



Bales & Associates, Inc.

F I N A N C I A L E X P E R T S

ACCOUNTING • TAX • PAYROLL

(816) 478-8989 • Fax (816) 366-2401
www.bales-associates.com

P.O. Box 6424
Lee's Summit, MO 64064-6424

791 NE Anderson Lane
Lee's Summit, MO 64064-1247

August 8, 2016

Mr. Leon Fisher, CFO
Foster Adopt Connect, Inc.
18600 E. 37th Terrace, Box 11
Independence, MO 64057-1707

Re: 2015 Tax Return

Dear Leon:

Enclosed is the 2015 Federal tax return (Form 990) for Foster Adopt Connect, Inc. along with an extra copy for the Missouri Attorney General. Please have an officer sign, date and mail both copies in the attached envelopes by August 15, 2016. To ensure proof of delivery, we recommend mailing the returns using certified mail with postmarked receipts or USPS Priority Mail.

A bound copy of the tax return is included for your file. Please let us know if extra copies are needed for distribution to donors or other interested parties.

Thank you very much for your business. We truly appreciate this opportunity to be of service to you and FosterAdopt Connect. Please call or email with any questions.

Very truly yours,

Thomas D. Bales, CPA, CFP®

Enclosures

2015 Exempt Organization Business Tax Return
prepared for:

Foster Adopt Connect, Inc.
18600 E. 37th Terrace, Box 11
Independence, MO 64057-1707

Bales & Associates, Inc.
P.O. Box 6424
Lee's Summit, MO 64064

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2015 calendar year, or tax year beginning , 2015, and ending ,	
B Check if applicable:	C Name of organization Foster Adopt Connect, Inc.
<input type="checkbox"/> Address change	D Employer identification number 43-1895965
<input checked="" type="checkbox"/> Name change	Doing business as FosterAdopt Connect
<input type="checkbox"/> Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/suite
<input type="checkbox"/> Final return/terminated	18600 E. 37th Terrace Box 11
<input type="checkbox"/> Amended return	City or town, state or province, country, and ZIP or foreign postal code
<input type="checkbox"/> Application pending	Independence MO 64057-1707
	G Gross receipts \$ 3,244,030.
	F Name and address of principal officer:
	Loretta A. Ross 18600 E. 37th Terrace Independence MO 64057
I Tax-exempt status	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
J Website: www.fosteradopt.org	If 'No,' attach a list. (see instructions)
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	H(c) Group exemption number ▶
L Year of formation: 2000	M State of legal domicile: MO

Part I Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>To provide foster and adoptive children the opportunity of a stable, caring and nurturing family environment by recruiting, training, supporting and providing personal advocacy for foster and adoptive parents.</u>
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 3 20
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 20
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 168
	6 Total number of volunteers (estimate if necessary) 6 62
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.
b Net unrelated business taxable income from Form 990-T, line 34 7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h) 1,589,214. 1,306,609.
	9 Program service revenue (Part VIII, line 2g) 1,498,046. 1,931,545.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 453. 37.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 22,718. 5,839.
	12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,110,431. 3,244,030.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 22,516.
	14 Benefits paid to or for members (Part IX, column (A), line 4)
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,548,181. 2,562,353.
	16a Professional fundraising fees (Part IX, column (A), line 11e)
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 253,717.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 828,526. 970,142.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,399,223. 3,532,495.
19 Revenue less expenses. Subtract line 18 from line 12 711,208. -288,465.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 4,302,098. 4,239,983.
	21 Total liabilities (Part X, line 26) 1,770,477. 1,996,827.
	22 Net assets or fund balances. Subtract line 21 from line 20 2,531,621. 2,243,156.

Part II Signature Block	
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.	
Sign Here	<input checked="" type="checkbox"/> Signature of officer Loretta A. Ross President & CEO Date
Paid Preparer Use Only	Print/Type preparer's name Thomas D. Bales Preparer's signature Thomas D. Bales Date 08/08/16 Check <input type="checkbox"/> if self-employed PTIN P00019518
	Firm's name ▶ Bales & Associates, Inc.
	Firm's address ▶ P.O. Box 6424 Lee's Summit MO 64064
	Firm's EIN ▶ 43-1948195 Phone no. (816) 478-8989
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ X**1** Briefly describe the organization's mission:

To provide foster and adoptive children the opportunity of a stable, caring and nurturing family environment by recruiting, training, supporting and providing personal advocacy for foster and adoptive parents.

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 organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 592,570. including grants of \$ 0.) (Revenue \$ 504,453.)

Licensing of foster/adopt parents: FosterAdopt Connect provides licensure services for people who are interested in providing a temporary or permanent home to Missouri kids who have been abused or neglected. Currently FosterAdopt Connect holds the licenses to over 400 foster/adopt families. Through the Licensing Program, parents receive training and have a Family Development Advocate assigned to them through the process and work with them throughout their foster/adopt journey.

4b (Code:) (Expenses \$ 498,819. including grants of \$ 0.) (Revenue \$ 566,416.)

Family Connections Intake & Assessment Shelter: The Family Connections Shelter is an 18 bed home-like shelter that helps reduce the number of children entering the foster care system by facilitating rapid reunification with biological family members when possible and to provide them with familiar and well-supported alternative kinship placements when reunification cannot be achieved.

4c (Code:) (Expenses \$ 285,116. including grants of \$ 0.) (Revenue \$ 307,771.)

Extreme Recruitment Program: Extreme Recruitment targets young people in the foster care system who are at risk of aging out, or who are considered "hard to place", providing intensive investigation and recruitment activities with the goal of finding a permanent family.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 1,430,105. including grants of \$ 0.) (Revenue \$ 1,865,390.)

4e Total program service expenses 2,806,610.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	X	
b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.		X
c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>	20a	X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	21	X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I.</i>	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II.</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI.</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X

BAA

Form 990 (2015)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

Yes No

1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	13			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		X		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-ments, filed for the calendar year ending with or within the year covered by this return	2 a	168			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2 b		X		
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a			X	
b	If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b				
4 a	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)?	4 a			X	
b	If 'Yes,' enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)					
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a			X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b			X	
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c				
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a			X	
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a			X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c			X	
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e			X	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f			X	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		X		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			X	
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9 a			X	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b			X	
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10 a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b				
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders.	11 a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b				
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a				
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13 a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13 b				
c	Enter the amount of reserves on hand	13 c				
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14 a			X	
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b				

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.Check if Schedule O contains a response or note to any line in this Part VI. ☒ X**Section A. Governing Body and Management**

		Yes	No
1 a Enter the number of voting members of the governing body at the end of the tax year	1 a 20		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b Enter the number of voting members included in line 1a, above, who are independent	1 b 20		
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?	2		X
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?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8 a	X	
b Each committee with authority to act on behalf of the governing body?	8 b	X	
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	9		X

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

	Yes	No
10 a Did the organization have local chapters, branches, or affiliates?	10 a	X
b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b	
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
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?		
a The organization's CEO, Executive Director, or top management official	15 a	X
b Other officers or key employees of the organization	15 b	X
If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).		
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	X
b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► Missouri

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ►

Leon Fisher 18600 E. 37th Terrace Independence MO 64057-1707 (816) 350-0215

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** 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.

- 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, if any. 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) Barbara Allen Board Member (Vice Chair)	1.00	X		X				0.	0.	0.
(2) Keith Ashcraft Board Member	1.00	X						0.	0.	0.
(3) J. Eugene Balloun Board Member (Vice Chair)	1.00	X		X				0.	0.	0.
(4) Jamie Buer Board Member (Treasurer)	1.00	X		X				0.	0.	0.
(5) Donna Gould Cohen Board Member	1.00	X						0.	0.	0.
(6) Lee Driver Board Member	1.00	X						0.	0.	0.
(7) Shanelle Dupree Board Member	1.00	X						0.	0.	0.
(8) Ken Eaton Board Member (Chair)	1.00	X		X				0.	0.	0.
(9) Matt Flener Board Member	1.00	X						0.	0.	0.
(10) Tom Gilcrest Board Member	1.00	X						0.	0.	0.
(11) Mark Hegarty Board Member	1.00	X						0.	0.	0.
(12) Kevin Hogan Board Member	1.00	X						0.	0.	0.
(13) Becky Joyce Board Member (Secretary)	1.00	X		X				0.	0.	0.
(14) Stephen Kaine Board Member	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(15) Keith King Board Member	1.00	X						0.	0.	0.
(16) Sandy Krigel Board Member	1.00	X						0.	0.	0.
(17) Margi Pence Board Member	1.00	X						0.	0.	0.
(18) Bill Schwarz Board Member	1.00	X						0.	0.	0.
(19) Ann Stern Board Member	1.00	X						0.	0.	0.
(20) David Woods Board Member	1.00	X						0.	0.	0.
(21) Lori Ross President & CEO	40.00			X				75,000.	0.	0.
(22) Jennifer Johnson COO	40.00			X				62,346.	0.	0.
(23)										
(24)										
(25)										
1 b Sub-total.								137,346.	0.	0.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								137,346.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns 1 a				
	b Membership dues 1 b				
	c Fundraising events 1 c 87,683.				
	d Related organizations 1 d				
	e Government grants (contributions) 1 e				
	f All other contributions, gifts, grants, and similar amounts not included above 1 f 1,218,926.				
	g Noncash contributions included in lines 1a-1f: \$				
	h Total. Add lines 1a-1f	1,306,609.			
Program Service Revenue	2 a Intake and assessment Business Code 624200	465,972.	465,972.	0.	0.
	b Post-adoptive services 624200	150,000.	150,000.	0.	0.
	c Licensing 624200	504,403.	504,403.	0.	0.
	d Behavior intervention 624200	100,157.	100,157.	0.	0.
	e LINC Funds Springfield 624200	149,250.	149,250.	0.	0.
	f All other program service revenue	561,763.	561,763.	0.	0.
	g Total. Add lines 2a-2f	1,931,545.			
	3 Investment income (including dividends, interest and other similar amounts)	37.	0.	0.	37.
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
Other Revenue	6 a Gross rents (i) Real (ii) Personal				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
	8 a Gross income from fundraising events (not including: . \$ 87,683. of contributions reported on line 1c). See Part IV, line 18. a				
	b Less: direct expenses b				
	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities. See Part IV, line 19. a				
b Less: direct expenses b					
c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances a					
b Less: cost of goods sold b					
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				
11 a Other 900099	5,839.	5,839.	0.	0.	
b					
c					
d All other revenue					
e Total. Add lines 11a-11d	5,839.				
12 Total revenue. See instructions	3,244,030.	1,937,384.	0.	37.	

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).

Check if Schedule O contains a response or note to any line in this Part IX. ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	2,168,931.	1,914,460.	107,737.	146,734.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9 Other employee benefits.	124,272.	102,316.	15,002.	6,954.
10 Payroll taxes.	269,150.	236,115.	7,942.	25,093.
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion.	8,668.	1,723.	0.	6,945.
13 Office expenses.	68,472.	48,353.	15,212.	4,907.
14 Information technology.	25,117.	12,770.	10,216.	2,131.
15 Royalties.				
16 Occupancy.	137,076.	95,140.	36,465.	5,471.
17 Travel.	100,570.	95,065.	1,124.	4,381.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	60,599.	60,507.	0.	92.
20 Interest.	84,442.	2,999.	81,443.	0.
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	123,135.	0.	123,135.	0.
23 Insurance.	26,352.	22,103.	2,403.	1,846.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Professional services.	53,279.	23,434.	29,042.	803.
b Other program expenses.	40,548.	39,502.	311.	735.
c Telephone.	30,916.	21,475.	8,001.	1,440.
d Office equipment rental.	23,523.	19,223.	1,847.	2,453.
e All other expenses.	187,445.	111,425.	32,288.	43,732.
25 Total functional expenses. Add lines 1 through 24e.	3,532,495.	2,806,610.	472,168.	253,717.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X. ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash — non-interest-bearing	727,574.	1	241,302.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	122,802.	3	101,205.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	1,756.	7	802.
	8 Inventories for sale or use	4,718.	8	10,001.
	9 Prepaid expenses and deferred charges	14,061.	9	17,461.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,120,096.		
	b Less: accumulated depreciation	10b 250,884.		
		3,431,187.	10c	3,869,212.
	11 Investments — publicly traded securities		11	
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program-related. See Part IV, line 11		13	
14 Intangible assets		14		
15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,302,098.	16	4,239,983.	
Liabilities	17 Accounts payable and accrued expenses	67,306.	17	112,298.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,703,171.	23	1,884,529.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,770,477.	26	1,996,827.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,355,065.	27	1,933,056.
	28 Temporarily restricted net assets	176,556.	28	310,100.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2,531,621.	33	2,243,156.
	34 Total liabilities and net assets/fund balances	4,302,098.	34	4,239,983.

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Form 990 (2015)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,244,030.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,532,495.
3	Revenue less expenses. Subtract line 2 from line 1	3	-288,465.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,531,621.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,243,156.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

		Yes	No
1	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.		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2 b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2 c	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	
3 a	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
3 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		

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Form 990 (2015)

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

Foster Adopt Connect, Inc.

Employer identification number

43-1895965

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 (Form 990 or 990-EZ).)
- 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990 or 990-EZ) 2015

Part III 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
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, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions).					12	
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 ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	%
16a 33-1/3% support test — 2015. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33-1/3% support test — 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test — 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test — 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
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 ▶ <input type="checkbox"/>		

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)	431,939.	642,640.	1,061,856.	1,248,430.	1,118,372.	4,503,237.
2 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	50,879.	70,568.	87,415.	95,993.	138,325.	443,180.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5	482,818.	713,208.	1,149,271.	1,344,423.	1,256,697.	4,946,417.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						4,946,417.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6	482,818.	713,208.	1,149,271.	1,344,423.	1,256,697.	4,946,417.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	30.	27.	32.	453.	37.	579.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	30.	27.	32.	453.	37.	579.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	482,848.	713,235.	1,149,303.	1,344,876.	1,256,734.	4,946,996.
14 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. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	99.99 %
16 Public support percentage from 2014 Schedule A, Part III, line 15.	16	99.99 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	0.01 %
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	0.01 %

- 19a 33-1/3% support tests — 2015.** 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 — 2014.** 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 Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	<input type="checkbox"/>	<input type="checkbox"/>
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	<input type="checkbox"/>	<input type="checkbox"/>
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	<input type="checkbox"/>	<input type="checkbox"/>
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination	<input type="checkbox"/>	<input type="checkbox"/>
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	<input type="checkbox"/>	<input type="checkbox"/>
4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	<input type="checkbox"/>	<input type="checkbox"/>
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	<input type="checkbox"/>	<input type="checkbox"/>
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	<input type="checkbox"/>	<input type="checkbox"/>
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document)	<input type="checkbox"/>	<input type="checkbox"/>
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	<input type="checkbox"/>	<input type="checkbox"/>
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	<input type="checkbox"/>	<input type="checkbox"/>
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI	<input type="checkbox"/>	<input type="checkbox"/>
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	<input type="checkbox"/>	<input type="checkbox"/>
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	<input type="checkbox"/>	<input type="checkbox"/>
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI	<input type="checkbox"/>	<input type="checkbox"/>
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	<input type="checkbox"/>	<input type="checkbox"/>
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	<input type="checkbox"/>	<input type="checkbox"/>
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below	<input type="checkbox"/>	<input type="checkbox"/>
b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	<input type="checkbox"/>	<input type="checkbox"/>

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3	

Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- a ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

	Yes	No
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions).	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1 a	
b	Average monthly cash balances	1 b	
c	Fair market value of other non-exempt-use assets	1 c	
d	Total (add lines 1a, 1b, and 1c).	1 d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

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Schedule A (Form 990 or 990-EZ) 2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required).	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required – see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

BAA

Schedule A (Form 990 or 990-EZ) 2015

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes' on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public
Inspection

Employer identification number

Foster Adopt Connect, Inc.

43-1895965

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of 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' on 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 education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Preservation of a certified historic structure	
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.	
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2 d
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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, 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' on Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on 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 (ASC 958) relating to these items: a Revenue included on 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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

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? ☐ Yes ☐ No

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

1 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1 c
d Additions during the year	1 d
e Distributions during the year	1 e
f Ending balance	1 f

2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a 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 current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ %

b Permanent endowment ☐ %

c Temporarily restricted endowment ☐ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3 a 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

	Yes	No
3a(i)		
3a(ii)		
3b		

b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	200,625.			200,625.
b Buildings	3,380,719.		130,075.	3,250,644.
c Leasehold improvements				
d Equipment	538,752.		120,809.	417,943.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ☐ 3,869,212.

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Schedule D (Form 990) 2015

Part VII Investments – Other Securities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) . . ▶		

Part VIII Investments – Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . . ▶		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
(11) _____	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	3,244,030.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1		3	3,244,030.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3,244,030.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	3,532,495.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1		3	3,532,495.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	3,532,495.

Part XIII Supplemental Information.

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, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization

Foster Adopt Connect, Inc.

Employer identification number

43-1895965

Part I Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|--|---|
| a <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	SPECIAL EVENT REVENUES (total number)	(add column (a) through column (c))
REVENUE	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

Part III Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(add column (a) through column (c))
REVENUE	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes _____ % No	Yes _____ % No	Yes _____ % No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If 'No,' explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If 'Yes,' explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

- | | | |
|---|------|---|
| a The organization's facility | 13 a | % |
| b An outside facility | 13 b | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If 'Yes,' enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

Foster Adopt Connect, Inc.

Employer identification number

43-1895965

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) -----							
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3 Enter total number of other organizations listed in the line 1 table ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Food pantry & clothing closet	370	7,598.			
2 Camps, music & swim lessons, repairs and tires	24	25,828.			
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is
at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

Foster Adopt Connect, Inc.

Employer identification number

43-1895965

Pt VI, Line 19 When requested, documents are made available to requestor as quickly as possible.

Pt VI, Line 12c Within the policy are guidelines and procedures including duty to disclose, procedures for addressing, investigating, and the results from violations.

Pt VI, Line 11b Due to limited funds, the books of the association are not completely closed until late Summer. This results in a fully prepared tax return being unavailable until after the first extended due date. The audit and return are reviewed at the next board meeting and any changes or amendments, if needed are addressed at that time.

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 4d (continued)

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

Code:		Description:	General - various programs and allocations of
Expenses	1,430,105.		revenue and expenses to program services to
Grants Of	0.		comply with and fulfill mission statement.
Revenue.	1,865,390.		

**Application for Extension of Time To File an
Exempt Organization Return**► **File a separate application for each return.**

OMB No. 1545-1709

► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.***Enter filer's identifying number, see instructions**

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions.		Employer identification number (EIN) or
	Foster Adopt Connect, Inc.		43-1895965
	Number, street, and room or suite number. If a P.O. box, see instructions.		Social security number (SSN)
	18600 E. 37th Terrace, Box 11		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	Independence		MO 64057-1707

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► Leon Fisher

Telephone No. ► (816) 350-0215 Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15 , 20 16 , to file the exempt organization return for the organization named above.

The extension is for the organization's return for:

- ☒ calendar year 20 15 or
- ☐ tax year beginning , 20 , and ending , 20 .

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3 a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3 a \$	0 .
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3 b \$	0 .
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3 c \$	0 .

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Supporting Statement of:

Form 990 p 11/Line 1, column (A)

Description	Amount
Cash and cash equivalents	726,304.
Funds held by Truman Heartland Community Foundation	1,270.
Total	727,574.

Supporting Statement of:

Form 990 p 11/Line 1, column (B)

Description	Amount
Cash and cash equivalents	240,019.
Funds held by Truman Heartland Community Foundation	1,283.
Total	241,302.

Supporting Statement of:

Form 990 p 11/Line 3, column (A)

Description	Amount
Grants receivable	104,136.
Long-term unconditional promises to give, net of discount	11,159.
Unconditional promises to give	7,507.
Total	122,802.

Supporting Statement of:

Form 990 p 11/Line 3, column (B)

Description	Amount
Grants receivable	56,500.
Long-term unconditional promises to give, net of discount	8,269.
Unconditional promises to give	36,436.
Total	101,205.

Supporting Statement of:

Form 990 p 11/Line 7, column (A)

Description	Amount
Related party receivable	1,756.
Total	<u>1,756.</u>

Supporting Statement of:

Form 990 p 11/Line 7, column (B)

Description	Amount
Related party receivable	802.
Total	<u>802.</u>

Supporting Statement of:

Form 990 p 11/Line 17, column (A)

Description	Amount
Accounts payable	9,116.
Accrued payroll	36,952.
Payroll withholdings and taxes	21,238.
Total	<u>67,306.</u>

Supporting Statement of:

Form 990 p 11/Line 17, column (B)

Description	Amount
Accounts payable	7,471.
Accrued payroll	78,245.
Payroll withholdings and taxes	26,582.
Total	<u>112,298.</u>

Supporting Statement of:

Sch D, page 2/Equipment col (a)

Description	Amount
Computer equipment and software	22,469.
Furniture and Fixtures	424,287.
Playground	68,106.
Vehicles	23,890.
Total	<u>538,752.</u>



State of Missouri

Jason Kander, Secretary of State

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

N00064635
Date Filed: 11/23/2015
Jason Kander
Missouri Secretary of State

Articles of Amendment for a Nonprofit Corporation

(Submit with filing fee of \$10.00)

The undersigned corporation, for the purpose of amending its articles of incorporation, hereby executes the following articles of amendment:

1. The name of corporation is: Midwest Foster Care and Adoption Association, Inc. N00064635
Name Charter Number
2. The amendment was adopted on 9/15/2015 and changed article(s) (1) to state as follows:
month/day/year
The name of the corporation shall be amended to Foster Adopt Connect, Inc.

3. If approval of members was not required, and the amendment(s) was approved by a sufficient vote of the board of directors or incorporators, check here and skip to number (5): ☒
4. If approval by members was required, check here and provide the following information: ☐
 - A. Number of memberships outstanding:
 - B. Complete either C or D:
 - C. Number of votes for and against the amendments(s) by class was:

Class	Number entitled to vote	Number voting for	Number voting against
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- D. Number of undisputed votes cast for the amendment(s) was sufficient for approval, and was:

Class:	Number Voting undisputed:
_____	_____
_____	_____
_____	_____

The number of votes cast in favor of the amendment(s) by each class was sufficient for approval by that class.

5. If approval of the amendment(s) by some person(s) other than the members, the board or the incorporators was required pursuant to section 355.606, check here to indicate that approval was obtained: ☒

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)

Loretta A. Ross
Authorized signature of officer or chairman of the board

Loretta A. Ross
Printed Name

President & CEO
Title

11/23/2015
Date

Name and address to return filed document:

Name: Loretta A. Ross

Address: 18600 E. 37 th Terrace

City, State, and Zip Code: Independence, Missouri 64057

ORI-11242015-1860 State of Missouri

No of Pages 1 Page



Amend/Restate - Non-Profit

STATE OF MISSOURI



Jason Kander
Secretary of State

CERTIFICATE OF AMENDMENT

WHEREAS,

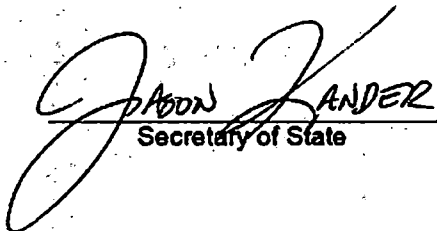
Foster Adopt Connect, Inc.
N00064635

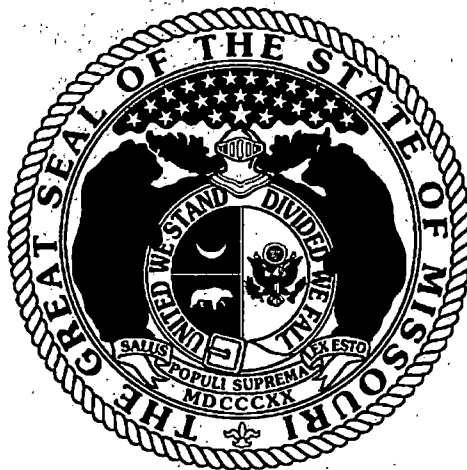
Formerly,

MIDWEST FOSTER CARE AND ADOPTION ASSOCIATION, INC.

a corporation organized under The Missouri Nonprofit Corporation Law has delivered to me Articles of Amendment of its Articles of Incorporation and has in all respects complied with the requirements of law governing the Amendment of Articles of Incorporation under The Missouri Nonprofit Corporation Law, and that the Articles of Incorporation of said corporation are amended in accordance therewith.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 23rd day of November, 2015.


Secretary of State



FOSTER ADOPT CONNECT, INC.
Financial Statements
and Independent Auditors' Report
December 31, 2015 and 2014

FOSTER ADOPT CONNECT, INC.

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HUTCHINS & HAAKE, LLC

Certified Public Accountants

College Boulevard and Quivira Road
11900 College Boulevard, Suite 310
Overland Park, Kansas 66210
Phone (913) 338-4455
Fax (913) 338-4458

INDEPENDENT AUDITORS' REPORT

The Board of Directors of
Foster Adopt Connect, Inc.
Independence, Missouri

Report on the Financial Statements

We have audited the accompanying financial statements of Foster Adopt Connect, Inc. (the Organization) a Missouri nonprofit corporation, which comprise the statement of financial position as of December 31, 2015 and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the 2015 financial statements referred to above present fairly, in all material respects, the financial position of Foster Adopt Connect, Inc. as of December 31, 2015, and the results of its activities and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Prior Period Financial Statements

The financial statements of Foster Adopt Connect, Inc. as of December 31, 2014, were audited by other auditors whose report dated July 22, 2015, expressed an unmodified opinion on those statements.

Hutchins & Haake, LLC

Hutchins & Haake, LLC
Certified Public Accountants

July 7, 2016
Overland Park, Kansas

FOSTER ADOPT CONNECT, INC.

Statements of Financial Position

December 31, 2015 and 2014

	2015	2014
<u>Assets</u>		
Current assets:		
Cash and cash equivalents	\$ 240,019	\$ 726,304
Funds held by Truman Heartland Community Foundation	1,283	1,270
Grants receivable	56,500	104,136
Related party receivable	802	1,756
Unconditional promises to give, current portion	36,436	7,507
Prepaid expenses	17,461	14,061
Inventory	10,001	4,718
Total current assets	362,502	859,752
Property and equipment, net	3,869,212	3,431,187
Long-term unconditional promises to give, net of discount	8,269	11,159
Total assets	<u>\$ 4,239,983</u>	<u>\$ 4,302,098</u>
<u>Liabilities and net assets</u>		
Current liabilities:		
Accounts payable	\$ 7,471	\$ 9,116
Accrued payroll	78,245	36,952
Payroll withholdings and taxes	26,582	21,238
Current portion of notes payable	39,623	38,338
Total current liabilities	151,921	105,644
Notes payable, net of current portion	1,844,906	1,664,833
Total liabilities	1,996,827	1,770,477
Net assets:		
Unrestricted	1,933,056	2,355,065
Temporarily restricted	310,100	176,556
Total net assets	2,243,156	2,531,621
Total liabilities and net assets	<u>\$ 4,239,983</u>	<u>\$ 4,302,098</u>

The accompanying notes are an integral part of these financial statements.

FOSTER ADOPT CONNECT, INC.

Statement of Activities

For the Year Ended December 31, 2015

	Unrestricted	Temporarily Restricted	Total
Public support and revenues:			
Contributions and grants	\$ 442,882	\$ 675,490	\$ 1,118,372
Intake and assessment	465,972	-	465,972
Post-adoptive services contract income	150,000	-	150,000
Licensing contract income	504,403	-	504,403
Behavioral intervention income	100,157	-	100,157
LINC funds - Springfield	149,250	-	149,250
LINC extreme recruitment contract income	450,000	-	450,000
Other earned income	1,091	-	1,091
Conference fees and sponsorships	12,250	-	12,250
Stepdown shelter income	99,513	-	99,513
Gain from sale of tax credits	100,554	-	100,554
Interest income	37	-	37
Other income	4,748	-	4,748
Total public support and revenues	<u>2,480,857</u>	<u>675,490</u>	<u>3,156,347</u>
Special event revenues	138,325	-	138,325
Less: Cost of direct benefit to donors	<u>(50,642)</u>	<u>-</u>	<u>(50,642)</u>
Net income from special events	<u>87,683</u>	<u>-</u>	<u>87,683</u>
Net assets, released from restrictions	<u>541,946</u>	<u>(541,946)</u>	<u>-</u>
	<u>3,110,486</u>	<u>133,544</u>	<u>3,244,030</u>
Expenses:			
Program	2,806,610	-	2,806,610
Administrative	472,168	-	472,168
Fundraising	<u>253,717</u>	<u>-</u>	<u>253,717</u>
	<u>3,532,495</u>	<u>-</u>	<u>3,532,495</u>
Change in net assets	(422,009)	133,544	(288,465)
Net assets, beginning of year	<u>2,355,065</u>	<u>176,556</u>	<u>2,531,621</u>
Net assets, end of year	<u>\$ 1,933,056</u>	<u>\$ 310,100</u>	<u>\$ 2,243,156</u>

The accompanying notes are an integral part of these financial statements.

FOSTER ADOPT CONNECT, INC.

Statement of Activities

For the Year Ended December 31, 2014

	Unrestricted	Temporarily Restricted	Total
Public support and revenues			
Contributions and grants	\$ 585,825	\$ 662,605	\$ 1,248,430
Intake and assessment	310,518	-	310,518
Post-adoptive services contract income	150,750	-	150,750
Licensing contract income	599,194	-	599,194
Behavioral Intervention Income	75,000	-	75,000
LINC funds - Springfield	74,784	-	74,784
LINC extreme recruitment contract income	275,000	-	275,000
Other earned income	143	-	143
Conference fees and sponsorships	12,800	-	12,800
Gain from sale of tax credits	287,325	-	287,325
Rental income	18,270	-	18,270
Interest income	453	-	453
Other income	4,305	-	4,305
Total public support and revenues	<u>2,394,367</u>	<u>662,605</u>	<u>3,056,972</u>
Special event revenues	95,993	-	95,993
Less: Cost of direct benefit to donors	(42,534)	-	(42,534)
Net income from special events	<u>53,459</u>	<u>-</u>	<u>53,459</u>
Net assets, released from restrictions	1,732,703	(1,732,703)	-
	<u>4,180,529</u>	<u>(1,070,098)</u>	<u>3,110,431</u>
Expenses			
Program	1,867,761	-	1,867,761
Administrative	297,274	-	297,274
Fundraising	234,188	-	234,188
	<u>2,399,223</u>	<u>-</u>	<u>2,399,223</u>
Change in net assets	1,781,306	(1,070,098)	711,208
Net assets, beginning of year	<u>573,759</u>	<u>1,246,654</u>	<u>1,820,413</u>
Net assets, end of year	<u>\$ 2,355,065</u>	<u>\$ 176,556</u>	<u>\$ 2,531,621</u>

The accompanying notes are an integral part of these financial statements.

FOSTER ADOPT CONNECT, INC.

Statements of Functional Expenses

For the Years Ended December 31, 2015 and 2014

	2015				2014			
	Program	Administrative	Fundraising	Total	Program	Administrative	Fundraising	Total
Salaries	\$ 1,914,460	\$ 107,737	\$ 146,734	\$ 2,168,931	\$ 1,148,730	\$ 70,788	\$ 133,455	\$ 1,352,973
Payroll taxes	236,115	7,942	25,093	269,150	108,207	7,000	12,819	128,026
Other personnel costs	102,316	15,002	6,954	124,272	59,919	2,806	4,457	67,182
	<u>2,252,891</u>	<u>130,681</u>	<u>178,781</u>	<u>2,562,353</u>	<u>1,316,856</u>	<u>80,594</u>	<u>150,731</u>	<u>1,548,181</u>
Parent training	7,870	-	-	7,870	3,272	-	-	3,272
Lawyers for Kids	10,666	-	-	10,666	14,711	-	-	14,711
Technology support	12,770	10,216	2,131	25,117	12,311	8,682	580	21,573
Other contracted services	-	-	-	-	9,701	-	45	9,746
Depreciation	-	123,135	-	123,135	910	61,935	-	62,845
Dues and subscriptions	7,419	1,518	1,758	10,695	4,017	2,670	929	7,616
Insurance	22,103	2,403	1,846	26,352	14,316	3,230	1,720	19,266
Interest	2,999	81,443	-	84,442	2,686	38,901	-	41,587
Conference	60,507	-	92	60,599	18,852	-	575	19,427
Meals and entertainment	39,259	1,099	1,970	42,328	13,116	1,591	1,644	16,351
Miscellaneous	3,681	16,487	9,196	29,364	8,907	13,826	1,404	24,137
Office expenses	48,353	15,212	4,907	68,472	31,612	12,317	6,251	50,180
Office equipment rental	19,223	1,847	2,453	23,523	18,482	3,156	1,379	23,017
Postage and delivery	3,515	584	3,358	7,457	4,981	3,427	2,127	10,535
Printing	4,302	341	16,289	20,932	707	2,440	-	3,147
Advertising	1,723	-	6,945	8,668	549	2,485	3,536	6,570
Professional services	23,434	29,042	803	53,279	139,067	33,026	2,432	174,525
Rent and occupancy expense	95,140	36,465	5,471	137,076	110,682	25,258	6,020	141,960
Other fundraising expenses	2,535	12,159	10,013	24,707	-	-	50,101	50,101
Other program expenses	39,502	311	735	40,548	24,553	38	-	24,591
Specific assistance to individuals	32,178	100	1,148	33,426	22,516	-	-	22,516
Telephone	21,475	8,001	1,440	30,916	26,949	1,206	3,356	31,511
Travel	95,065	1,124	4,381	100,570	68,008	2,492	1,358	71,858
	<u>\$ 2,806,610</u>	<u>\$ 472,168</u>	<u>\$ 253,717</u>	<u>\$ 3,532,495</u>	<u>\$ 1,867,761</u>	<u>\$ 297,274</u>	<u>\$ 234,188</u>	<u>\$ 2,399,223</u>

The accompanying notes are an integral part of these financial statements.

FOSTER ADOPT CONNECT, INC.

Statements of Cash Flows

For the Years Ended December 31, 2015 and 2014

	<u>2015</u>	<u>2014</u>
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	\$ (288,465)	\$ 711,208
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	123,135	62,845
Decrease (increase) in operating assets:		
Grants receivable	47,636	(21,636)
Related party receivable	954	-
Unconditional promises to give	(26,039)	168,154
Prepaid expenses	(3,400)	4,857
Inventory	(5,283)	464
Increase (decrease) in operating liabilities:		
Accounts payable and accrued expenses	44,992	24,278
Rental deposit	-	(6,862)
Net cash provided by (used in) operating activities	<u>(106,470)</u>	<u>943,308</u>
CASH FLOWS FROM INVESTING ACTIVITIES		
Investment in property and equipment	(561,160)	(2,465,910)
Funds held by Truman Heartland Community Foundation	<u>(13)</u>	<u>(9)</u>
Net cash used in investing activities	<u>(561,173)</u>	<u>(2,465,919)</u>
CASH FLOWS FROM FINANCING ACTIVITIES		
Issuance of new debt	219,696	1,036,561
Debt repayments	<u>(38,338)</u>	<u>(35,904)</u>
Net cash provided by financing activities	<u>181,358</u>	<u>1,000,657</u>
NET DECREASE IN CASH AND CASH EQUIVALENTS	<u>(486,285)</u>	<u>(521,954)</u>
CASH AND CASH EQUIVALENTS, beginning of year	<u>726,304</u>	<u>1,248,258</u>
CASH AND CASH EQUIVALENTS, end of year	<u><u>\$ 240,019</u></u>	<u><u>\$ 726,304</u></u>
Supplemental disclosure of cash flow information:		
Cash paid for interest	\$ 84,442	\$ 41,587

The accompanying notes are an integral part of these financial statements.

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 1 –Summary of Significant Accounting Policies

A. Nature of Activities

Foster Adopt Connect, Inc. (formerly known as Midwest Foster Care and Adoption Association, Inc.) (the Organization), a nonprofit organization, was organized with the purpose of providing foster and adoptive children the opportunity of a stable, caring, and nurturing family environment by recruiting, training, supporting, and providing personal advocacy for foster and adoptive parents. The Organization opened an Intake and Assessment Shelter in July 2012.

B. Basis of Accounting

The policy of the Organization is to prepare its financial statements on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. Under this method, revenues are recognized when earned, and expenses and purchases are recognized when the obligation is incurred.

C. Financial Statement Presentation

Financial statement presentation follows the recommendations of FASB ASC 958-205 "Financial Statements of Not-for-Profit Organizations". Under this standard, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Unrestricted Net Assets

Unrestricted net assets include all assets which are neither temporarily nor permanently restricted. Unrestricted net assets may include Board-designated funds that are not restricted by the donor. Earnings on investments are reported as increases in unrestricted net assets unless their use is limited by donor stipulation or by laws.

Temporarily Restricted Net Assets

Temporarily restricted net assets include gifts for which donor-imposed restrictions have not been met, trust activity, deferred gifts and pledges receivable for which the ultimate purpose of the proceeds is not permanently restricted.

Permanently Restricted Net Assets

Permanently restricted net assets include contributed net assets which require, by donor restriction, that the corpus be invested in perpetuity and only the income be made available for program operations in accordance with donor restrictions. There were no permanently restricted net assets at December 31, 2015 and 2014.

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 1 –Summary of Significant Accounting Policies (*continued*)

D. Unconditional Promises to Give

The Organization utilizes FASB ASC 958-605, "Not-for Profit Entities Revenue Recognition." This standard requires that unconditional promises to give (pledges) be recorded as receivables and revenues and requires the Organization to distinguish between contributions received for each net asset category in accordance with donor imposed restrictions.

The Organization receives multi-year promises. The accompanying financial statements reflect multi-year promises discounted by the Organization's expected rate of return for the applicable number of years. Unconditional promises to give due in the next year are reflected as current promises to give and are recorded at their net realizable value.

Unconditional promises to give due in subsequent years are reflected as long-term promises to give and are recorded at the present value of their expected cash flows, using applicable interest rates as established by the U.S. Department of the Treasury at the date the pledge was made.

E. Contributed Materials and Services

The Organization records various types of in-kind contributions. Contributed services are recognized at fair value if the services received (a) create or enhance long-lived assets or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Contributions of tangible assets are recognized at fair value when received. The amounts reflected in the accompanying financial statements as in-kind contributions are offset by like amounts included in expenses or additions to property and equipment.

F. Volunteers

Many individuals volunteer their time and perform a variety of tasks that assist the Organization with its operations. The value of volunteer services has not been recorded in the financial statements since those services do not meet the criteria for recognition.

G. Bequests

Bequests to the Organization from trusts and estates are recorded as income in the year the assets are received due to the uncertainty of the actual amounts to be received at the time the bequests are made.

H. Cash and Cash Equivalents

For the purposes of the statement of cash flows, the Organization considers all highly liquid investments purchased with an original maturity date of three months or less to be cash equivalents.

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 1 –Summary of Significant Accounting Policies (*continued*)

I. Inventory

The Organization receives gifts-in-kind of inventory for the food and clothing bank. Inventory consists of these gifts-in-kind and other items purchased by the Organization and are stated at the lower of cost (first in, first out) or market.

J. Property and Equipment and Depreciation

Property and equipment are recorded at cost for all purchases over \$1,000. Donated property and equipment are recorded at their fair value on the date of the donation. Depreciation is computed under the straight-line method using the following estimated useful lives:

Buildings and improvements	10 - 39 years
Furniture and equipment	3 - 5 years
Automobiles	5 years

Major renewals and betterments greater than \$1,000 are capitalized. Maintenance, repairs, and minor renewals less than \$1,000 are expensed. When property and equipment are retired or otherwise disposed of, the related costs and accumulated depreciation are removed from the accounts and any resulting gains or losses are included in income.

K. Income Taxes

The Organization is organized as a not-for-profit corporation and qualifies as tax exempt under Section 501(c)(3) of the Internal Revenue Code. However, income from certain activities not directly related to the Organization's tax-exempt purpose may be subject to taxation as unrelated business income. In addition, the Organization qualifies for the charitable contribution deductions under Section 170(b)(1)(A) and has been classified as an Organization other than a private foundation. Accordingly, no provision has been made for income taxes in these financial statements.

The Organization has adopted the provisions of FASB ASC 740-10, "Accounting for Uncertain Tax Positions". The Organization has evaluated its tax positions and does not believe there are any uncertain tax positions taken by the Organization. The Organization's Form 990, Return of Organization Exempt from Income Tax, for the years 2012 and forward are subject to examination by the IRS, generally for three years after they were filed.

L. Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 1 –Summary of Significant Accounting Policies (*continued*)

M. Revenue Recognition

Contracts with governmental and other entities are generally recorded as revenue when the related costs are incurred or when the Organization has performed the service and is allowed to bill under the terms of the related agreement.

N. Contributions

Contributions with donor restrictions are reported as increases in unrestricted net assets if the restrictions are met within the same reporting period that the contribution was received.

Conditional promises to give are recognized only when the conditions on which they depend are substantially met and the promises become unconditional.

O. Expense Allocation

The costs of providing various programs and other activities have been summarized on a functional basis in the accompanying statements of functional expenses. Directly identifiable expenses are charged to the programs and supporting services to which they relate. Expenses related to more than one function are allocated to programs and supporting services, primarily based on staffing levels. Administrative expenses include those expenses that are not directly identifiable with any other specific function but provide the overall support and direction of the Organization.

P. Advertising

Advertising costs of the Organization are expensed as incurred. For the years ended December 31, 2015 and 2014, the Organization incurred advertising expenses of \$8,668 and \$6,570, respectively.

Note 2 - Funds Held By Truman Heartland Community Foundation

The Organization has an operating reserve fund at Truman Heartland Community Foundation (THCF). Disbursements can be made, with Board approval, and upon approval by THCF management. These funds were invested in the THCF money market/certificate of deposit pool at December 31, 2015 and 2014.

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 3 – Property and Equipment

Property and equipment consisted of the following at December 31:

	2015	2014
Land	\$ 200,625	\$ 145,000
Buildings and improvements	3,380,719	3,125,469
Computer equipment and software	22,469	22,469
Furniture and Fixtures	424,287	242,108
Vehicles	23,890	23,890
Playground	68,106	-
	<u>4,120,096</u>	<u>3,558,936</u>
Less accumulated depreciation	<u>(250,884)</u>	<u>(127,749)</u>
Property and equipment, net	<u>\$ 3,869,212</u>	<u>\$ 3,431,187</u>

Depreciation expense for the years ended December 31, 2015 and 2014 was \$123,135 and \$62,845, respectively.

Note 4 – Unconditional Promises to Give

Unconditional promise to give as of December 31, 2015 and 2014 consists of the following:

	2015	2014
Receivable in less than one year	\$ 36,436	\$ 7,507
Receivable in one to five years	9,444	11,772
Less unamortized present value discount	<u>(1,175)</u>	<u>(613)</u>
Total long-term receivables	<u>8,269</u>	<u>11,159</u>
Net unconditional promises to give	<u>\$ 44,705</u>	<u>\$ 18,666</u>

Of the \$44,705 and \$18,666 in unconditional promises to give at December 31, 2015 and 2014, \$30,000 and \$14,306 were due from 2 and 2 donors, respectively.

Long-term promises to give are recognized at fair value, using a discount rate of 1.75%.

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 5 – Long Term Debt

Long term debt consists of the following at December 31:

	<u>2015</u>	<u>2014</u>
Mortgage payable to a bank, payable in monthly installments of \$5,072 including interest at 4.5% with a payment of the remaining unpaid balance on March 18, 2018. This loan is secured by the related building and land.	\$ 570,250	\$ 604,090
Mortgage payable to a bank, payable in monthly installments of \$533 including interest at 4.5% with a payment of the remaining unpaid balance on March 31, 2017. This loan is secured by the related building and land.	58,153	62,519
A construction loan from a bank to finance renovations to a building purchased in 2013. The loan, which matures in March 2019, has a limit of \$2,000,000 and includes interest payable at 4.5%. The loan is secured by substantially all assets of the Organization.	<u>1,256,126</u>	<u>1,036,562</u>
Total long-term debt	1,884,529	1,703,171
Less current portion	<u>(39,623)</u>	<u>(38,338)</u>
Noncurrent maturities of long-term debt	<u>\$ 1,844,906</u>	<u>\$ 1,664,833</u>

The aggregate amounts of principal maturities for the years ended December 31 are as follows:

2016	\$ 39,623
2017	91,289
2018	497,491
2019	<u>1,256,126</u>
Total	<u>\$ 1,884,529</u>

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 6 – Capital Campaign

In 2011, the Organization began the Forever Home Capital Campaign for the purchase and development of properties for its current and future programs. Expenses related to this campaign are included on the Statement of Functional Expenses in their related categories as fundraising costs. The Campaign has been reorganized to focus on retiring the debt related to the acquisition and construction of the shelter and home office facilities, and has a remaining goal to pay off the principal balances of the construction loan and mortgages described in Note 5.

Note 7 – Temporarily Restricted Net Assets

Temporarily restricted net assets were available for the following purposes at December 31:

	2015	2014
Advocacy Support Group Grants	\$ 4,750	\$ -
Behavioral Interventionists Program Grant	121,198	-
Jewish Heritage- Data Base	-	6,065
Lawyers for Kids	9,569	10,256
Grant for Truck	6,000	-
Bank of America (30 Days to Family)	-	30,000
LINC-Western Missouri Post Adoptive	-	1,156
LINC- Extreme Recruitment	61,272	646
LINC-Southwest Missouri Post Adoptive	-	26,195
Health Care Foundation (30 Days to Family)	-	87,027
Kansas Health Care Foundation Grant	6,205	-
Sammy's Window	1,561	-
Speas Grant for Advocacy	50,000	-
Sumacher- Kansas	-	10,211
Support Group Meals	1,000	-
Royals Charity- Playground	11,000	5,000
Tax Credits for Shelter Operations	12,077	-
Therapist Salary Grant	25,468	-
	<u>\$ 310,100</u>	<u>\$ 176,556</u>

Note 8 – Concentration of Credit Risk

The Organization maintains cash in bank deposit accounts and money market accounts at financial institutions. Accounts at the bank institutions are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000 and at times may exceed this limit.

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 9 – Significant Concentrations

For the year ended December 31, 2015 revenue from three major contractors accounted for 48% of total public support and revenues. For the year ended December 31, 2014 contributions from one major contributor accounted for 13% of total public support and revenues and revenue from one major contractor accounted for 20% of total public support and revenues.

Note 10 – Rental Income

The Organization purchased a building to serve as the main office facilities during the year ended December 31, 2013. The building had two existing tenants leasing space from the previous owner, and those leases were assumed by the Organization. The leases were allowed to expire without renewal in 2014 and the Organization does not plan to utilize any of the building space for leasing purposes in the future. Rental income received during the year ended December 31, 2014 was \$18,270. No rental income was received during the year ended December 31, 2015.

Note 11 – Business Combinations

Effective April 29, 2014, the Organization entered into an assignment and assumption agreement with Kansas Foster and Adoptive Children, Inc. (KFAC) (a Kansas nonprofit organization). KFAC formerly provided services to foster and adoptive families in Kansas, and the parties entered into the agreement in order to consolidate resources and further the outreach and impact of Foster Adopt Connect, Inc. (Midwest Foster Care and Adoption Association). The agreement calls for the Organization to assume the right to all of KFAC's contracts. The only asset that was transferred to Midwest Foster Care and Adoption Association as part of this agreement was \$6,000 in cash. No liabilities were assumed by the Organization. KFAC dissolved upon completion of the agreement.

Effective August 1, 2014, the Organization entered into an interim Management Services Agreement with Family Matters Resource Center (FMRC) (a Missouri nonprofit organization). FMRC formerly provided services to foster and adoptive families in southwest Missouri, and the parties entered into the agreement in order to consolidate resources and further the outreach and impact of Foster Adopt Connect, Inc. (Midwest Foster Care and Adoption Association). Upon signing the Management Services Agreement, FMRC paid all of its debts and dissolved as a corporate entity. No liabilities were assumed by Foster Adopt Connect, Inc. (Midwest Foster Care and Adoption Association) as part of this agreement, and no assets remained to be transferred after FMRC liabilities had been paid prior to their dissolution.

Note 12 – Lease Commitment

As part of the business combination with FMRC described in Note 12, the Organization entered into a lease for office space in Springfield, Missouri in September 2014. The existing lease expired in December 2015 and required fixed monthly rental payments of \$1,600. Beginning November 2015, the Organization entered into a new lease that expires October 31, 2017 and requires fixed monthly rental payments of \$4,500. During the years ended December 31, 2015 and 2014, rent expense of \$25,000 and \$4,800, respectively, was incurred related to these leases. Future minimum lease payments under this operating lease for the years ending December 31, 2016 and 2017 are \$54,000 and \$45,000, respectively.

FOSTER ADOPT CONNECT, INC.

Notes to the Financial Statements

December 31, 2015 and 2014

Note 13 – Sale of Income Tax Credits

During the years ended December 31, 2015 and 2014, the Organization sold Affordable Housing Assistance Program (AHAP) tax credits they held with the State of Missouri to donors in exchange for contributions. The Organization received \$100,554 and \$287,325 respectively, in exchange for the rights to tax credits during the years ended December 31, 2015 and 2014. The income related to the sale of the tax credits has been segregated from general contributions on the income statement.

Note 14 – Related Party Transactions

During the years ended December 31, 2015 and 2014, the Organization received contributions from members of the Board of Directors of \$53,210 and \$72,974, respectively. Additionally, \$41,503 and \$13,279 of the balances in pledges receivable were from related parties at December 31, 2015 and 2014, respectively.

Note 15 – Subsequent Events

Subsequent to December 31, 2015, the Organization sold a property located in Independence, Missouri. The property had a book value of \$79,576 and a remaining mortgage balance of \$58,153 at December 31, 2015. The property was sold in April 2016 for \$107,000.

Subsequent events have been evaluated through July 7, 2016, which is the date the financial statements were available to be issued.