Financial Statements and Independent Auditors' Report

December 31, 2018 and 2017

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

INDEPENDENT AUDITORS' REPORT

The Board of Directors and Management 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 statements of financial position as of December 31, 2018 and 2017 and the related statements of activities, functional expenses and cash flows for the years 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 audits. We conducted our audits 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 financial statements referred to above present fairly, in all material respects, the financial position of Foster Adopt Connect, Inc. as of December 31, 2018 and 2017, 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.

Hutchins & Haake, LLC Certified Public Accountants

Hutchins + Haake, LLC

July 19, 2019 Overland Park, Kansas

Statements of Financial Position December 31, 2018 and 2017

		2018	 2017
<u>Assets</u>			
Current assets:	_		
Cash and cash equivalents	\$	2,009,786	\$ 1,100,824
Cash - restricted for capital campaign		137,582	 65,118
Total cash and cash equivalents		2,147,368	1,165,942
Contracts and grants receivable		664,261	269,654
Related party receivable		-	782
Unconditional promises to give, current portion		10,000	7,500
Prepaid expenses		14,275	31,894
Inventory		8,073	 9,680
Total current assets		2,843,977	1,485,452
Property and equipment, net		3,954,362	3,543,309
Long-term unconditional promises to give, net of discount		10,551	 13,051
Total assets	\$	6,808,890	\$ 5,041,812
Liabilities and Net Assets			
Current liabilities:			
Accounts payable	\$	28,481	\$ 20,550
Accrued payroll		133,124	104,888
Payroll withholdings and taxes		38,817	37,707
Current portion of long-term debt		40,385	38,587
Total current liabilities		240,807	201,732
Long-term debt, net of current portion		1,546,770	1,587,128
Total liabilities		1,787,577	 1,788,860
		, ,	, ,
Net assets:			
Without Donor or Contractual Restrictions		4,723,993	2,468,548
With Donor or Contractual Restrictions		297,320	 784,404
Total net assets		5,021,313	 3,252,952
Total liabilities and net assets	\$	6,808,890	\$ 5,041,812

Statement of Activities

For the Year Ended December 31, 2018

	Without Restrictions	With Restrictions	Total
Public support and revenues:			
Contributions and grants	\$ 872,019	\$ 356,883	\$ 1,228,902
Intake and assessment	870,935	-	870,935
Post-adoptive services contract income	1,082,800	-	1,082,800
Licensing contract income	447,257	-	447,257
Behavioral intervention income	2,979,257	-	2,979,257
LINC funds - Springfield	-	-	-
LINC extreme recruitment contract income	570,000	-	570,000
LINC - CCYP	570,000	-	570,000
Gain from sale of tax credits	91,259	-	91,259
Placement and parent aid	2,241	-	2,241
Interest income	4,813	-	4,813
Other income	13,669	-	13,669
Total public support and revenues	7,504,250	356,883	7,861,133
Special event revenues	320,909	-	320,909
Less: cost of direct benefit to donors	(91,328)		(91,328)
Net income from special events	229,581		229,581
Net assets, released from restrictions	843,967	(843,967)	-
,	8,577,798	(487,084)	8,090,714
- Fyransas			
Expenses: Program	5,789,101	-	5,789,101
Administrative	286,599	_	286,599
Fundraising	246,653	_	246,653
. a.i.a.a.a.g	6,322,353		6,322,353
Change in net assets	2,255,445	(487,084)	1,768,361
Net assets, beginning of year	2,468,548	784,404	3,252,952
Net assets, end of year	\$ 4,723,993	\$ 297,320	\$ 5,021,313

Statement of Activities

For the Year Ended December 31, 2017

	Without Restrictions		With Restrictions		Total
Public support and revenues					
Contributions and grants	\$	273,186	\$	517,392	\$ 790,578
Intake and assessment		798,720		-	798,720
Post-adoptive services contract income		678,437		-	678,437
Licensing contract income		480,854		-	480,854
Behavioral intervention income		1,375,691		-	1,375,691
LINC extreme recruitment contract income		585,000		-	585,000
LINC - CCYP		588,810			588,810
Gain from sale of tax credits		122,879		-	122,879
Interest income		392		-	392
Other income		954			 954
Total public support and revenues		4,904,923		517,392	5,422,315
Special event revenues		203,692		-	203,692
Less: cost of direct benefit to donors		(60,757)		-	(60,757)
Net income from special events		142,935		-	142,935
Net assets, released from restrictions		157,029		(157,029)	_
, 161 466 66, 1616 664 1616 1616 16		5,204,887		360,363	5,565,250
Expenses					
Program		4,402,910		_	4,402,910
Administrative		300,765		_	300,765
Fundraising		179,513		_	179,513
, and an		4,883,188		-	4,883,188
Change in net assets		321,699		360,363	682,062
Net assets, beginning of year		2,146,849		424,041	2,570,890
Net assets, end of year	\$	2,468,548	\$	784,404	\$ 3,252,952

Statements of Functional Expenses

For the Years Ended December 31, 2018 and 2017

2018						20	17						
		Program	Adr	ministrative	Fι	undraising	Total	Program	Α	dministrative	Fι	undraising	Total
Salaries	\$	4,154,144	\$	172,881	\$	192,833	\$ 4,519,858	\$ 3,009,195	\$	211,616	\$	118,633	\$ 3,339,444
Payroll taxes		353,810		8,928		15,364	378,102	257,481		18,132		10,165	285,778
Other personnel costs		220,845		16,410		4,581	241,836	161,159		10,899		6,610	178,668
		4,728,799		198,219		212,778	5,139,796	3,427,835		240,647		135,408	3,803,890
5		= 004					= 004	40.400					40.400
Parent training		5,261		-		-	5,261	10,102		-		-	10,102
Lawyers for Kids		10,476		-		-	10,476	12,168		-		-	12,168
Technology support		45,252		339		247	45,838	56,586		1,191		1,787	59,564
Depreciation		159,302		6,638		-	165,940	157,759		6,573		-	164,332
Dues and subscriptions		30,601		-		5,784	36,385	26,171		-		4,713	30,884
Insurance		48,681		260		323	49,264	27,249		574		861	28,684
Interest		70,462		2,935		-	73,397	71,303		2,971		-	74,274
Gain on disposal of property		-		(3,401)		-	(3,401)	-		-		-	-
Meals and entertainment		2,914		2,128		646	5,688	15,978		-		130	16,108
Miscellaneous		3,137		5,216		4,404	12,757	13,035		-		-	13,035
Office expenses		30,356		365		1,835	32,556	24,913		525		786	26,224
Office equipment rental		19,095		86		126	19,307	21,105		444		667	22,216
Postage and delivery		3,862		65		1,725	5,652	4,282		312		1,084	5,678
Printing		1,723		-		429	2,152	1,428		166		63	1,657
Advertising		8,166		759		363	9,288	248		-		572	820
Professional services		59,445		46,125		9,047	114,617	56,251		40,942		26,220	123,413
Rent and occupancy expense		195,233		24,634		1,589	221,456	150,592		3,170		4,755	158,517
Other fundraising expenses		-		409		77	486	-		-		631	631
Other program expenses		67,236		-		4,549	71,785	77,978		-		-	77,978
Specific assistance to individuals		138,202		-			138,202	115,649		-		-	115,649
Telephone		27,081		129		63	27,273	21,898		461		692	23,051
Travel		133,817		1,693		2,668	138,178	110,380		2,789		1,144	114,313
	\$	5,789,101	\$	286,599	\$	246,653	\$ 6,322,353	\$ 4,402,910	\$		\$	179,513	\$ 4,883,188

Statements of Cash Flows

For the Years Ended December 31, 2018 and 2017

	2018	2017
Cash flows from operating activities: Change in net assets Adjustments to reconcile change in net assets to net cash provided by operating activities:	\$ 1,768,361	\$ 682,062
Depreciation Gain on disposal of property Decrease (increase) in operating assets:	165,940 (3,401)	164,332 -
Contracts and grants receivable Related party receivable Unconditional promises to give	(394,607) 782	(86,814) 30 7,290
Prepaid expenses Inventory Increase (decrease) in operating liabilities:	13,119 1,607	(10,252) 2,901
Accounts payable and accrued expenses Real estate tax liability	 37,277	40,110 (1,249)
Net cash provided by operating activities Cash flows from investing activities:	 1,589,078	798,410
Proceeds from sale of property Investment in property and equipment	 3,700 (572,792)	- (70,719)
Net cash used in investing activities	(569,092)	(70,719)
Cash flows from financing activities: Debt repayments	 (38,560)	(90,282)
Net cash used in financing activities	 (38,560)	 (90,282)
Net increase in cash and cash equivalents Cash and cash equivalents, beginning of year	981,426 1,165,942	637,409 528,533
Cash and cash equivalents, end of year	\$ 2,147,368	\$ 1,165,942
Supplemental disclosure of cash flow information: Cash paid for interest	\$ 73,397	\$ 74,274

Supplemental investing and financing activities:

During the year ended December 31, 2018, the Organization acquired land and a building with a capitalized cost of \$531,900. As part of this transaction, \$4,500 that had previously been held as a deposit was applied to the purchase of the property.

FOSTER ADOPT CONNECT, INC. Notes to the Financial Statements December 31, 2018 and 2017

Note 1 -Summary of Significant Accounting Policies

A. Nature of Activities

Foster Adopt Connect, 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. Net Assets

Net assets, revenues, gains, and losses are classified based on the existence or absence of donor or grantor imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

Net Assets Without Donor or Contractual Restrictions – Net assets available for use in general operations and not subject to donor or contractual (or certain grantor) restrictions.

Net Assets With Donor or Contractual Restrictions – Net assets subject to donor or contractual (or certain grantor) imposed restrictions. Some contractual-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the contract. Other contractual-imposed restrictions are perpetual in nature, where the contract stipulates that resources be maintained in perpetuity. Contractual-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

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.

FOSTER ADOPT CONNECT, INC. Notes to the Financial Statements December 31, 2018 and 2017

Note 1 - Summary of Significant Accounting Policies (continued)

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.

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
Furniture and equipment
Automobiles

10 - 39 years
3 - 5 years
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.

FOSTER ADOPT CONNECT, INC. Notes to the Financial Statements December 31, 2018 and 2017

Note 1 -Summary of Significant Accounting Policies (continued)

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 2015 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.

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 net assets without restrictions 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.

Notes to the Financial Statements December 31, 2018 and 2017

Note 1 –Summary of Significant Accounting Policies (continued)

P. Advertising

Advertising costs of the Organization are expensed as incurred. For the years ended December 31, 2018 and 2017, the Organization incurred advertising expenses of \$9,288 and \$820, respectively.

Q. Subsequent Events

Subsequent events have been evaluated through July 19, 2019, which is the date the financial statements were available to be issued.

R. Reclassifications

Certain prior year amounts have been reclassified to conform to current year presentation. The reclassifications did not result in a change to the previously reported changes in net assets.

S. Adoption of New Accounting Standards

On August 18, 2016, FASB issued Accounting Standards Update (ASU) 2016-14, Not-for-Profit Entities (Topic 958) – Presentation of Financial Statements of Not-for-Profit Entities. The update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. The Organization has implemented ASU 2016-14 and has adjusted the presentation in these financial statements accordingly. The ASU has been applied retrospectively to all periods presented, however no adjustments to previously reported amounts resulted from the implementation of ASU 2016-14.

Note 2 – Property and Equipment

Property and equipment consisted of the following at December 31:

	2018	2017
Land	\$ 250,025	\$ 180,625
Buildings and improvements	3,803,839	3,341,340
Computer equipment and software	30,762	22,469
Furniture and Fixtures	433,783	431,483
Vehicles	85,675	52,875
Playground	78,934	78,934
	4,683,018	4,107,726
Less accumulated depreciation	(728,656)	(564,417)
Property and equipment, net	\$ 3,954,362	\$ 3,543,309

Depreciation expense for the years ended December 31, 2018 and 2017 was \$165,940 and \$164,332, respectively.

Notes to the Financial Statements December 31, 2018 and 2017

Note 3 – Unconditional Promises to Give

Unconditional promise to give as of December 31, 2018 and 2017 consists of the following:

	2018	2017	
Receivable in less than one year	\$ 10,000	\$ 7,500	
Receivable in one to five years	11,000	13,500	
Less unamortized present value discount	(449)	(449)	
Total long-term receivables	 10,551	 13,051	
Net unconditional promises to give	\$ 20,551	\$ 20,551	

Of the \$20,551 in unconditional promises to give at December 31, 2018 and 2017, \$15,000 were due from one donor. Long-term promises to give are recognized at fair value, using a discount rate of 1.75%.

Note 4 – Long Term Debt

Long term debt consists of the following at December 31:

	2018	 2017
Note payable to a bank, payable in monthly installments of \$9,330 including interest at 4.5% with payment of remaining unpaid balance due in May 2024. The loan is secured by substantially all assets of the Organization.		
	\$ 1,587,155	\$ 1,625,715
Total long-term debt Less current portion	 1,587,155 (40,385)	 1,625,715 (38,587)
Noncurrent maturities of long-term debt	\$ 1,546,770	\$ 1,587,128

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

Total	\$ 1,587,155
Thereafter	1,365,744
2023	48,444
2022	46,287
2021	44,227
2020	42,068
2019	\$ 40,385

Note 5 – Line of Credit

The Organization has a line of credit with a limit of \$100,000, payable on demand. The line is secured by all of the Organization's assets. The line bears interest at the Wall Street Journal Prime Rate, subject to a floor of 5.0% (5.5% at December 31, 2018) and matures on August 1, 2019. Prior to the renewal, the line was subject to an interest rate of 4.25% at December 31, 2017. There was no balance outstanding at December 31, 2018 and 2017.

Notes to the Financial Statements

December 31, 2018 and 2017

Note 6 -Net Assets with Restrictions

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

,	2018	2017
AA of Matrimonial Lawyers Foundation	\$ -	\$ 5,000
Advocacy Support Group Grants	-	25,940
Asphalt playground	1,478	1,478
Behavioral Interventionists Program Grant	-	36,569
Breidenthal-Snyder	-	1,000
2017-Licensing Program	-	70,000
Capital Campaign - Kansas	55,176	-
Capital Campaign - Springfield	137,582	65,118
Foundation	10,000	-
CFO SWMO BI Grant	-	12,000
Grant	20,000	-
Foundation	-	4,836
Freshstart Furnishings	34,420	-
Grant for Truck	-	6,000
	8,300	11,565
Health Care Foundation (30 Days to Family)	-	47,148
Jackson Co. Outside Agency	-	86
Foundation	5,000	-
Journey Home	-	4,277
Kansas Health Care Foundation Grant	-	6,205
Lawyers for Kids	1,824	9,569
LINC ARC KC	-	23,442
LINC ARC NWMO	-	4,723
LINC ARC SWMO	-	8,652
LINC CCYP Combat	-	104,725
LINC CCYP KC	-	9,989
LINC CCYP SWMO	-	10,772
LINC- Extreme Recruitment	-	48,118
LINC- Extreme Recruitment KC	-	1,196
LINC-Extreme Recruitment SWMO	-	348
Moulton Fund	503	-
RR Grant	6,550	-
Charity- Playground	-	11,000
Sammy's Window	34	6,561
Shelter Activities	-	3,041
Grant for Advocacy	-	96,371
Support Group Meals	-	489
SWMO Sertoma	1,170	-
Grant	7,427	78
Tax Credits for Shelter Operations	-	109,640
Therapist Salary Grant	-	25,468
Foundation SWMO	-	3,000
Verizon Grant-NWMO	5,856	10,000
Wells Fargo	2,000	
	\$ 297,320	\$ 784,404

Notes to the Financial Statements

December 31, 2018 and 2017

Note 7 – Governing Board Designations

The board of directors has designated, from net assets without donor or contractual restrictions, net assets totaling \$444,324 and \$100,014 for purpose of a liquidity reserve at December 31, 2018 and 2017, respectively

Note 8 – Fundraising Campaigns

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 was closed in November 2016 and has been reorganized into the Capacity Building Campaign to focus on increasing the capacity for future growth. The new campaign additionally has a remaining goal to pay off the principal balances of the construction loan and mortgages described in Note 4 and increasing the reserve funds. Additionally, the Organization has started a capital campaign for the purchase and renovation of a building in Springfield, Missouri.

Note 9 – Concentration of Credit Risk

The Organization maintains cash in bank deposit 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.

Note 10 – Significant Concentrations

For the year ended December 31, 2018 revenue from two major contractors accounted for 69% of total support and revenues. For the year ended December 31, 2017 revenue from three major contractors accounted for 65% of total support and revenues.

Note 11 - Lease Commitments

The Organization leases office space in multiple locations. A Springfield, Missouri lease for office space required fixed monthly rental payments of \$4,500 and expired December 31, 2017, at which time the building was purchased by the Organization. A Poplar Bluff, Missouri lease for office space expired June 30, 2019 and required fixed monthly rental payments of \$1,550. The Poplar Bluff lease converted to a month-to-month commitment upon its expiration. A Chillicothe, Missouri lease for office space expires September 30, 2020 and requires fixed monthly rental payments of \$1,400. In addition, the Organization has a month-to-month lease at an Olathe, Kansas location. During the years ended December 31, 2018 and 2017, rent expense of \$92,050 and \$79,500, respectively, was incurred related to these leases. Future minimum lease payments under these operating leases are as follows for the years ending December 31:

2019	\$ 26,100
2020	12,600
Total	\$ 38,700

FOSTER ADOPT CONNECT, INC. Notes to the Financial Statements

December 31, 2018 and 2017

Note 12- Sale of Income Tax Credits

During the years ended December 31, 2018 and 2017, 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 \$91,259 and \$122,879 respectively, in exchange for the rights to tax credits during the years ended December 31, 2018 and 2017. The income related to the sale of the tax credits has been segregated from general contributions on the income statement.

Note 13 - Related Party Transactions

During the years ended December 31, 2018 and 2017, the Organization received contributions from members of the Board of Directors of \$56,320 and \$84,561, respectively. Additionally, \$20,551 of the balances in pledges receivable were from related parties at December 31, 2018 and 2017.

Note 14 - Retirement Plan

The Organization sponsors a 403(b) plan that is open to participation by all employees who have completed at least 60 days of employment, provided they remain employed through December 31 of each respective year. The Organization matches up to 6% of the employee's voluntary contribution. The Organization's contribution to the Plan for the years ended December 31, 2018 and 2017 were \$35,472 and \$27,719, respectively.

Note 15 - Liquidity and Availability

The following table reflects the Organization's financial assets as of December 31, 2018 and 2017, reduced by amounts that are not available to meet general expenditures within one year of the statement of financial position date for reasons such as contractual restrictions or internal board designations.

In addition to financial assets available to meet general expenditures over the next year, the Organization operates with a balanced budget and anticipates collecting sufficient revenue to cover general expenditures. Additionally, the Organization maintains cash reserves that are set aside to cover operational shortfalls should the need arise. As of December 31, 2018 and 2017, the cash reserves account had a balance of \$444,324 and \$100,014, respectively. Refer to the statement of cash flows which identifies the sources and uses of the Organization's cash and shows cash generated by operations for fiscal years ending December 31, 2018 and 2017.

Notes to the Financial Statements December 31, 2018 and 2017

Note 15 – Liquidity and Availability (continued)

The Organization has the following liquid resources available to meet cash needs for general expenditures within one year of the statement of financial position at December 31:

	2018			 2017
Cash and cash equivalents - without restrictions	\$	2,009,786		\$ 1,100,824
Contracts and grants receivable		664,261		269,654
Related party receivable		-		782
Unconditional promises to give, current portion		10,000		7,500
Prepaid expenses		14,275		31,894
Inventory		8,073		9,680
	\$	2,706,395		\$ 1,420,334

Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2018

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Internal Revenue Service

Open to Public Inspection

Α	For the 2	2018 calen	dar year, or tax y	year begin	ning		, 201	8, and er	nding	3		,	
В	Check if ap	plicable:	С								D Employ	er identi	fication number
	Addres	ss change	FOSTER ADC	PT CON	NECT INC	•					43-	1895	965
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	Applic	ation pending	F Name and addre	ss of principa	l officer: LOR	I ROSS			1.	H(a) is this a	-		H''63 H''6
			SAME AS C	ABOVE						H(b) Are all s If "No." a	ubordinates attach a list	included	d? Yes No
Ī	Tax-exer	npt status:	X 501(c)(3)	501(c) () ◄ (ir	sert no.)	4947(a)(1)	or 527	7	,		. (000	
J	Websi	te: ► WW	W.FOSTERAD	OPT.OR		······································			1	H(c) Group ex	xemption nu	ımber 🕨	-
K	Form of	organization:	X Corporation	Trust	Association	Other >		L Year of fo		on: 2000			egal domicile: MO
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			dependent voting									4	
es	ı		of individuals er									5	374
Activities &			of volunteers (e									6	249
턍			ed business reve									7a	249
~			d business taxabl									7b	0.
	2 110		- Duomiodo taxtabi								ior Year	7.5	Current Year
	8 Co	ntributions	and grants (Par	t VIII line	1h)						,056,3	202	1,545,233.
e			rice revenue (Pa	-	•						, 507, 5		6,522,490.
Revenue			ncome (Part VIII,								•		
ě	1											392.	8,247.
-			e (Part VIII, colu)54.	13,636.
			e – add lines 8 t								,565,2		8,089,606.
			imilar amounts p								115,6	49.	138,202.
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Ø	15 Sa	laries, othe	er compensation	, employe	e benefits (P	art IX, colu	mn (A), lin	es 5-10) .		. 3	,803,8	390.	5,139,796.
Se	16a Pro	ofessional	fundraising fees	(Part IX, o	column (A), I	ine 11e)							
Expenses	b To	tal fundrais	sing expenses (P	Part IX. col	umn (D). lin	e 25) ►		242,14	4				
Щ			ses (Part IX, colu								062 6	- 40	1 042 247
	l	-									963,6		1,043,247.
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ssets or 3alances			/m 1 \ / '' 1 = "								of Currer		End of Year
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δĒ	22 Ne	t assets or	fund balances.	Subtract li	ne 21 from li	ine 20				. 3,	, 252, 9	52.	5,021,313.
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com	olete. Decla	ration of prepa	rer (other than officer)) is based on	all information of	f which prepare	r has any knov	vledge.		•	, ,	,	ef, it is true, correct, and
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	eparer	Firm's name	HUTCHINS	& HAAKI	E, LLC								
Us	e Only	Firm's addre	ess 11900 CC	DLLEGE BI	LVD STE 31	0							
			OVERLAND	PARK, I	KS 66210		•				Phone no.	913-3	338-4455
May	the IDS	disques th	is return with the			o2 (coo inc	tructions)						Y Vos No

Form 990 (2018) FOSTER ADOPT CONNECT INC 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	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Χ
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	3		Х
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	4	Х	
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	5		Х
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	6		Х
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	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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.	9		Х
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	10		Х
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	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
t	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.	11 b		Х
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	11 c		Х
c	I 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.	11 d		Х
6	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
t	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	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
Ł	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.	14b		Х
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.	15		X
	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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		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).	17		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.	18	Х	Λ
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'		Λ	•••
20°	complete Schedule G, Part III	19 20a		X
∠vd	Total the organization operate one of more hospital facilities: If Tes, complete scriedule n	Lua		11
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
∠ I	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? If 'Yes,' complete Schedule I, Parts I and II	21		Х

Part IV Checklist of Required Schedules (continue	Part IV Chacklist of Paguired Schodules (continue
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			Yes	No
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? If 'Yes,' complete Schedule I, Parts I and III	22	Х	
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		Х
24	a 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? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a.	24a		Х
	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 24d		
25	a 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? If 'Yes,' complete Schedule L, Part I	25a		Х
	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		Х
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		Х
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? If 'Yes,' complete Schedule L, Part III.	27		Х
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? If 'Yes,' complete Schedule L, Part IV	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		Х
	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? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	29		X
30				
	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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? If 'Yes,' complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a 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		Х
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		Х
38	Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			· [
	• Enter the number reported in Pay 2 of Form 1006. Enter 0, if not applicable.		Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
	(gambling) winnings to prize winners?	1 c	Х	
BA		Form	990	(2018)

Form 990 (2018) FOSTER ADOPT CONNECT INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 374			
ı	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
ı	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>	3 b		
4 8	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		Х
ı	n 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 8	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
•	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 8	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		Х
ı	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	Χ	
ı	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	I If 'Yes,' indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ı	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h	Х	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	/ 11	21	
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	of If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
•	Note. See the instructions for additional information the organization must report on Schedule O.	ısa		
	'			
	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			
	Enter the amount of reserves on hand	14-		Х
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Λ
	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
10	If 'Yes,' complete Form 4720, Schedule O.	10		- 23

LEON FISHER 18600

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. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. 22 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 ... 18 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 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 Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 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 Χ 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 Χ 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a Χ b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Χ Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ **14** Did the organization have a written document retention and destruction policy?..... 14 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? Χ a The organization's CEO, Executive Director, or top management official...... 15 a **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). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Χ 16 a **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 List the states with which a copy of this Form 990 is required to be filed > MO Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A 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 X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

INDEPENDENCE MO 64057-1707

350-0215

E 37TH TERRACE

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

Check 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.

				(C))						
(A) Name and Title	(B) Average hours	thar	Position (do not c than one box, unle is both an office director/trus		unles officer	ss pers and a ee)	on	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other	
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) KEN EATON	1										
VICE CHAIR	0	Х		Χ				0.	0.	0.	
(2) J EUGENE BALLOUN	1										
VICE CHAIR	0	Х		Χ				0.	0.	0.	
(3) DAVID WOODS	_ 1										
CHAIRMAN	0	Χ		Χ				0.	0.	0.	
(4) DOUGLAS GHERTNER	1										
BOARD MEMBER	0	Χ						0.	0.	0.	
(5) BECKY JOYCE	_ 1										
SECRETARY	0	Χ		Χ				0.	0.	0.	
(6) BILL SCHWARTZ	_ 1										
BOARD MEMBER	0	Х						0.	0.	0.	
(7) RAYMOND CATTANEO	1										
BOARD MEMBER	0	Χ						0.	0.	0.	
(8) KEN MARKER	1										
BOARD MEMBER	0	Χ						0.	0.	0.	
(9) KEITH ASHCROFT	1										
BOARD MEMBER	0	Χ						0.	0.	0.	
(10) KEITH KING	1										
BOARD MEMBER	0	Χ						0.	0.	0.	
(11) KEA BIRD RILEY	1										
BOARD MEMBER	0	X						0.	0.	0.	
(12) LEE DRIVER	2										
TREASURER	0	X		Χ				0.	0.	0.	
(13) MARGI PENCE	1										
BOARD MEMBER	0	Χ						0.	0.	0.	
(14) MARK HEGARTY	_ 1										
BOARD MEMBER	0	Χ						0.	0.	0.	

Pa	rt VII Section A. Officers, Directors, Tri		ney	Em	•		es,	and	a Hignest Com	ipensated Emp	oyees	5 (contir	nued)
		(B)			(C	•							
	(A)	Average	(do	not cl	Pos heck	sition more	than	one	(D)	(E)		(F)	
	Name and title	hours per	box	i, unles	ss pe	erson	is both or/trus	h an	Reportable compensation from	Reportable compensation from		stimated unt of oth	
		week (list any							the organization	related organizations	con	npensatio	
		hours	Individual or director	Site	Officer	Кеу	ighe ighe	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	org	from the ganization	
		related	ects euro	ltior	œ.	щ	ist c	可				nd related janization	
		organiza - tions	ndividual trustee or director	Institutional trustee		employee	i, old						
		below dotted	Iste	- E		0	ens						
		line)		&			Highest compensated employee						
(15)	SHANELLE DUPREE	1											
(13)	BOARD MEMBER		Х						0.	0.			0.
(16)	STEPHEN KAINE	1	71						0.	0.			<u> </u>
<u> </u>	BOARD MEMBER		X						0.	0.			0.
(17)	JANICE BREAKFIELD	1	71						0.	0.			<u> </u>
<u>\'.'/</u>	BOARD MEMBER		Х						0.	0.			0.
/1Q\	TOM GILCREST		Λ						0.	0.			<u> </u>
(10)		-1	v						0	0			0
(10)	BOARD MEMBER	0	X						0.	0.			0.
(13)	LEON FISHER	$-\frac{40}{0}$	1		v				02 120	0			0
(20)	CFO	0			X				83,128.	0.			0.
(20)	BRIDGETT MYERS	$-\frac{40}{0}$	-		37				76 007	0			^
(21)	CHIEF DEVELOP	0	-		X				76,827.	0.			0.
(21)	LORI ROSS	$-\frac{40}{0}$	-		3.7				100 504	0			^
(22)	PRESIDENT & CEO	0	-		X				129,594.	0.			0.
(22)	JENNIFER JOHNSON	$-\frac{40}{9}$	-						06 744	•			•
(22)	C00	0			X				96,744.	0.			0.
(23)			-										
(24)													
<u>\/</u>			1										
(25)													-
			-										
11	Sub-total								386,293.	0.			0.
	Total from continuation sheets to Part VII, Secti							▶	0.	0.			0.
	I Total (add lines 1b and 1c)							▶	386,293.	0.			0.
	Total number of individuals (including but not limited							ved			ensatio	n	
	from the organization 1				-,				, ,				
	<u> </u>											Yes	No
3	Did the organization list any former officer, direct	tor or tru	ctoo	kov		مامد	100	or b	aighact compans	tod amplayaa			
3	on line 1a? If 'Yes,' complete Schedule J for suc	ch individu	ial	, ney			,				. 3		Χ
4	For any individual listed on line 1a, is the sum of	f roportab	lo co	mno	nca	tion	and	oth	or componention	from			
7	the organization and related organizations greate	er than \$1	50,0	00?	lf 'Y	es,	com	iple	te Schedule J for	ITOTT			
	such individual										. 4	\sqcup	X
5	Did any person listed on line 1a receive or accru	e comper	satio	n fr	om a	any	unre	late	ed organization or	individual	_		3.7
500	for services rendered to the organization? If 'Yes	s, comple	te So	cnea	uie	J to	r suc	en p	erson		. 5		X
<u> </u>	tion B. Independent Contractors Complete this table for your five highest compen	sated ind	anan	dent	COL	ntra	ctore	tha	at received more th	nan \$100 000 of			
•	compensation from the organization. Report compen	sation for	the c	alend	dar y	year	endi	ng v	with or within the or	ganization's tax year			
	(A) Name and business add								(B)		. (C)	
	Name and business add	ress							Description of	of services	Compe	eńsatio	n
													_
2	Total number of independent contractors (including to	out not lim	ited to	o tho	se I	isted	d abo	ve)	who received more	than			
	\$100,000 of compensation from the organization	► 0											

	Check if Schedule O contains a response or note to	any line in this Part V	III		
		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 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 g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f	1.			
<u>မ</u> ပ	Business Code	1,545,233.			
Program Service Revenue	2a BEHAVIOR INTERVENTION b POST-ADOPTIVE SERVICES c INTAKE AND ASSESSMENT d LINC EXTREME RECRUITMENT	2,979,257. 1,082,800. 870,935. 570,000.	2,979,257. 1,082,800. 870,935. 570,000.		
ä	LINC CCYP All other program service revenue WKS	570,000.	570,000.		
<u>p</u>	g Total. Add lines 2a-2f	449,498.	449,498.		
<u>α</u>	Investment income (including dividends, interest and other similar amounts)	4,813.			4,813.
	5 Royalties				
	7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other 3,700				
	b Less: cost or other basis and sales expenses	4.	3,434.		
Other Revenue	8a Gross income from fundraising events (not including \$ 225,072. of contributions reported on line 1c). See Part IV, line 18	- 0,1011	0,101		
Ĕ	c Net income or (loss) from fundraising events	>			
0	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				
	Miscellaneous Revenue Business Code				
	11a OTHER 900099 b	13,636.	13,636.		
	d All other revenue				
	e Total. Add lines 11a-11d	10/000:	6.539.560.	0	4.813.

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).

Do i 6b,	Check if Schedule O contains a renot include amounts reported on lines 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			general	
2	Grants and other assistance to domestic individuals. See Part IV, line 22	138,202.	138,202.		
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	226,338.	208,025.	8,657.	9,656.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	4,293,520.	3,946,119.	164,224.	183,177.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,233,320.	3, 340, 113.	104,224.	103,177.
9	Other employee benefits	241,836.	220,845.	16,410.	4,581.
10	Payroll taxes	378,102.	353,810.	8,928.	15,364.
	Fees for services (non-employees):				
	Management				
	Legal				
	: Accounting	15,180.	7,873.	6,109.	1,198.
	Lobbying.				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	(A) amount, list Tine 11g expenses on Schedule O.)	99,437.	51,572.	40,016.	7,849.
	Advertising and promotion	9,288.	8,166.	759.	363.
13	·	32,556.	30,356.	365.	1,835.
14		45,838.	45,252.	339.	247.
15	Royalties.	001 456	105 000	0.4.60.4	1 500
16	Occupancy	221,456.	195,233.	24,634.	1,589.
17	Travel Payments of travel or entertainment	138,178.	133,817.	1,693.	2,668.
18	expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings				
20	Interest	73,397.	70,462.	2,935.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	165,940.	159,302.	6,638.	200
23 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.)	49,264.	48,681.	260.	323.
á	OTHER PROGRAM EXPENSES	67,276.	67,236.		40.
_	DUES AND SUBSCRIPTIONS	36,385.	30,601.		5,784.
	TELEPHONE	27,273.	27,081.	129.	63.
	OFFICE EQUIPMENT RENTAL	19,307.	19,095.	86.	126.
	All other expenses	42,472.	27,373.	7,818.	7,281.
25	Total functional expenses. Add lines 1 through 24e	6,321,245.	5,789,101.	290,000.	242,144.
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to	any line	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			1,000,810.	1	1,565,462.
	2	Savings and temporary cash investments			165,132.	2	581,906.
	3	Pledges and grants receivable, net			290,205.	3	684,812.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L	officers, mployees	directors, s. Complete		5	
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	ersons (a	as defined under		6	
S	7	Notes and loans receivable, net			782.	7	
Assets	8	Inventories for sale or use		<u> </u>	9,680.	8	8,073.
As	9	Prepaid expenses and deferred charges			31,894.	9	14,275.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1	4,683,019.	02,001		
		Less: accumulated depreciation.		728,656.	3,543,310.	10 c	3,954,363.
	11	Investments – publicly traded securities			3,343,310.	11	3,334,303.
	12	Investments – other securities. See Part IV, line 11.		L		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			5,041,813.	16	6,808,891.
	17	Accounts payable and accrued expenses	201,732.	17	240,807.		
	18	Grants payable	20177021	18	210/0011		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
es	21	Escrow or custodial account liability. Complete Part I'	V of Sch	nedule D		21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	l disqual	ified persons.		22	
	23	Secured mortgages and notes payable to unrelated th	ird partie	es	1,587,128.	23	1,546,770.
	24	Unsecured notes and loans payable to unrelated third	•	<u> </u>	=, = 0 . , = 20 .	24	_, ,
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	s to rela plete Pa	ited third parties, rt X of Schedule D.	1.	25	1.
	26	Total liabilities. Add lines 17 through 25			1,788,861.	26	1,787,578.
ses		Organizations that follow SFAS 117 (ASC 958), check hellines 27 through 29, and lines 33 and 34.	re ►	X and complete			
aŭ	27	Unrestricted net assets			2,468,548.	27	4,723,993.
3al	28	Temporarily restricted net assets			784,404.	28	297,320.
힏	29	Permanently restricted net assets		<u></u>		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	eck here	· -			
9	30	Capital stock or trust principal, or current funds			30		
Set	31	Paid-in or capital surplus, or land, building, or equipm				31	
As	32	Retained earnings, endowment, accumulated income,		<u> </u>		32	
et	33	Total net assets or fund balances		<u> </u>	3,252,952.	33	5,021,313.
_	34	Total liabilities and net assets/fund balances			5,041,813.	34	6,808,891.

Χ

3 a

3 b

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

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......

Audit Act and OMB Circular A-133?.....

in Schedule O.

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization	_				. ,	enuncation n	umber				
FOSTER ADOPT CONNECT INC					43-189						
Part I Reason for Public Cha		_			•	tructions	S				
The organization is not a private found	dation because it is: (For lines 1 through 12,	check o	nly one	box.)						
1 A church, convention of church	ies, or association of cl	hurches described in sec t	tion 170(b)(1)(A)(i).						
2 A school described in section 1	170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 or	990-EZ).)							
3 A hospital or a cooperative h	ospital service organ	ization described in sec	tion 17	0(b)(1)(A	۸)(iii).						
4 A medical research organiza	tion operated in conju	unction with a hospital of	describe	d in sec	tion 170(b)(1)(A)(iii). Enter	the hospital's				
name, city, and state:	,	,				•	•				
5 An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle	ege or university owned	or oper	ated by	a governmental u	nit describ	ped in				
6 A federal, state, or local gov	•	ental unit described in s	ection 1	70(b)(1)	(A)(v).						
7 An organization that normally r	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.)										
	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9 An agricultural research organi			•	oniunctic	on with a land gran	t collogo					
or university or a non-land-grai											
univorcity:		•		-	and state of the col	logo oi					
10 X An organization that normally r from activities related to its investment income and unre June 30, 1975. See section!	receives: (1) more than exempt functions—sul lated business taxabl	oject to certain exception e income (less section	om cont	ributions (2) no i	more than 33-1/39	% of its su	pport from gross				
11 An organization organized a	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(a)(4).						
12 An organization organized a	nd operated exclusive	elv for the benefit of, to	perform	the fun	ctions of, or to ca	rrv out the	e purposes of one				
or more publicly supported o	rganizations describe	ed in section 509(a)(1) c	r sectio	n 509(a))(2). See section !	509(a)(3).	Check the box in				
lines 12a through 12d that de a Type I. A supporting organization	, ,			•		•	supported				
organization(s) the power to re complete Part IV, Sections A	gularly appoint or elect	t a majority of the directo	rs or trus	stees of t	the supporting orga	nization. Y o	ou must				
b Type II. A supporting organiz management of the supporting must complete Part IV, Secti	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s) the supported orga), by havir anization(s)	ng control or). You				
c Type III functionally integrated organization(s) (see instruction		tion operated in connectio	n with, a	nd functio	onally integrated wit	h, its suppo	orted				
d Type III non-functionally integ functionally integrated. The c instructions). You must com	organization generally	must satisfy a distribu	nection tion req	with its s uiremen	supported organizat t and an attentive	tion(s) that ness requ	is not irement (see				
e Check this box if the organiz integrated, or Type III non-fu	ation received a writt	en determination from supporting organization	the IRS	that it is	a Type I, Type II	, Type III f	functionally				
f Enter the number of supported											
g Provide the following informatio	n about the supported	d organization(s).									
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the tion listed loverning nent?	(v) Amount of mone support (see instruct		(vi) Amount of other pport (see instructions)				
			Yes	No							
(A)											
•											
(B)											
(C)											
(D)											
(E)											
Tatal						1					

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
	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						
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 activ	ities, etc. (see ins	structions)			12	
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	nird, fourth, or fifth t	ax year as a section	on 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	olic Support P	ercentage				_
	Public support percentage for 20						%
15	Public support percentage from 2	2017 Schedule A,	Part II, line 14.			15	%
16a	33-1/3% support test—2018. If the and stop here. The organization	ne organization di qualifies as a pul	id not check the bolicly supported o	oox on line 13, and organization	d line 14 is 33-1/3	3% or more, check	this box
b	33-1/3% support test—2017. If th and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a or 16a or 16a or 16a	a, and line 15 is 3	3-1/3% or more, ch	neck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	re. Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-ad-circumstances'	and-circumstance test. The organiz	s' test, check this ation qualifies as	box and stop her a publicly support	re. Explain in Part ed organization.	VI how the►
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see inst	ructions ►

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

Sec	tion A. Public Support						_
	lar year (or fiscal year beginning in) >	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include	1 040 400	1 000 000	F06 040	700 570	1 000 000	5 140 054
2	any 'unusual grants.')	95,993.	1,089,002.	786,042. 189,759.	790,578. 203,692.	320,909.	5,142,954. 978,048.
3	Gross receipts from activities that are not an unrelated trade or business under section 513.	93,993.	107,093.	109,739.	203,092.	320, 309.	0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	1,344,423.	1,256,697.	975,801.	994,270.	1,549,811.	6,121,002.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support. (Subtract line	0.	0.	0.	0.	0.	0.
	7c from line 6.)						6,121,002.
	tion B. Total Support					1	
	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6	1,344,423.	1,256,697.	975,801.	994,270.	1,549,811.	6,121,002.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	453.	37.	604.	392.	4,813.	6,299.
	acquired after June 30, 1975						0.
	Add lines 10a and 10b	453.	37.	604.	392.	4,813.	6,299.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
	Total support. (Add lines 9, 10c, 11, and 12.)		1,256,734.			1,554,624.	6,127,301.
14	First five years. If the Form 990 organization, check this box and	is for the organiza stop here	ation's first, secon	d, third, fourth, o	r fifth tax year as	a section 501(c)(3	3) ▶
Sec	tion C. Computation of Pu	blic Support P	ercentage				_
	Public support percentage for 20	•	• • •				99.90 %
16	Public support percentage from	2017 Schedule A,	Part III, line 15	<u> </u>	<u> </u>	16	99.97 %
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	!			
17	Investment income percentage f	or 2018 (line 10c,	column (f), divide	ed by line 13, colu	ımn (f))	17	0.10 %
18	Investment income percentage f	rom 2017 Schedu	le A, Part III, line	17		18	0.03 %
19a	33-1/3% support tests—2018. If is not more than 33-1/3%, check						d line 17
	b 33-1/3% support tests—2017. 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 organi	zation did not che	ck a box on line 1	4, 19a, or 19b, c	heck this box and	see instructions.	· · · · · · · · · · · · · · · · · · ·

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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.	1		
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).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
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.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4 a		
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.	4b		
С	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.	4 c		
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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).	7		
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).	8		
9а	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 .	9a		
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 .	9b		
С	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 .	9с		
0a	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.	10a		
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.)	10b		

Part	t IV	Supporting Organizations (continued)			
11	∐ac t	he organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	gover	ning body of a supported organization?	11a		
b	A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sect	tion I	B. Type I Supporting Organizations			
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
	or ele Part \ If the direct	ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
	applie	ed to such powers during the tax year.	1		
	that o	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Sect	tion (C. Type II Supporting Organizations			
				Yes	No
	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion I	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	ne organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organ	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		nization'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			
organ		nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how reganization maintained a close and continuous working relationship with the supported organization(s).			
	voice	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
	in this	s regard.	3		
Sect	tion I	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).			
а	Т	he organization satisfied the Activities Test. Complete line 2 below.			
b	Т	he organization is the parent of each of its supported organizations. Complete line 3 below.			
С	Т	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	ารtruc	tions).	
2	Activi	ties Test. Answer (a) and (b) below.	ľ	Yes	No
	suppo organ	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was purpose to those supported organizations, and how the organization determined that these activities constituted			
		antially all of its activities.	2a		
	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
		nization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
а	Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
		e organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Sch	edule A (Form 990 or 990-EZ) 2018 FOSTER ADOPT CONNECT INC		43-18	95965 Page (
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	janizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organization	st on No	ov. 20, 1970 (explain ir st complete Sections A	Part VI). See through E.
Sec	ction 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		
Sec	ction 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):	t		
- :	a Average monthly value of securities	1a		
	b Average monthly cash balances	1b		
•	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
-	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		
Sec	ction 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	Check here if the current year is the organization's first as a non-functionally in (see instructions).	tegrated	Type III supporting org	ganization

Schedule A (Form 990 or 990-EZ) 2018

Line 8 amount divided by line 9 amount

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion 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 2018 from Section C. line 6	

(i) (ii) cess Underdistributions butions Pre-2018	(iii) Distributable Amount for 2018

BAA

Schedule A (Form 990 or 990-EZ) 2018

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.) Part VI

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	Section 501(c)(4), (5), or (6) o	tions), then organizations: Complete Part III.			
		ADOPT CONNECT INC		Employer identific	ation number
	TOSTER 1	DOI'I CONNECT THE		43-189596	55
Pa	rt I-A Complete if the o	rganization is exempt under section	on <mark>501(c)</mark> or is a s	section 527 organi	zation.
1		organization's direct and indirect political con of 'political campaign activities')	ampaign activities in	Part IV.	
2	Political campaign activity ex	xpenditures (see instructions)		▶ ξ	\$
3	Volunteer hours for political	campaign activities (see instructions)			
		rganization is exempt under section	` ' ' '		
		sise tax incurred by the organization under			
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	▶\$	0
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 :	a Was a correction made?				····· Yes No
	b If 'Yes,' describe in Part IV.				
		rganization is exempt under section			
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt functio	n activities 🟲 🕏	<u> </u>
2	Enter the amount of the filin 527 exempt function activities	g organization's funds contributed to other	organizations for sec	tion ····································	S
3	Total exempt function expen	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	▶¢	\$
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the an seceived that were promptly and directly delal action committee (PAC). If additional spanning the second of the	ivered to a separate po	olitical organization, such	n as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2018

Part II-A Complete if		on is exempt under se	ection 501(c)(3) an	d filed Form 5768 (el	
section 501	(h)).	m is exempt under so	, oct of 1 oo 1 (o)(o) un	a mea i em e/ee (e.	octon under
A Check ► if the filin	ig organization belor	ngs to an affiliated group (an	d list in Part IV each affil	iated group member's name	٠,
address,	EIN, expenses, ar	nd share of excess lobbying	g expenditures).		
B Check ► if the filing	ng organization che	ecked box A and 'limited co	ontrol' provisions apply		
(The term	Limits on Lobb 'expenditures' me	ying Expenditures ans amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence p	ublic opinion (grass roots l	obbying)		
, , ,		legislative body (direct lob	, ,,	11/100:	
, , ,	`	and 1b)		11,700.	0.
	•			0/2/0/010:	
e Total exempt purpose e	expenditures (add i	ines 1c and 1d)		6,321,245.	0.
		mount from the following to		466,062.	
If the amount on line 1e, col	umn (a) or (b) is:	The lobbying nontaxable	e amount is:		
Not over \$500,000	000 000	20% of the amount on line 1e.	# 500,000		
Over \$500,000 but not over \$1		\$100,000 plus 15% of the exces			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the exces \$225,000 plus 5% of the excess			
Over \$1,500,000 but not over \$ Over \$17,000,000	\$17,000,000	\$1,000,000.	over \$1,500,000.		
	amount (enter 25%	្រុង1,000,000. of line 1f)		116 516	
•	•	ss, enter -0		110/310:	<u> </u>
•		s, enter -0-			0.
		r line 1h or line 1i, did the or			<u> </u>
section 4911 tax for this	s year?				Yes No
		4-Year Averaging Period	Under Section 501(h)		
(Som		at made a section 501(h) e elow. See the separate ins	election do not have to		
		bying Expenditures Durin			
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2 a Lobbying nontaxable amount				466,062.	466,062.
b Lobbying ceiling amount (150% of line 2a, column (e))					699,093.
c Total lobbying expenditures				44,700.	44,700.
d Grassroots nontaxable amount				116,516.	116,516.
e Grassroots ceiling amount (150% of line 2d, column (e))					174,774.
f Grassroots lobbying expenditures					0.
BAA				Schedule C (Form	990 or 990-EZ) 2018

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(election under section 501(n)).						
-	Not be a second of the second	(a	1)		(b)	
	each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description he lobbying activity.	Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?						
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?						
	 d Mailings to members, legislators, or the public?						
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?						
	b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or				
1 2 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?				1 2 3	Yes	No
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5)	, or s	ectio	n 50 }, is	1(c)	
1	Dues, assessments and similar amounts from members		1				
2	expenses for which the section 527(f) tax was paid).						
	a Current year		2a				
	b Carryover from last year.		2 b				
	c Total		2 c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		5				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditures (see instructions)		5				

Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

	FOSTER ADOPT CONNECT INC			43-1895965
Par	Organizations Maintaining Donor Complete if the organization answ	Advised Funds or Othered 'Yes' on Form 99	n er Similar Fund D, Part IV, line 6.	s or Accounts.
		(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 are the organization's property, subject to the o	or advisors in writing that the rganization's exclusive lega	e assets held in dono I control?	or advised funds
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit compermissible private benefit?	s, and donor advisors in writ of the donor or donor adviso	ing that grant funds r, or for any other pu	can be used only urpose conferring Yes
Par	<u> </u>			
ar	Complete if the organization answ	ered 'Yes' on Form 99	0 Part IV line 7	
1	Purpose(s) of conservation easements held by			•
	Preservation of land for public use (e.g., re			a historically important land area
	Protection of natural habitat	,		a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization he last day of the tax year.	eld a qualified conservation con	ntribution in the form o	of a conservation easement on the
				Held at the End of the Tax
ä	Total number of conservation easements			2a
ŀ	Total acreage restricted by conservation easem	ents		2 b
(Number of conservation easements on a certific	ed historic structure included	d in (a)	2 c
(Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, a	and not on a historic	2 d
3	Number of conservation easements modified, trans tax year ►	ferred, released, extinguished	, or terminated by the	organization during the
4	Number of states where property subject to conserv	vation easement is located ►		
5	Does the organization have a written policy rega			
6	and enforcement of the conservation easement Staff and volunteer hours devoted to monitoring, in			
7	Amount of expenses incurred in monitoring, inspec ▶\$	ting, handling of violations, ar	d enforcing conservati	ion easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the r	equirements of section	on 170(h)(4)(B)(i) Yes
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to conservation easements.			21 11 1 2 12 1 12 1
Par	Organizations Maintaining Collec Complete if the organization answ	tions of Art, Historical ered 'Yes' on Form 99	Treasures, or O 0, Part IV, line 8	ther Similar Assets.
1 a	If the organization elected, as permitted under sart, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its finance	d for public exhibition, education	on, or research in furth	e statement and balance sheet works nerance of public service, provide,
ŀ	If the organization elected, as permitted under shistorical treasures, or other similar assets held for following amounts relating to these items:	SFAS 116 (ASC 958), to republic exhibition, education, of	oort in its revenue sta or research in furthera	atement and balance sheet works of nce of public service, provide the
	(i) Revenue included on Form 990, Part VIII, li	ne 1		
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, his amounts required to be reported under SFAS 1			·
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990 Part X			▶ \$

Part III Organizations Maintaining Co	llections of Art, Histo	rical Treasures, or	Other Similar As	sets (contin	ued)
3 Using the organization's acquisition, accession items (check all that apply):	, and other records, check ar	ny of the following that are	e a significant use of it	s collection	
a Public exhibition	d Loan o	or exchange programs			
b Scholarly research	e Other				
c Preservation for future generations	_				
4 Provide a description of the organization's colle Part XIII.	ections and explain how they	further the organization's	exempt purpose in		
5 During the year, did the organization solicit to be sold to raise funds rather than to be n	naintained as part of the or	ganization's collection?		Yes	No
Part IV Escrow and Custodial Arrange line 9, or reported an amount of	ements. Complete if thon Form 990, Part X,	ne organization ans line 21.	swered 'Yes' on F	orm 990, Pa	ırt IV,
1 a Is the organization an agent, trustee, custoon Form 990, Part X?	dian or other intermediary	for contributions or othe	r assets not included	Yes	No
b If 'Yes,' explain the arrangement in Part XII					
				Amount	
c Beginning balance			1с		
d Additions during the year			1 d		
e Distributions during the year					
f Ending balance					
2a Did the organization include an amount on					No
b If 'Yes,' explain the arrangement in Part XII	I. Check here if the explan	ation has been provided	d on Part XIII		
			222 5		
Part V Endowment Funds. Complete					
(a) Curr	ent year (b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	ers 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 cu	rrent year end balance (line	e 1g, column (a)) held a	as:		
a Board designated or quasi-endowment ►	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
b Permanent endowment ►	- % -				
c Temporarily restricted endowment	%				
The percentages on lines 2a, 2b, and 2c should	d equal 100%.				
3 a Are there endowment funds not in the possess organization by:	ion of the organization that a	re held and administered	for the	Yes	No
(i) unrelated organizations				3a(i)	
(ii) related organizations					
b If 'Yes' on line 3a(ii), are the related organi	zations listed as required o	n Schedule R?		3b	
4 Describe in Part XIII the intended uses of the	ne organization's endowme	nt funds.			
Part VI Land, Buildings, and Equipme	ent.				
Complete if the organization ar	nswered 'Yes' on Forn	n 990, Part IV, line	11a. See Form 9	90, Part X, I	ine 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	/alue
1 a Land	250,025.	. ,		250	0,025.
b Buildings			77,671.		7,177.
c Leasehold improvements			307,273.		1,718.
d Equipment			343,712.		5,443.
e Other			,		
Total. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part X, c	olumn (B), line 10c.)	· · · · · · · · · · · · · · · · · · ·	3,954	1,363.
ΡΛΛ		*		dula D (Farm 90	

Schedule D (Form 990) 2018

(a) Description of security or category (including name of security)	(b) Book value	(c) Method o	of valuation: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
<u>(C)</u>			
(D) 			
(E) 	_		
(<u>F)</u>			
(G)	_		
(H) 			
(1)	_		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		3T / 7	
Part VIII Investments — Program Related. Complete if the organization answere	d 'Yes' on Form 99	N/A D Part IV line	11c See Form 990 Part X line 1
(a) Description of investment	(b) Book value		lluation: Cost or end-of-year market value
(1)	` ` `	``	j
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(6)			
(9)			
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.	N/A	2 Part IV line	11d Soo Form 990 Part V line 1
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere	N/A d 'Yes' on Form 99:	0, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D	N/A	D, Part IV, line	11d. See Form 990, Part X, line 1
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D	N/A d 'Yes' on Form 99:	D, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D	N/A d 'Yes' on Form 99:	0, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (1) (2) (3) (4)	N/A d 'Yes' on Form 99:	D, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5)	N/A d 'Yes' on Form 99:	D, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6)	N/A d 'Yes' on Form 99:	D, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7)	N/A d 'Yes' on Form 99:	D, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8)	N/A d 'Yes' on Form 99:	D, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9)	N/A d 'Yes' on Form 99:	D, Part IV, line	
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	N/A	0, Part IV, line	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column	N/A	0, Part IV, line	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities.	M/A ed 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column	M/A ed 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes	N/A ed 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING	N/A ed 'Yes' on Form 99 escription (B) line 15.)	0, Part IV, line	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING (3)	N/A ed 'Yes' on Form 99 escription (B) line 15.)	1e or 11f. See Form	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING (3) (4)	N/A ed 'Yes' on Form 99 escription (B) line 15.)	1e or 11f. See Form	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING (3) (4) (5)	N/A ed 'Yes' on Form 99 escription (B) line 15.)	1e or 11f. See Form	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING (3) (4) (5) (6)	N/A ed 'Yes' on Form 99 escription (B) line 15.)	1e or 11f. See Form	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING (3) (4) (5) (6) (7)	N/A ed 'Yes' on Form 99 escription (B) line 15.)	1e or 11f. See Form	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING (3) (4) (5) (6) (7) (8)	N/A ed 'Yes' on Form 99 escription (B) line 15.)	1e or 11f. See Form	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING (3) (4) (5) (6) (7) (8) (9)	N/A ed 'Yes' on Form 99 escription (B) line 15.)	1e or 11f. See Form	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of liability (1) Federal income taxes (2) ROUNDING (3) (4) (5) (6) (7) (8)	N/A ed 'Yes' on Form 99 escription (B) line 15.)	1e or 11f. See Form	(b) Book value

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	_
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	8,089,606.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1	3	8,089,606.
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		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	8,089,606.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Retur	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per F Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	Retur	
	Returi	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements		1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. 2 Donated Services and Use of facilities.		1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.).		1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. 2 Donated Services and Use of facilities.		1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1.	1	1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 2 e	6,321,245.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 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. 4 a	1 2 e	6,321,245.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 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. 4 Ab b Other (Describe in Part XIII.) 4 Ab	1 2 e 3	6,321,245.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 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. 4 a	1 2 e	6,321,245.

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

BAA Schedule D (Form 990) 2018

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

FOSTER ADOPT CONNECT INC 43-1895965 **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. Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) Yes No 1 2 3 5 6 7 9 10 Total. 0. 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.

Sche	dule	G (Form 990 or 990-EZ) 2018 FOSTER	ADOPT CONNECT	INC	43-189	95965 Page 2
Par	t II	Fundraising Events. Complete if the more than \$15,000 of fundraising List events with gross receipts great the second s	event contributions	nswered 'Yes' on Fo s and gross income	orm 990, Part IV, li on Form 990-EZ,	ne 18, or reported lines 1 and 6b.
R E			(a) Event #1 FOREVER HOMES (event type)	(b) Event #2 RIBS FOR KIDS (event type)	(c) Other events 3 (total number)	(d) Total events (add column (a) through column (c))
REVENU	1	Gross receipts	126,447.	43,358.	55,267.	225,072.
Ě	2	Less: Contributions	126,447.	43,358.	55,267.	225,072.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
D	5	Noncash prizes				
ı	6	Rent/facility costs				
R C T	7	Food and beverages				
EXPERSES	8	Entertainment				
N S E	9	Other direct expenses				
S		Direct expense summary. Add lines 4 thro Net income summary. Subtract line 10 fro				
Par		Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.				oorted more than
R E V E N U			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
E	1	Gross revenue				
F	2	Cash prizes				
D X I P R E E N	3	Noncash prizes				
E N C S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes 8	Yes 8	Yes 8	
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)			
	8	Net gaming income summary. Subtract lin	ne 7 from line 1, colum	nn (d)		
9	Ente	er the state(s) in which the organization co	nducts gaming activitie	es:		

a Is the organization licensed to conduct gaming activities in each of these states?	ш
10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?	ш

sche	edule G (Form 990 or 990-EZ) 2018 FOSTER ADOPT CONNECT INC 4.	3-18959	65	Page 3
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:	1 1		
	a The organization's facility.	13 a		%
I	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 ►			
ı	a Does the organization have a contract with a third party from whom the organization receives gaming revenue b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the of gaming revenue retained by the third party \$ c If 'Yes,' enter name and address of the third party:	ne? ne amount	Yes	No
	Name •			
	Address •			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided ►			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
ı	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the	ш	
	organization's own exempt activities during the tax year ► \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, co and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide an information. See instructions.	umns (III y additior) and (nal	v);

SCHEDULE I (Form 990)

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.

2018

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

FOSTER ADOPT CONNECT INC

							10 103030	•
Pa	rt I General Information on G	rants and Assista	ance					
	Does the organization maintain records the selection criteria used to award the	he grants or assistand	ce?			or assistance, and		Yes X No
2	Describe in Part IV the organization's pr	rocedures for monitorin	g the use of grant fu	nds in the United States.				
Pa	rt II Grants and Other Assista							
	Form 990, Part IV, line 21	, for any recipient	t that received r	nore than \$5,000. I	Part II can be dupli	cated if additiona	I space is needed	d.
	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 noncash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
	Enter total number of section 501(c)((2) and government a	ranizations listed	in the line 1 table				
	Enter total number of other organizate		-					0

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 FOOD PANTRY & CLOTHING COST	3,475	32,803.			
2 CCYP ASSISTANCE	160	74,277.			
RENT, UTILITY AND OTHER 3 ASSISTANCE	10	31,122.			
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)

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.

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for the latest information.

FOSTER ADOPT CONNECT INC

Employer identification number 43-1895965

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

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. YEAR TO YEAR, WE RETAIN OVER 95% OF OUR FOSTER FAMILIES, FAR ABOVE THE STATE AVERAGE.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

990 IS PROVIDED TO THE BOARD FOR REVIEW PRIOR TO FILING

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

UPON REQUEST