

Return of Organization Exempt From Income Tax

2009

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning 07/01, 2009, and ending 06/30, 2010

Form header section containing organization name (AID TO ADOPTION OF SPECIAL KIDS/ARIZONA), EIN (86-0611935), address (2320 N. 20TH ST. PHOENIX, AZ 85006), and principal officer (RON ADELSON).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Includes rows for mission statement, governance, revenue (8,937,842), expenses (7,797,857), and net assets (10,855,008).

Part II Signature Block

Signature block containing declaration text, signature of officer, preparer's signature (CBIZ MHM, LLC), and preparer's identifying number (34-1884125).

May the IRS discuss this return with the preparer shown above? (See instructions) [X] Yes [ ] No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. \* Form 990 (2009)

**Part III Statement of Program Service Accomplishments**

**1** Briefly describe the organization's mission:  
TO BUILD AND STRENGTHEN FAMILIES FOR THE CHILDREN IN ARIZONA'S FOSTER CARE SYSTEM.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O.

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: \_\_\_\_\_) (Expenses \$ 3,011,400. including grants of \$ \_\_\_\_\_) (Revenue \$ 3,825,511.)  
FOSTER CARE PROVIDES FOSTER HOME CARE FOR OLDER CHILDREN, SIBLING GROUPS AND MEDICALLY FRAGILE AND SUBSTANCE EXPOSED NEWBORNS. 895 CHILDREN WERE SERVED IN THIS PROGRAM.

**4b** (Code: \_\_\_\_\_) (Expenses \$ 2,022,654. including grants of \$ \_\_\_\_\_) (Revenue \$ 2,646,898.)  
FAMILY SUPPORT SERVICES PROVIDES POST PLACEMENT SERVICES TO ADOPTIVE & FOSTER FAMILIES INCLUDING RESPITE, HABILITATION, SUPPORT GROUPS, ADVANCED TRAINING, MENTORING AND CRISIS INTERVENTION. FAMILY SUPPORT SERVED 174 FAMILIES.

**4c** (Code: \_\_\_\_\_) (Expenses \$ 664,558. including grants of \$ \_\_\_\_\_) (Revenue \$ 559,547.)  
THE ADOPTION AND TODOS LOS NINOS PROGRAM PROVIDES HOME STUDY, PLACEMENT AND POST PLACEMENT SERVICES FOR ADOPTING CHILDREN FROM ARIZONA'S FOSTER CARE SYSTEM. 18 CHILDREN WERE PLACED INTO PERMANENT HOMES THROUGH THIS PROGRAM.

**4d** Other program services. (Describe in Schedule O.)  
(Expenses \$ 1,053,057. including grants of \$ \_\_\_\_\_) (Revenue \$ 1,126,870.)

**4e Total program service expenses** ▶ 6,751,669.

Part IV Checklist of Required Schedules

Table with 3 main columns: Question, Yes, No. Rows 1-20 contain various organizational requirements and their completion status (Yes/No/X).

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No checkboxes. Rows include questions 21 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and Schedule O completion.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, description, and Yes/No columns. Includes rows for 1a, 1b, 1c, 2a, 2b, 3a, 3b, 4a, 4b, 5a, 5b, 5c, 6a, 6b, 7a-7h, 8, 9a, 9b, 10a, 10b, 11a, 11b, 12a, 12b.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body; 1b Enter the number of voting members that are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a material diversion of the organization's assets?; 6 Does the organization have members or stockholders?; 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?; 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates?; 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?; 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?; 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13; 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done; 13 Does the organization have a written whistleblower policy?; 14 Does the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ARIZONA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MICHAEL GULAR 3707 N. 7TH ST, SUITE 310 PHOENIX, AZ 85014 602-254-2275

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SCOTT REHORN BOARD CHAIR	1.00	X		X				0.	0.	0.
JULIE CHASE VICE CHAIR & SECRETARY	1.00	X		X				0.	0.	0.
MARJORIE HANTMAN DIRECTOR	1.00	X						0.	0.	0.
TIMOTHY KAEHR TREASURER	1.00	X		X				0.	0.	0.
RITA MEISER PAST CHAIR	1.00	X					2,560.	0.	0.	0.
DOMINIC WYCKLENDT DIRECTOR	1.00	X					0.	0.	0.	
STEVEN RENDELL DIRECTOR	1.00	X					0.	0.	0.	
BARBARA RODRIGUEZ-PASHKOWSKI DIRECTOR	1.00	X					0.	0.	0.	
RON ADELSON CHIEF EXECUTIVE OFFICER	40.00			X			142,587.	0.	6,315.	
MICHAEL GULAR SENIOR CONTROLLER	40.00			X			66,225.	0.	3,319.	



**Part VIII Statement of Revenue**

86-0611935

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>	138,674.				
	<b>b</b> Membership dues . . . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1c</b>					
	<b>d</b> Related organizations . . . . .	<b>1d</b>					
	<b>e</b> Government grants (contributions) . .	<b>1e</b>	42,000.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .	<b>1f</b>	266,327.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ _____						
	<b>h Total.</b> Add lines 1a-1f . . . . . ▶			447,001.			
<b>Program Service Revenue</b>		<b>Business Code</b>					
	<b>2a</b> <u>ADOPTION FEES</u>		624100	55,411.	55,411.		
	<b>b</b> <u>GOVERNMENT CONTRACTS</u>		624100	8,103,415.	8,103,415.		
	<b>c</b> _____						
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue . . . . .						
	<b>g Total.</b> Add lines 2a-2f . . . . . ▶			8,158,826.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . . ▶			127,698.			127,698.
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . ▶			0.			
	<b>5</b> Royalties . . . . . ▶			0.			
		(i) Real	(ii) Personal				
	<b>6a</b> Gross Rents . . . . .						
	<b>b</b> Less: rental expenses . . . . .						
	<b>c</b> Rental income or (loss) . . . . .						
	<b>d</b> Net rental income or (loss) . . . . . ▶				0.		
		(i) Securities	(ii) Other				
	<b>7a</b> Gross amount from sales of assets other than inventory . . . . .	6,266,000.	25,000.				
	<b>b</b> Less: cost or other basis and sales expenses . . . . .	6,266,000.	15,000.				
	<b>c</b> Gain or (loss) . . . . .		10,000.				
	<b>d</b> Net gain or (loss) . . . . . ▶				10,000.		10,000.
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . . <b>a</b>						
	<b>b</b> Less: direct expenses . . . . . <b>b</b>						
	<b>c</b> Net income or (loss) from fundraising events . . . . . ▶				0.		
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . . <b>a</b>						
	<b>b</b> Less: direct expenses . . . . . <b>b</b>						
<b>c</b> Net income or (loss) from gaming activities . . . . . ▶				0.			
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . . <b>a</b>							
<b>b</b> Less: cost of goods sold . . . . . <b>b</b>							
<b>c</b> Net income or (loss) from sales of inventory . . . . . ▶				0.			
Miscellaneous Revenue			<b>Business Code</b>				
<b>11a</b> <u>MISCELLANEOUS</u>		900099	3,521.			3,521.	
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . . ▶			3,521.				
<b>12 Total Revenue.</b> See instructions . . . . . ▶			8,747,046.	8,158,826.		141,219.	

**Part IX Statement of Functional Expenses**

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.**

**All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	0.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	0.			
4 Benefits paid to or for members . . . . .	0.			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	217,942.	74,293.	143,649.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	0.			
7 Other salaries and wages . . . . .	3,681,980.	3,332,909.	215,369.	133,702.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	23,071.	20,834.	2,235.	2.
9 Other employee benefits . . . . .	127,714.	103,875.	14,953.	8,886.
10 Payroll taxes . . . . .	333,257.	299,537.	21,034.	12,686.
11 Fees for services (non-employees):				
a Management . . . . .	0.			
b Legal . . . . .	0.			
c Accounting . . . . .	42,361.		42,361.	
d Lobbying . . . . .	0.			
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees . . . . .	0.			
g Other . . . . .	87,229.	72,866.	12,500.	1,863.
12 Advertising and promotion . . . . .	38,317.	32,175.	243.	5,899.
13 Office expenses . . . . .	98,081.	63,094.	24,495.	10,492.
14 Information technology . . . . .	3,389.	2,353.	655.	381.
15 Royalties . . . . .	0.			
16 Occupancy . . . . .	220,008.	128,498.	91,510.	
17 Travel . . . . .	75,915.	74,748.	431.	736.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings . . . .	12,467.	10,893.	1,544.	30.
20 Interest . . . . .	0.			
21 Payments to affiliates . . . . .	0.			
22 Depreciation, depletion, and amortization . . .	92,256.		92,256.	
23 Insurance . . . . .	43,789.	9,189.	34,600.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>FAMILY RELATED SERVICES</u> -----	2,391,088.	2,390,329.	621.	138.
b <u>BAD DEBTS</u> -----	119,572.	119,572.		
c <u>OTHER</u> -----	23,697.	16,504.	5,301.	1,892.
d -----				
e -----				
f All other expenses -----				
<b>25 Total functional expenses.</b> Add lines 1 through 24f	<b>7,632,133.</b>	<b>6,751,669.</b>	<b>703,757.</b>	<b>176,707.</b>
<b>26 Joint Costs.</b> Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing . . . . .	7,456.	<b>1</b>	13,148.
	<b>2</b> Savings and temporary cash investments . . . . .	8,043,379.	<b>2</b>	8,029,850.
	<b>3</b> Pledges and grants receivable, net . . . . .	869,739.	<b>3</b>	781,626.
	<b>4</b> Accounts receivable, net . . . . .	776,731.	<b>4</b>	1,013,572.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	1,434.	<b>9</b>	29,661.
	<b>10 a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 2,556,247.		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 620,786.	970,634.	<b>10c</b> 1,935,461.
	<b>11</b> Investments - publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	15,633.	<b>15</b>	12,195.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	10,685,006.	<b>16</b>	11,815,513.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	664,066.	<b>17</b>	706,626.
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	100,845.	<b>19</b>	85,879.
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	180,000.	<b>23</b>	168,000.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	944,911.	<b>26</b>	960,505.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	8,753,952.	<b>27</b>	9,956,978.
	<b>28</b> Temporarily restricted net assets . . . . .	976,143.	<b>28</b>	888,030.
	<b>29</b> Permanently restricted net assets . . . . .	10,000.	<b>29</b>	10,000.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	9,740,095.	<b>33</b>	10,855,008.	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	10,685,006.	<b>34</b>	11,815,513.	

**Part XI Financial Statements and Reporting**

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .	X	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . . If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>d</b> If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .		X
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form **990** (2009)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

<b>Name of the organization</b> AID TO ADOPTION OF SPECIAL KIDS/ARIZONA	<b>Employer identification number</b> 86-0611935
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**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  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 exempt 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)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
  - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
  - (ii) A family member of a person described in (i) above?
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Rows include: 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)); 15 Public support percentage from 2008 Schedule A, Part II, line 14; 16a 33 1/3 % support test - 2009; b 33 1/3 % support test - 2008; 17a 10%-facts-and-circumstances test - 2009; b 10%-facts-and-circumstances test - 2008; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	393,267.	679,722.	772,051.	554,848.	447,001.	2,846,889.
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .	2,686,217.	6,909,939.	8,119,572.	8,180,362.	8,158,826.	34,054,916.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .	3,079,484.	7,589,661.	8,891,623.	8,735,210.	8,605,827.	36,901,805.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .	0.	0.	22,800.	6,500.	16,700.	46,000.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .	0.	0.	0.	0.	0.	0.
<b>c</b> Add lines 7a and 7b . . . . .	0.	0.	22,800.	6,500.	16,700.	46,000.
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						36,855,805.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6 . . . . .	3,079,484.	7,589,661.	8,891,623.	8,735,210.	8,605,827.	36,901,805.
<b>10 a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	70,220.	202,536.	196,558.	181,809.	127,698.	778,821.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .	70,220.	202,536.	196,558.	181,809.	127,698.	778,821.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) <i>ATCH 1</i> . . . . .	14,788.	4,533.	10,797.	20,823.	3,521.	54,462.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	3,164,492.	7,796,730.	9,098,978.	8,937,842.	8,737,046.	37,735,088.
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	97.67%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15 . . . . .	<b>16</b>	97.64%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2009</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	2.06%
<b>18</b> Investment income percentage from <b>2008</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	2.06%

**19 a 33 1/3 % support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3 % support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

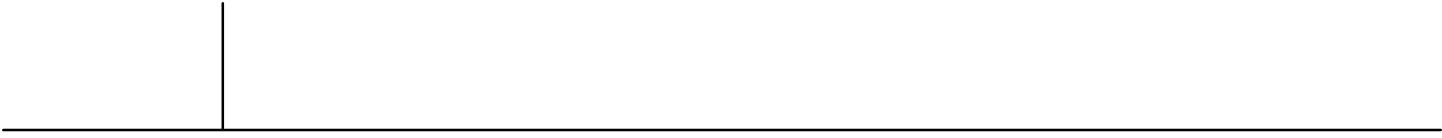
**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

ATTACHMENT 1

SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2005	2006	2007	2008	2009	TOTAL
OTHER REVENUE	14,788.	4,533.	10,797.	5,986.	3,521.	39,625.
INSURANCE PROCEEDS	0.	0.	0.	14,837.	0.	14,837.
<b>TOTAL</b>	<u>14,788.</u>	<u>4,533.</u>	<u>10,797.</u>	<u>20,823.</u>	<u>3,521.</u>	<u>54,462.</u>



<b>Name of organization</b> AID TO ADOPTION OF SPECIAL KIDS/ARIZONA	<b>Employer identification number</b> 86-0611935
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	_____	\$ 138,674.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	_____	\$ 125,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	_____	\$ 11,056.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	_____	\$ 42,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	_____	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	_____	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b> AID TO ADOPTION OF SPECIAL KIDS/ARIZONA	<b>Employer identification number</b> 86-0611935
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	_____	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	_____	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	_____	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	_____	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	_____	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**SCHEDULE D  
(Form 990)**

**Supplemental Financial Statements**

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

Name of the organization

AID TO ADOPTION OF SPECIAL KIDS/ARIZONA

Employer identification number

86-0611935

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate contributions to (during year) . . . . .		
3 Aggregate grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements . . . . .	2a
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06 . . . . .	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? . . . . .  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_
- b Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XI V and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21?
b If "Yes," explain the arrangement in Part XI V.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current Year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the year end balance held as:
a Board designated or quasi-endowment %
b Permanent endowment 100.0000 %
c Term endowment %
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) unrelated organizations
(ii) related organizations
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: Description of investment, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)



Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

Table with 10 rows for reconciliation of net assets. Line 1: Total revenue (8,747,046); Line 2: Total expenses (7,632,133); Line 3: Excess or (deficit) for the year (1,114,913); Lines 4-9: Adjustments; Line 10: Excess or (deficit) per audited financial statements (1,114,913).

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Table with 5 main rows for revenue reconciliation. Line 1: Total revenue (8,747,046); Line 2: Amounts included on line 1 but not on Form 990; Line 3: Subtract line 2e from line 1 (8,747,046); Line 4: Amounts included on Form 990 but not on line 1; Line 5: Total revenue (8,747,046).

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Table with 5 main rows for expense reconciliation. Line 1: Total expenses (7,632,133); Line 2: Amounts included on line 1 but not on Form 990; Line 3: Subtract line 2e from line 1 (7,632,133); Line 4: Amounts included on Form 990 but not on line 1; Line 5: Total expenses (7,632,133).

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE D, PART V, LINE 4

ENDOWMENT FUNDS

THE INTEREST AND DIVIDEND EARNINGS OF THE ENDOWMENT FUND ARE TO BE USED

TO SUPPORT SERVICES FOR FAMILIES OF ADOPTED CHILDREN WITH SPECIAL NEEDS.

**Part XIV** Supplemental Information *(continued)*

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**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**  
Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

AID TO ADOPTION OF SPECIAL KIDS/ARIZONA

Employer identification number

86-0611935

ATTACHMENT 2

FORM 990, PART III, LINE 4D

OTHER PROGRAM SERVICES

TEEN PROGRAM, TRAINING AND RECRUITMENT, FAMILY CONNECTIONS CENTER, BIRTH

PARENT COUNSELING, KINSHIP

FORM 990, PART VI

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

LINE 2:

STEVEN RENDELL AND BARBARA PASHKOWSKI HAVE A BUSINESS RELATIONSHIP.

LINE 4:

THE SIGNIFICANT CHANGES TO THE BYLAWS ARE AS FOLLOWS:

VOTING BOARD MEMBERS CHANGED FROM "NOT LESS THAN 10" TO "NOT LESS THAN 3  
NOR MORE THAN 20"

OFFICERS WERE "CHAIR OF THE BOARD, VICE CHAIRS (AS ELECTED BY THE BOARD),  
TREASURER", NOW THEY ARE " CHAIR OF THE BOARD, CHIEF EXECUTIVE OFFICER,  
SECRETARY, TREASURER, AND ADDITIONAL OFFICERS."

BYLAWS MAY BE ALTERED, AMENDED OR REPEALED, AND NEW BYLAWS MAY BE  
ADOPTED, BY TWO-THIRDS OR MORE OF THE DIRECTORS PRESENT AT ANY REGULAR  
MEETING OR AT ANY SPECIAL MEETING OF THE BOARD WHERE A QUORUM IS  
PRESENT.

Name of the organization AID TO ADOPTION OF SPECIAL KIDS/ARIZONA	Employer identification number 86-0611935
<u>ATTACHMENT 2 (CONT'D)</u>	

A DIRECTOR SHALL NOT RECEIVE ANY COMPENSATION FOR HIS OR HER SERVICES AS A MEMBER OF THE BOARD, BUT BY RESOLUTION OF THE BOARD OF DIRECTORS EXPENSES OF ATTENDANCE, IF ANY, MAY BE ALLOWED FOR ATTENDANCE AT EACH ANNUAL OR SPECIAL MEETING OF THE BOARD.

OFFICERS SHALL SERVE WITHOUT SALARY UNLESS THEY ARE ALSO EMPLOYEES OF THE CORPORATION. EXPENSES INCURRED IN CONNECTION WITH PERFORMANCE OF THEIR OFFICIAL DUTIES MAY BE REIMBURSED TO OFFICERS UPON APPROVAL BY THE BOARD OF DIRECTORS.

LINE 11:

THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM. THE FINANCE COMMITTEE LED BY TIM KAEHR, THE TREASURER, REVIEWS AND APPROVES THE 990 PRIOR TO FILING.

LINE 12C:

CONFLICT OF INTEREST

MEMBERS OF THE AASK/AZ BOARD OF DIRECTORS, WHO AS INDIVIDUAL CONTRACTORS OR PART OF A BUSINESS OR PROFESSIONAL FIRM WHICH IS INVOLVED IN BUSINESS TRANSACTIONS OR CURRENT PROFESSIONAL SERVICES OF THE AGENCY, OR WHO HAVE A DIRECT OR INDIRECT INTEREST (INCLUDING THROUGH A FAMILY MEMBER) IN ANY ENTITY INVOLVED IN BUSINESS TRANSACTIONS OR CURRENT PROFESSIONAL SERVICES OF THE AGENCY, MUST DISCLOSE THIS RELATIONSHIP AND ALL MATERIAL FACTS RELATED THERETO TO THE BOARD OF DIRECTORS AND NOT PARTICIPATE IN ANY VOTE

Name of the organization

AID TO ADOPTION OF SPECIAL KIDS/ARIZONA

Employer identification number

86-0611935

ATTACHMENT 2 (CONT'D)

TAKEN REGARDING SUCH TRANSACTIONS OR SERVICES AND SHALL RECUSE HIMSELF OR  
HERSELF FROM ANY DISCUSSIONS OR DELIBERATIONS REGARDING THE SAME AT THE  
REQUEST OF EITHER THE CHAIR OF THE BOARD OR THE BOARD OF DIRECTORS.

LINE 15A:

THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS DOES AN ANNUAL  
REVIEW OF SALARIES OF OTHER NOT-FOR-PROFITS IN THE AREA AND USES THIS  
INFORMATION TO SET COMPENSATION AND COMPENSATION RANGES FOR THE CEO. THE  
DATE OF THE LAST REVIEW WAS DECEMBER 2009.

LINE 19:

THE ORGANIZATION MAKES ITS ARTICLES OF INCORPORATION AND BYLAWS, CONFLICT  
OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON  
REQUEST.