	HY	200DB	463
d 10-year property			10 yrs.	HY		
e 15-year property			15 yrs.	HY		
f 20-year property			20 yrs.	HY		
g 25-year property			25 yrs.	HY	S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed Property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S Corporations - see instructions	22	9,328
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with columns (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation Deduction, (i) Elected section 179 cost.

25 Special allowance for New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25

26 Property use more than 50% in a qualified business use: %

27 Property use 50% or less in a qualified business use: % S/L-

28 Add amounts in column (h), lines 25 through 27. Enter the total here and on line 21, page 1 28

29 Add amounts in column (i), line 26. Enter the total here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6, and rows 30-36 for miles driven and personal use availability.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

Table for Section C with questions 37-41 and Yes/No columns.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

Table for Part VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2006 tax year (see instructions):

43 Amortization of costs that began before your 2006 tax year. 43

44 Total. Add amounts in column (f). See the instructions for where to report. 44

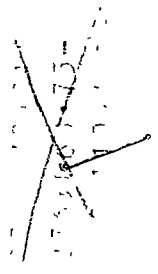
Business Services Account BSA®

X236
1002

Account Number: LL 0
Universal ID: 53044151

*Not cash
SA
CASH BSA 7/1/05*

OPEN ADOPTION
5200 SW MACADAM
PORTLAND



|||||

Account instructions
The account record was
and approved by a Pr
Your account is curre

Bulletin board
We take important str
safeguard the person
we collect about you.
the enclosed notice for details.

RESOURCELINE 1-800-BSA-0140: ACCOUNT # 342009426
VISIT OUR WEB SITE AT WWW.UBS.COM.

Your Financial Advisor
CROSBY DOUGLAS
503-221-5800/800-245-0900

UBS Financial Services Inc.
805 S.W. BROADWAY
SUITE 2600
PORTLAND, OR 97205-3365

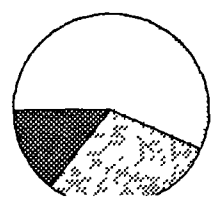
PZ1A186304-X236 - 0607 - LL - 0

June 2007

Asset Allocation
Graph provides values and/or percentages by asset class. Insurance products, 529 Plans, Private investments, accrued interest pending return of principal are not included in the asset classification.

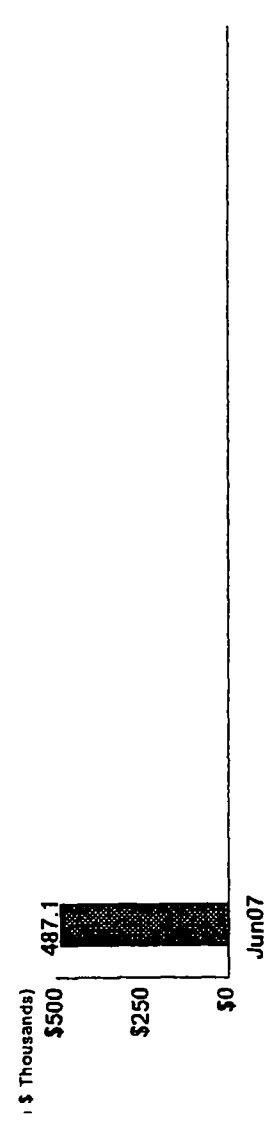
	Total asset value	% of total
Cash	\$ 276,060.75	56.67 %
Cash alternatives	00	0.00 %
Equities	141,091.71	28.96 %
Fixed income	69,964.00	14.37 %
Balanced	.00	0.00 %
Alternative strategies	.00	0.00 %
Other	.00	0.00 %
Total	\$ 487,116.46	100.00 %

- Cash
- Cash alternatives
- Equities
- Fixed income
- Balanced
- Alternative strategies
- Other



Accrued interest: \$ 145.83
Total account values plus above: \$ 487,262.29

Bar Value Comparison
Graph includes credits, debits and changes in market value. It does not include insurance products, 529 Plans, private investments, accrued interest and pending return of principal.



Business Services Account BSA[®]

PZ1A186305-X236
5101155 - 000003

Statement Period: June 2007

Account Number:
Your Financial Advisor
CROSBY DOUGLAS
503-221-5800/800-245-0900

This month at a glance

Value on May 31	\$.00
Value on June 29	\$	487,116.46
Money fund and other sweep option balance in 06/29 value	\$	276,060.75
Other items not in value on 06/29:		
Accrued interest	\$	145.83
June 29 value plus other items	\$	487,262.29

Investment objectives

The following return objective and risk profile(s) describe overall goals for this account. For each account held, you must provide one return objective, one primary risk profile and, if applicable, a secondary risk profile. A full description of the alternatives is included on the back of the first page. If you have questions regarding these objectives, disagree with or wish to change them, please notify your Financial Advisor or Branch Manager at your branch office, in writing or by telephone.

Return objective: Current income & capital appreciation

Risk profile: Primary: Moderate

Secondary: None selected

Account Summary

	Current period	Year-to-date
Net portfolio opening value	\$.00	\$.00
Cash activity		
Opening cash / money fund / sweep balance	\$.00	\$.00
Credits to your account		
Net security earnings	360.84	360.84
Deposits	275,794.91	275,794.91
Total credits	\$ 276,155.75	\$ 276,155.75
Debits to your account		
Withdrawals	-95.00	-95.00
Total debits	\$ -95.00	\$ -95.00
Credit/debit net change	\$ 276,060.75	\$ 276,060.75
Closing cash / money fund / sweep balance	\$ 276,060.75	\$ 276,060.75
Portfolio activity		
Opening value of priced assets	\$.00	\$.00
Securities transferred in/received	210,966.12	210,966.12
Change in value of investments	89.59	89.59
Net change in value of priced assets	\$ 211,055.71	\$ 211,055.71
Closing value of priced assets	\$ 211,055.71	\$ 211,055.71
Net portfolio closing value as of June 29	\$ 487,116.46	\$ 487,116.46

Business Services Account BSA®

PZ1A186306-X236
5101155 - 000004

Statement Period: June 2007

Account Number
Your Financial Advisor
CROSBY DOUGLAS
503-221-5800/800-245-0900

Investment Summary
Investments are for the current calendar year. All prior year entries are summarized separately. This information should not be used for tax purposes. Refer to the disclosure on the back of the first page.

	Current period	Year-to-date
Money fund dividends	\$ 360.84	\$ 360.84
Security earnings	\$ 360.84	\$ 360.84

Investment Portfolio

Investment available, prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. An asterisk (*) indicates the calculation of unrealized gains/losses based upon a UBS Financial Services investment to cost basis. The number "1" indicates cost basis information has been provided by a source other than UBS Financial Services. See the back of the first page for additional information. Gains/losses are not calculated for zero coupon investments. "Pending adjustment" or "PIA" indicates cost basis has not yet been allocated as a result of a spin-off or taxable exchange.

Money and Money Funds

Description	Opening balance	Closing balance	Closing share price	Average rate	Dividend period	Days in period
A MONEY MKT. PORTFOLIO	.00	276,060.75	1.00	4.76%	05/24 - 06/24	32

Common Stock

Description	Total shares	Price	Current value	Est. annual income/Current yield	Trade date	Purchase price	Cost basis	Unrealized gain/loss	Holding period
STATE CORP Symbol: ALL Exchange: NYSE	225.000	61.510	13,839.75	342/ 2.47%	05/16/01	43.200	9,917.14	3,922.61	LT
TEL CORP Symbol: AT Exchange: NYSE	150.000	67.550	10,132.50	75/ .74%	05/11/99	53.450	8,017.97	2,114.53	LT
GEN IDEC INC Symbol: BIIB Exchange: OTC	230.000	53.500	12,305.00		05/12/99	41.430	9,530.00	2,775.00	LT
RO INDUSTRIES INC Symbol: NPO Exchange: NYSE	45.000	42.790	1,925.55		05/12/99	8.900	400.70	1,524.85	LT
VID MOTOR CO COM NEW Symbol: F Exchange: NYSE	262.000	9.420	2,468.04		05/11/99	36.800	9,643.98	-7,175.94	LT

Business Services Account BSA®

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PZ1A186307-X236
5101155 - 000005

Statement Period: June 2007

Common stock - continued

Description	Total shares	Price	Current value	Est. annual income/ Current yield	Trade date	Purchase price	Cost basis	Unrealized gain/loss	Holdi peri L
GOODRICH CORP Symbol: GR Exchange: NYSE	225.000	59.560	13,401.00	180/ 1.34%	05/12/99	42.670	9,600.88	3,800.12	L
INTEL CORP Symbol: INTC Exchange: OTC	375.000	23.739	8,902.12	169/ 1.90%	05/16/01	27.570	10,343.75	-1,441.63	L
KEYCORP NEW Symbol: KEY Exchange: NYSE	240.000	34.330	8,239.20	350/ 4.25%	05/11/05	32.710	8,044.23	194.97	L
NATIONAL CITY CORP Symbol: NCC Exchange: NYSE	245.000	33.320	8,163.40	382/ 4.68%	05/11/05	34.190	8,578.25	-414.85	L
PFIZER INC Symbol: PFE Exchange: NYSE	280.000	25.570	7,159.60	325/ 4.54%	05/11/99	33.440	9,365.40	-2,205.80	L
PROTECTIVE LIFE CORP Symbol: PL Exchange: NYSE	250.000	47.810	11,952.50	225/ 1.88%	05/12/99	36.810	9,411.67	2,540.83	L
UNISYS CORP Symbol: UIS Exchange: NYSE	15.000	9.140	137.10						L
US BANCORP DEL (NEW) Symbol: USB Exchange: NYSE	290.000	32.950	9,555.50	464/ 4.86%	05/11/05	28.490	8,466.70	1,088.80	L
VISTEON CORP Symbol: VC Exchange: NYSE	19.000	8.100	153.90		05/11/99	20.760	394.44	-240.54	L
WASH MUTUAL INC Symbol: WM Exchange: NYSE	300.000	42.640	12,792.00	660/ 5.16%	05/07/01	33.290	10,186.27	2,605.73	L
WINDSTREAM CORP Symbol: WIN Exchange: NYSE	155.000	14.760	2,287.80	155/ 6.78%	05/11/99	11.460	1,776.30	511.50	L
Total	3,306.000		123,414.96	3,327			113,677.68	9,600.18	

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Business Services Account BSA®

Account Number:
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5101155 - 000006

Statement Period: June 2007

mutual funds

Aggregated Reinvestment" is the aggregate of all dividends paid that were reinvested in the fund and excludes any cash dividends taken, but is not a tax lot for purposes of determining holding periods and/or basis. Each time dividends are reinvested, the shares received are a separate tax lot. "Cost basis" is the aggregate purchase cost of the security, including reinvested dividends, and may need to be adjusted for return of capital payments to determine the aggregate cost basis. "Unrealized gain/loss" is the difference between the aggregate current value and the aggregate cost basis for each security (and may also need to be adjusted for return of capital payments to determine the realized gain or loss for tax reporting purposes). The "Investment return" for each security is equal to the Current value minus the Client investment, and excludes any cash dividends not reinvested.

description	Total shares	Price	Current value	Purchase price	Client investment	Cost basis	Unrealized gain/loss	Reinvested dividends	Investment return	Holding period
ANKLIN SMALL-MID CAP										
LOWTH FUND CLASS A										
Trade date: 05/11/99	374.953	42.870	16,074.23	26.670	10,000.00	10,000.00	6,074.23 ¹			LT
Aggregated reinvestment	37.381	42.870	1,602.52	38.328		1,432.74	169.78	1,432.74		
Security total	412.334		17,676.75		10,000.00	11,432.74	6,244.01	1,432.74	7,676.75	

Certificates of deposit

Certificates of deposit are not automatically adjusted for accrued original issue discount and thus gains/losses are not calculated.

description	Total face value at maturity	Price	Current value	Current yield	Trade date	Purchase price	Unrealized gain/loss	Holding period
EASURY ALEXANDR VA US								
MTE 05.2500% MAT 11/19/2012	25,000.000	97.828	24,457.00	1.313/ 5.37%	05/11/05	100.000	-543.00 ¹	LT
EP RATE CD								
ILLABLE 11/19/2007 @ 100.0000								
ACRUED INTEREST \$145.83								

used end mutual funds

used end mutual funds

description	Total shares	Price	Current value	Est annual income/Current yield	Trade date	Purchase price	Unrealized gain/loss	Holding period
IVEEN QUALITY PREFERRED								
COME FUND 2	3,300.000	13.790	45,507.00	3.604/ 7.92%	09/23/02	15.000	-3,993.00 ¹	LT
Symbol: JPS Exchange: NYSE								

Business Services Account BSA

Account Number:
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CROSBY DOUGLAS
503-221-5800/800-245-0900

Statement Period: June 2007

PZ1A186309-X23
5101155 - 000007

Research Opinions

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Security	UBS WM Research Rating Industry Relative Rating	UBS Investment Research Rating	Independent Research Rating
ALLSTATE CORP	HOLD	REDUCE/	THE STREET.COM RATINGS
ALLTEL CORP	MARKET PERFORM	LOWER PREDICTABILITY	BUY
BIOMGEN IDEC INC	HOLD	NEUTRAL/	BOYAR'S ALT VIEWPOINT
FORD MOTOR CO COM NEW	MARKET PERFORM	HIGHER PREDICTABILITY	HOLD
GOODRICH CORP	HOLD	NEUTRAL/	BDR RESEARCH GROUP
INTEL CORP	BUY	LOWER PREDICTABILITY	HOLD
KEYCORP NEW	OUTPERFORM	NEUTRAL/	ZACKS INVESTMENT RSCH
NATIONAL CITY CORP	BUY	LOWER PREDICTABILITY	HOLD
PFIZER INC	BUY	RATINGS EXCEPTION \$	ROCHDALE SECURITIES
PROTECTIVE LIFE CORP	BUY	LOWER PREDICTABILITY	HOLD
UNISYS CORP	BUY	RATINGS EXCEPTION \$	ARGUS FUNDAMENTAL
US BANCORP DEL (NEW)	BUY	BUY/	HOLD
		HIGHER PREDICTABILITY	BOYAR'S ALT VIEWPOINT
		HIGHER PREDICTABILITY	BUY
		BUY/	NAB RESEARCH
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		HIGHER PREDICTABILITY	HOLD
		BUY/	BOE SECURITIES
		HIGHER PREDICTABILITY	HOLD
		BUY/	ARGUS FUNDAMENTAL
		HIGHER PREDICTABILITY	HOLD
		BUY/	BOE SECURITIES



Business Services Account BSA®

Account Number:
Your Financial Advisor
CROSBY DOUGLAS
503-221-5800/800-245-0900

PZ1A186310-X236
5101155 - 000008

Statement Period: June 2007

Research opinions - continued

Security	UBS WM Research Rating Industry Relative Rating	UBS Investment Research Rating	Independent Research Rating	Independent Research Rating
ASH MUTUAL INC	HOLD	NEUTRAL	ARGUS FUNDAMENTAL	
INDSTREAM CORP	OUTPERFORM	LOWER PREDICTABILITY	HOLD	
	HOLD	NEUTRAL	ARGUS FUNDAMENTAL	STANDARD & POOR'S
	OUTPERFORM	LOWER PREDICTABILITY	BUY	HOLD

Security activity

Activity	Description	Quantity/ Face value	Price / Value	Cash amount	Cash & Total Money fund/sweep balance
7/31	Cash, Money fund and other sweep option balance				.00
/14 RECEIVE	DEBIT CASH BALANCE			-95.00	
/14 RECEIVE	CREDIT CASH BALANCE			275,597.82	
/14 RECEIVE	TREASURY ALEXANDR VA US RT 05.2500% MAT 11/19/12	25,000.000	24,619.50		
/14 RECEIVE	STEP RATE CD				
/14 RECEIVE	ALLSTATE CORP	225.000	13,842.00		
/14 RECEIVE	ALL TEL CORP	150.000	10,170.00		
/14 RECEIVE	BIOPEN IDEC INC	230.000	11,778.30		
/14 RECEIVE	ENPRO INDUSTRIES INC	45.000	1,885.95		
/14 RECEIVE	FORD MOTOR CO COM NEW	262.000	2,268.92		
/14 RECEIVE	GOODRICH CORP	225.000	12,991.50		
/14 RECEIVE	INTEL CORP	375.000	8,711.25		
/14 RECEIVE	KEYCORP NEW	240.000	8,589.60		
/14 RECEIVE	NATIONAL CITY CORP	245.000	8,322.65		
/14 RECEIVE	NUVEEN QUALITY PREFERRED INCOME FUND 2	3,300.000	45,177.00		
/14 RECEIVE	PFIZER INC	280.000	7,389.20		
/14 RECEIVE	PROTECTIVE LIFE CORP	250.000	12,125.00		
/14 RECEIVE	US BANCORP DEL (NEW)	290.000	9,842.60		
/14 RECEIVE	UNISYS CORP	15.000	123.60		
/14 RECEIVE	VISTEON CORP	19.000	155.04		
/14 RECEIVE	WASH MUTUAL INC	300.000	12,828.00		
/14 RECEIVE	WINDSTREAM CORP	155.000	2,300.20		

Cash flow and security transactions

Refer to the disclosure on the back of the first page regarding the Price/Value presented for restricted securities

Activity	Description	Quantity/ Face value	Price / Value	Cash amount	Cash & Total Money fund/sweep balance
7/31	Cash, Money fund and other sweep option balance				.00
/14 RECEIVE	DEBIT CASH BALANCE			-95.00	
/14 RECEIVE	CREDIT CASH BALANCE			275,597.82	
/14 RECEIVE	TREASURY ALEXANDR VA US RT 05.2500% MAT 11/19/12	25,000.000	24,619.50		
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Business Services Account BSA®

Account Number:
 Your Financial Advisor
 CROSBY DOUGLAS
 503-221-5800/800-245-0900

PZ1A186311-X2
 5101155 - 00000

Statement Period: June 2007

Cash flow and security transactions - continued

Date	Activity	Description	Quantity/ Face value	Price / Value	Cash amount	Cash & Total Money fund/sweep balance
06/14	RECEIVE	FRANKLIN SMALL-MID CAP GROWTH FUND CLASS A	412.334	17,845.81		275,502.82
06/18	RECEIVE	CREDIT CASH BALANCE			109.49	275,612.31
06/20	RECEIVE	CREDIT CASH BALANCE			87.60	275,699.91
06/25	DIVIDEND	RMA MONEY MKT. PORTFOLIO AS OF 06/22/07			360.84	276,060.75
06/29	STATUS	CLIENT/ACCT INFORMATION SENT				276,060.75
06/29		Closing cash, Money fund and other sweep option balance			\$	276,060.75
06/29		Total Money fund and other sweep option balance			\$	276,060.75

Money funds and other sweep options

The RMA Money Mkt Portfolio is your primary sweep fund

Date	Activity	Amount	Balance
05/31	Opening RMA Money Mkt. Portfolio	\$.00
06/15	BOUGHT	\$ 275,502.82	275,502.82
06/19	BOUGHT	109.49	275,612.31
06/21	BOUGHT	87.60	275,699.91

Date	Activity	Amount	Balance
06/25	BOUGHT	\$	360.84
06/29	Closing RMA Money Mkt. Portfolio	\$	276,060.75



UBS Financial Services Inc.
805 S.W. BROADWAY
SUITE 2600
PORTLAND, OR 97205-3365

Your Financial Advisor
CROSBY DOUGLAS
503-221-5800/800-245-0900

Summary of Accounts

PZ1A186303-X236
5101155 - 000009S

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June 2007

Thank you for choosing to open your account(s) with UBS Financial Services Inc. We appreciate your business. In order to comply with Securities and Exchange Commission regulations designed to protect individual investors, UBS Financial Services Inc. has adopted data verification policies. Please take a moment to review the Client Record Verification below and the investment objectives on your individual account statement(s), which reflect information obtained when your account(s) was opened. This information will help us to better understand you and your investment needs.

This information is correct, no action is necessary. If changes are required or information is missing, please notify your Financial Advisor in writing or by telephone. In addition, please remember to notify your Financial Advisor of any future changes. As always, be assured that we take measures to safeguard your personal information and keep it confidential. We appreciate your cooperation and look forward to serving your financial needs.

Client record verification

Please share assets with another person, please provide financial information (e.g. annual income and net worth) per individual. For example, a total net worth of \$50,000 should be split as you deem appropriate. Multiple client records exist for the same client, please contact your Financial Advisor to correct the duplicate records.

Client Record 1

Name (individual/business/trust/estate) OPEN ADOPTION

Date of birth	N/A
Phone number	503-226-4871
Employment status	N/A
Occupation	N/A
Employed/associated with a broker/dealer	N/A
Annual income	\$ 1,000,000
Net worth (exclusive of residence)	\$ 1,523,294

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OPEN ADOPTION
5200 SW MACADAM
PORTLAND OR 97239-6103



Open Adoption and Family Services, Inc.

93-0896522

Statement 1
Form 990, Part II, Line 43
Other Expenses

	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
Advertising	115,899.	97,935.	13,328.	4,636.
Background checks	2,747.	2,321.	316.	110.
Bank charges	2,294.	1,938.	264.	92.
Contracted Social Work	5,875.	4,964.	676.	235.
Dues and Memberships	5,088.	4,299.	585.	204.
Education	8,175.	6,908.	940.	327.
Employee recruitment	481.	406.	56.	19.
Hospitality	2,741.	2,316.	315.	110.
Insurance	22,367.	18,900.	2,572.	895.
Literature	1,178.	995.	136.	47.
Miscellaneous	290.	245.	33.	12.
New programs/brochures	14,046.	11,869.	1,615.	562.
Office supplies	13,546.	11,446.	1,558.	542.
Online services	3,287.	2,778.	378.	131.
Taxes	12,467.	10,535.	1,433.	499.
Technical support	5,347.	4,518.	615.	214.
Utilities	2,485.	2,100.	286.	99.
Total	\$ 218,313.	\$ 184,473.	\$ 25,106.	\$ 8,734.

Statement 2
Form 990, Part IV, Line 57
Land, Buildings, and Equipment

Category	Basis	Accum. Deprec.	Book Value
Furniture and Fixtures	\$ 198,410.	\$ 100,724.	\$ 97,686.
Total	\$ 198,410.	\$ 100,724.	\$ 97,686.

Statement 3
Form 990, Part IV, Line 58
Other Assets

Deposits	\$ 4,606.
Rounding	1.
Total	\$ 4,607.

Statement 4
Form 990, Part IV, Line 65
Other Liabilities

Accrued payroll	\$ 24,738.
Accrued payroll taxes	1,906.
Accrued vacation	7,081.
Adoptive parent trust funds	9,870.
Payroll Withholding	-1,208.

Open Adoption and Family Services, Inc.

93-0896522

Statement 4 (continued)
Form 990, Part IV, Line 65
Other Liabilities

Prepaid employee benefits

Total \$ 540.
 Total \$ 42,927.

Statement 5
Form 990, Part V-A
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Carol Merwin 2905 NE 29th Portland, OR 97212	Director 0	\$ 0.	\$ 0.	\$ 0.
Roy Abramowitz, CPA 1211 SW Fifth Ave, Ste 1000 Portland, OR 97204	President 0	0.	0.	0.
Erik Bergman 3 Centerpointe Drive #300 Lake Oswego, OR 97035	Vice President 0	0.	0.	0.
Grayson Dempsey 4549 NE 22nd Avenue Portland, OR 97211	Secretary 0	0.	0.	0.
Melissa Busch 4447 NE 76th Portland, OR 97218	Director 0	0.	0.	0.
Elizabeth Carroll 5329 NE MLK Portland, OR 97211	Director 0	0.	0.	0.
Kathryn Olson 2728 261st Ave. SE Sammamish, WA 98075	Director 0	0.	0.	0.
Michael Cousins 3952 S. Hudson Street Seattle, WA 98118	Director 0	0.	0.	0.
Mark Spaur 519 SW 328th Ct. Federal Way, WA 98023	Director 0	0.	0.	0.
Andrea Hardy 3211 SW Luradel St. Portland, OR 97219	Director 0	0.	0.	0.

Open Adoption and Family Services, Inc.

93-0896522

Statement 5 (continued)
Form 990, Part V-A
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
Shari Levine 5200 SW Macadam Ave, #230 Portland, OR 97239	Executive Direc 40	\$ 77,408.	\$ 0.	\$ 0.
Paul Heimowitz 10876 So. Beutel Rd Oregon City, OR 97045	Director 0	0.	0.	0.
Katherine Provancher 4813 SW Orchard Portland, OR 97219	Director 0	0.	0.	0.
	Total	<u>\$ 77,408.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

Statement 6
Schedule A, Part I
Compensation of Five Highest Paid Employees

<u>Name and Address</u>	<u>Title & Average Hours Worked</u>	<u>Compen- sation</u>	<u>Contribut. EBP & DC</u>	<u>Expense Account</u>
Cindy Lee 5200 SW Macadam Ave #230 Portland, OR 97239	Fiscal Manager 40	50,084.	4,200.	0.
	Total	<u>\$ 50,084.</u>	<u>\$ 4,200.</u>	<u>\$ 0.</u>

Statement 7
Schedule A, Part IV-A, Line 22
Other Income

<u>Description</u>	<u>(a) 2005</u>	<u>(b) 2004</u>	<u>(c) 2003</u>	<u>(d) 2002</u>	<u>(e) Total</u>
Unrealized gain or loss	\$ 2,602.	\$ 22,677.	\$ 23,438.	\$ 10,001.	\$ 58,718.
Realized gain or loss on sale of invest.	2,043.	0.	0.	-5,838.	-3,795.
Total	<u>\$ 4,645.</u>	<u>\$ 22,677.</u>	<u>\$ 23,438.</u>	<u>\$ 4,163.</u>	<u>\$ 54,923.</u>