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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

Open to Public Inspection

OMB No 1545-0047

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

<u>A I</u>	For the	e 2009 ca	endar year, or tax year beginning and ending	9	
В	Check if applicable	e Please use IRS	C Name of organization	D Employer iden	tification number
	Addre:	ss label or e print or	Chances for Children		
	Name chang	tvoe	Doing Business As	20-	5835605
	Initial	See	Number and street (or P.O. box if mail is not delivered to street address) Room/s		
	Termir	n- Specific	20343 N Hayden Road, Suite 105-114	(48	
	Ameno	ded tions	City or town, state or country, and ZIP + 4	G Gross receipts \$	193,275.
	Applic		Scottsdale, AZ 85255	H(a) Is this a group	
	pendir		ne and address of principal officer Kathi Juntunen	for affiliates?	Yes X No
			e as C above		ıncluded? Yes No
T-	Tax-exe		is X 501(c) ( 3		a list (see instructions)
_			tp://www.chances4children.org	H(c) Group exemp	
					M State of legal domicile; NV
	art I	Summ			
-	1	Briefly des	scribe the organization's mission or most significant activities. Provide	charitable s	support to
& Governance			nages, schools and humanitarian aide or		
rna	2		s box In the organization discontinued its operations or disposed of i		
Š	3		f voting members of the governing body (Part VI, line 1a)		3 5
Ğ	4		f independent voting members of the governing body (Part VI, line 1b)	Γ.	4 3
ος O	5		ber of employees (Part V, line 2a)	F	5 3
įţį	6		ber of volunteers (estimate if necessary)	F	6 32
ફ	7a_		s-unrelated business revenue from Part VIII, column (C), line 12	_	'a 0.
⊇⁴	ь		nted business taxable income from Form 990-T, line 34	_	'b 0.
2010 Activities		- <del>  1 \ :</del>	70	Prior Year	Current Year
	8	Contributi	ρρs and-grants (Part VIII line 1h)	225,836	
<b>₽</b>	9	Program	Service revenue (Part VIII line 2g)	217,032	
28		1 -	nt-income (Part-VIII, column (A), lines 3, 4, and 7d)	12,738	
SRevenue	11	Other review	gue (Par VIII column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1
		Total-reve	nue-add-lines 8 through 11 (must equal Part VIII, column (A), line 12)	455,606	175,019.
	13		d similar amounts paid (Part IX, column (A), lines 1-3)	374,448	
3	14		aid to or for members (Part IX, column (A), line 4)	•	<u> </u>
4	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)	77,422	73,324.
Expenses NMED	16a	Profession	nal fundraising fees (Part IX, column (A), line 11e)	-	
ĝ.	b	Total fund	raising expenses (Part IX, column (D), line 25)		
ũ	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24f)	205,475	95,643.
	18	Total expe	enses Add lines 13-17 (must equal Part IX, column (A), line 25)	657,345	
			ess expenses Subtract line 18 from line 12	<201,739	
Net Assets or Fund Balances				Beginning of Current Yea	
sets	20	Total asse	ets (Part X, line 16)	354,188	
AS DE	21	Total liabi	ities (Part X, line 26)		
캺	22	Net asset	s or fund balances. Subtract line 21 from line 20	354,188	. 262,070.
P	art II	Signa	ture Block		
		Under pena	lties of perjury; I declare that I have examined this return, including accompanying schedules and statem te Declaration of preparer (giper than officer) is based on all information of which preparer has any knowl	ents, and to the best of my know	ledge and belief, it is true, correct,
		777	Valor 1111-12	507 G/	2/2010
Sig	ın		rault vylle	10/1	2/2010
Hei	re	Sign	ature of officer	Date 4	/
			thi Juntunen		
		Тур	e or print name and title		···
Paid	ď	Preparer's		self (see	parer's identifying number instructions)
_	o parer's	signature	Jan. C. era. 08/04/10	employed 🕨 💹	
	Only	Firm's name yours if	Radakovich, Shaw & Bryche, LLP, C.P	P.A.'S EIN ►	
	· •	self-employ address, an	a bollo by migacia beleec, batte zor		
		ZIP + 4	San Luis Obispo, California 93401-6	5987   Phone no. ▶	(805)544-1557
Ma	y the IF	RS discus	s this return with the preparer shown above? (see instructions)		X Yes No

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932002

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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to 6 X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D. Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III Х 8 Did the organization report an amount in Part X, line 21; 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 Х 9 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Х 10 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X X as applicable 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, 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 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 169 If "Yes," complete Schedule D, Part VIII • 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. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

X Schedule D, Parts XI, XII, and XIII 12 12A Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III X 16 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 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.

Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

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18

19

X

X

1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III

# Form 990 (2009) Chances for Children Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	İ		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	ĺ		
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	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? If "Yes," complete Schedule L, Part IV	28b		_X_
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (	2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 U.S. Information Returns Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 2a 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 Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a b If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 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? Х 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes." indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e X benefit contract? Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings 8 at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter-10 a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter. a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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14060804 758279 4671

Form 990 (2009) Chances for Children 20-5835605 Page
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.

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a		5		
þ	Enter the number of voting members that are independent .	1b		3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with a	ny other			
	officer, director, trustee, or key employee?			2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	ne direct	supervision			
	of officers, directors or trustees, or key employees to a management company or other person?		-	3		<u> X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		was filed?	4_		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ets?		5_		X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers o	of the			
	governing body?	_		7a	-	<u>X</u>
_	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during t	he year		ŀ	
	by the following					
	The governing body?			8a	X	
	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached at	tne			37
Sac	organization's mailing address? If "Yes," provide the names and addresses in Schedule O  tion B. Policies (This Section B requests information about policies not required by the Internal R	2011001110	Code	9		<u>X</u>
<del>500</del>	tion D. 1 oncies (this section B requests information about policies not required by the internal h	revenue	code)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a	163	X
	If "Yes," does the organization have written policies and procedures governing the activities of such	chapter	s affiliates	100		
-	and branches to ensure their operations are consistent with those of the organization?	· onaptor	o, armatoo,	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	filina the	form?	11	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			· · · ·		
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	x	
	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	uld give	rise			
	to conflicts?	•		12b	x	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes," d	escribe			
	ın Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13		X
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by ind	ependent	1		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	?				
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment wit	h a			
	taxable entity during the year?			16a		<u> X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva					
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization	janizatioi	n's			
200	exempt status with respect to such arrangements?			16b	l	
	tion C. Disclosure					
17 18	List the states with which a copy of this Form 990 is required to be filed ►AZ, NV  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	T (501/a)	(3)e only) availabl	e for		
10	public inspection. Indicate how you make these available. Check all that apply	1 (501(C)	(J)S Urily) avallabl	<del>-</del> 101		
	X Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, c	conflict o	f interest notice	and fine	incial	
	statements available to the public.	Joi milet U	. Interest poncy,		ioiai	
20	State the name, physical address, and telephone number of the person who possesses the books at	and recor	ds of the organiz	ation 🖿	•	
	Joan Fredericks - (805) 773-6764	10001				
	220 Mira Mar Lane, Pismo Beach, CA 93449					-
				Form	990 (	2009)

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

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

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

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

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

(A) Name and Title	(B) Average	y current officer, directo (C) Position						(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours	(cl				ı арр	ly)	compensation	compensation	amount of
	per week		Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Craig Juntunen	10.00									
Chairman of the Board	10.00	X						0.	0.	0.
Dave Jacquin										•
Board Member		X						0.	0.	0.
Kathi Juntunen	40.00	,,		,,				10 405	•	0
President	40.00	X		Х		$\vdash$		10,425.	0.	0.
Ray Croghan Treasurer		x		x				0.	0.	0.
Rick Federico		Λ		^						<u> </u>
Secretary		x		x				0.	ο.	0.
									_	
				-						

Par	t VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	oyee	s, a	nd l	<u>High</u>	est	Compensated Employ	ees (continued)				
	(A)	(B)			((			_	(D)	(E)			(F)	
	Name and title	Average	١,.		Pos				Reportable	Reportable			mate	
		hours per	H	neck	all	that	app	iy)	compensation from	compensation from related		amount of other		)t
		week	Individual trustee or director				_		the	organizations (W-2/1099-MISC)		comp		tion
			iee or	stee			nsate		organization				m the	
			al trus	nstitutional trustee		loyee	Highest compensated employee		(W-2/1099-MISC)			orga and	relate	
			gwg	stituti	Officer	Key employee	Ighest	Former				orgar	nizatio	ons
	<del></del>	ļ	=		0	×	= =	Ē			4			
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										_	_			
											_			
									:					
1b	Total						▶		10,425.	(	).			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wł	no re	eceived more than \$100	,000 in reportable				
	compensation from the organization	<del></del>											/es	0 No
3	Did the organization list any former officer,	director or tru	stee	key	/ em	ınla	vee	or h	nighest compensated er	nnlovee on	٢	_	162	NO
Ū	line 1a? If "Yes," complete Schedule J for s		3100	, 110)	, 0.11	.p.o.	, cc,	01 1	iighest compensated et	nployee on		3		х
4	For any individual listed on line 1a, is the su									the organization				
	and related organizations greater than \$150										-	4		X
5	Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched				rom	any	unr/	elate	ed organization for serv	ices rendered to		ا ۽		v
Sec	tion B. Independent Contractors	ule a for such j	oers	OH				_	<u> </u>			5		<u>X</u>
1	Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ontr	racto	rs t	hat received more than	\$100,000 of compe	ensa	ation fro	m	
	the organization. NONE													
	(A) Name and business	address							( <b>B</b> ) Description of s	enuces	C	(C) ompens	eation	
	Traine and Business							$\dashv$	Description of a	CIVICOS		ompen.		
		•												
					-									
					_									
	<del></del>													
2	Total number of independent contractors (i \$100,000 in compensation from the organization)		ot lir	nite	o to		se lis O	sted	above) who received m	ore than				
	4.00,000 in compensation from the organic	Lation					<u> </u>	-			ſ	Form 9	90 (2	009)

			ces for (	<u>Children</u>		<del></del>	<u> 20-5835</u>	605 Page <b>9</b>
Rai	t VII	II Statement of Rever	nue			_	<u></u> .	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1 a	Federated campaigns	1a					
F	b	Membership dues	1b					
s, g	С	: Fundraising events	1c					
ar gi	d	Related organizations	1d					
Contributions, gifts, grants and other similar amounts	е	Government grants (contribut	tions) 1e					
i s	f	All other contributions, gifts, gran	its, and					
혈		similar amounts not included abo	ove 1f	131,363.				
호	g	Noncash contributions included in lines	s 1a-1f \$	10,446.				
<u>ŏ</u> ₽	h	Total. Add lines 1a-1f		<b>▶</b>	131,363.			
, e	2 a	Adoption Assist	ance	Business Code 624100	42,695.	42,695.		
ه <u>چ</u>	b	)						
Program Service Revenue	С							
e a	d							
9	е	•						
آ ته	f	All other program service reve	enue					
$\longrightarrow$	g	Total. Add lines 2a-2f		<b>&gt;</b>	42,695.		,	
	3	Investment income (including	dıvıdends, ınter	est, and				
		other similar amounts)		▶ }	1,147.			1,147.
	4	Income from investment of ta	x-exempt bond	proceeds 🕨				
	5	Royalties		<u> </u>				
			(i) Real	(ii) Personal				
		Gross Rents						
		Less rental expenses						
		Rental income or (loss)		<u> </u>				
		Net rental income or (loss)	() () ()	() Other				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	18,070	•				
İ	Đ	Less: cost or other basis	18,256					
Ì	_	and sales expenses Gain or (loss)	<186					
İ		Net gain or (loss)	<u> </u>		<186.			<186.>
e e		Gross income from fundraisin	-		<u> </u>			<u> </u>
Other Revenue		including \$ contributions reported on line						
윤		Part IV, line 18	•					
ے ا		Less direct expenses	a b					
ŏ		: Net income or (loss) from fund		<b>'</b>				
		Gross income from gaming a	_					
i	<i>J</i> a	Part IV, line 19	a (14)	.				
ŀ	h	Less direct expenses	b					
		: Net income or (loss) from gan		<b></b>				
1		Gross sales of inventory, less						
1		and allowances	a	1				
- 1	b	Less: cost of goods sold	t					
		Net income or (loss) from sale	es of inventory	<b></b>				
Ī		Miscellaneous Revenu		Business Code				
	11 a	1		1				
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		<b>▶</b>				
	12	Total revenue See instructions.		<b>&gt;</b>	175,019.	42,695.	0.	
93200 02-04	9 · 10							Form <b>990</b> (2009)

Form 990 (2009) Chances for Children
Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
2	the U.S See Part IV, line 22			İ	
3	Grants and other assistance to governments,				
3	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	98,170.	98,170.		
4	Benefits paid to or for members	20,170.		-	<del></del> -
5	Compensation of current officers, directors,				
3	trustees, and key employees	10,425.	9,078.	1,347.	
6	Compensation not included above, to disqualified	10,123.	3,070.	1,511	
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	59,140.	59,140.		
8	Pension plan contributions (include section 401(k)	33,120.	77,1200		
J	and section 403(b) employer contributions)				
9	Other employee benefits				
9 10	Payroll taxes	3,759.	3,531.	228.	····
11	Fees for services (non-employees)		3,331.	2201	
'' a	Management				
b	Legal	14,157.	14,157.		
c	Accounting	3,287.	1,939.	1,348.	
d	Lobbying	3,23.1	2,5051	2,0100	•
-	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	342.		342.	
12	Advertising and promotion	3,342.	892.	2,450.	
13	Office expenses	9,989.	3,885.	6,104.	
14	Information technology	1,089.	0,000	1,089.	
15	Royalties				•
16	Occupancy				
17	Travel	20,379.	15,100.	5,279.	
18	Payments of travel or entertainment expenses			<i></i>	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates		_		
22	Depreciation, depletion, and amortization				
23	Insurance	324.	317.	7.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
_	expenses shown on line 25 below.) Supplies	19,168.	18,718.	450.	
a	Reunion Expense	12,120.	12,120.	±30•	<del> </del>
0	Postage & Shipping	10,534.	8,417.	2,117.	
<u>ن</u> بر	Bank Fees	572.	0,41/•	572.	
ū	Filing Fees	340.		340.	
e f	All other expenses	240.		3700	<u>.</u>
•	Total functional expenses. Add lines 1 through 24f	267,137.	245,464.	21,673.	0
<u>25</u> 26	Joint costs. Check here	201,1310		21,073.	<u> </u>
دن	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	concational campaign and fundraising solicitation				Earm <b>990</b> (200

Part X	Balance Sheet	(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing .	923.	1	923
2	Savings and temporary cash investments	323,402.	2	68,823
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees Complete Part II			
	of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section		ŀ	
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
	Part II of Schedule L	Ĺ <u> </u>	6	
တ္ 7	Notes and loans receivable, net		7	180,717
Assets	Inventories for sale or use		8	•
. و ا 🏲	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a			
Ь	Less accumulated depreciation 10b		10c	
11	Investments - publicly traded securities	29,863.	11	11,607
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	<del></del>
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	354,188.	16	262,070
17	Accounts payable and accrued expenses	334,100.	17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability Complete Part IV of Schedule D		21	<del></del>
Liabilities 22	Payables to current and former officers, directors, trustees, key employees,			<del></del>
	highest compensated employees, and disqualified persons. Complete Part II			
	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0
20		0.	20	<u> </u>
_	Organizations that follow SFAS 117, check here  and complete lines 27 through 29, and lines 33 and 34.			
ě oz	Unrestricted net assets		27	
27	Temporarily restricted net assets		28	
E 28	•			<del></del>
달   29	Permanently restricted net assets		29	·
년	Organizations that do not follow SFAS 117, check here   X and			
0 0	complete lines 30 through 34.			^
Net Assets or Fund Balances 24 25 26 27 28 29 29 29 29 29 29 29 29 29 29 29 29 29	Capital stock or trust principal, or current funds	0.	30	0
ÿ   31	Paid-in or capital surplus, or land, building, or equipment fund		31	262 070
32	Retained earnings, endowment, accumulated income, or other funds	354,188.	32	262,070
33	Total net assets or fund balances	354,188.	33	262,070
34	Total liabilities and net assets/fund balances	354,188.	34	262,070 Form <b>990</b> (2009

Form **990** (2009)

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

3b Form **990** (2009)

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#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

2009

Open to Public Inspection

Name of the organization Employer identification number Chances for Children 20-5835605 Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv), (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c \_\_\_\_ Type III - Functionally integrated a Type I b \_\_\_ Type II d \_\_\_\_ Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization organization in col. in col. (i) listed in your organization in col. organization (i) organized in the U.S.? support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes No Yes

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

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Schedule A (Form 990 or 990-EZ) 2009

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

	rt III   Support Schedule for 0	Organizations	Described in	Section 509(a	)(2) (Complete only	If you checked the b	ox on line 9 of Part I.)
Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						İ
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and					_	
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received					_	
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,		İ				Ĭ
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on			1			
12	Other income Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV)						L
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thu	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organi	zation,
	check this box and stop here						▶□
Sec	ction C. Computation of Publ	lic Support Pe	rcentage				
15	Public support percentage for 2009 (	line 8, column (f) d	livided by line 13, o	column (f))		15	<u>%</u>
16	Public support percentage from 2008	3 Schedule A, Part	: III, line 15			16	<u>%</u>
Sec	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	009 (line 10c, colui	mn (f) dıvıded by lıı	ne 13, column (f))		17	<u>%</u>
18	Investment income percentage from	2008 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2009. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	ınd <mark>stop here.</mark> The	organization quali	fies as a publicly s	supported organiz	ation	. ▶□
b	33 1/3% support tests - 2008. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	eck this box and <b>st</b>	t <b>op here.</b> The orga	nızatıon qualıfıes a	as a publicly supp	orted organization	▶□
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check to	his box and see in	structions	
					Scl	nedule A (Form 99	0 or 990-EZ) 2009

#### Schedule F (Form 990)

# **Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
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**Employer identification number** 

Department of the Treasury Internal Revenue Service

Name of the organization

Chances for Chi	ildron			20-	583560	5
		ctivities Out	tside the United States. Comp			
to Form 990, Pa		totavitioo ou		note ii iiio organization t		-
		n maintain record	ds to substantiate the amount of the	grants or assistance, the	,	
grantees' eligibility for t	he grants or ass	stance, and the	selection criteria used to award the gi	rants or assistance?	X	Yes No
2 For grantmakers. Desc	cribe in Part IV th	e organization's	procedures for monitoring the use of	grant funds outside the	United Stat	tes
3 Activities per Region (U	Jse Schedule F·1	(Form 990) if ad	ditional space is needed)			
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity lister is a program sei describe specific of service(s) in re	rvice, c type	(f) Total expenditures for region
	ŀ			Chances for Child	ren	
				helps support orp	hanages	
Central America and				in Haiti which pr	ovide	
the Caribbean	C	0_	Program Services	care for orphaned	and	98,170.
				Chances for Child		
				helps support the		
Central America and		_		adoption process		
the Caribbean		0	Program Services	children under th	e care	0.
		1				
				+		ļ
	<del> </del>					
						1
Totals	- 1	0	<u> </u>	1		98 170.
LHA For Privacy Act and P	aperwork Reduc	ction Act Notice	e, see the Instructions for Form 990.	. S	chedule F (	Form 990) 2009

932071 02-01-10

19

See Part IV for Column (e) descriptions

2009.04000 Chances for Children

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(i) Method of valuation (book, FMV, appraisal, other) Page 2 Fair Market Value Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any included donated (h) Description of non-cash assistance 10,446.items such as assistance Ion-cash (g) Amount of non-cash assistance 20-5835605 cash disbursement 98,170, Wire Transfer (f) Manner of of cash grant (e) Amount recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 To support operations at Creche de I'Enfant Jesus orphanage in (d) Purpose of grant and the Caribbean Haiti Chances for Children Use Schedule F-1 (Form 990) if additional space is needed. Sentral America (c) Region (b) IRS code section and EIN (if applicable) Schedule F (Form 990) 2009 (a) Name of organization Part II

See Part IV for Column (h) descriptions

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

ო

N

20-5835605 Chances for Children Schedule F (Form 990) 2009

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Schedule F (Form 990) 2009 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of (d) Amount of recipients cash grant Use Schedule F-1 (Form 990) if additional space is needed (b) Region (a) Type of grant or assistance

932073 02-01-10

932074 02-01-10

Complete this part to provide the information required in Part I, line 2, and any additional information.

children. This includes the support of schools and education initiatives as wells as working with local nonprofit groups to expand the community where orphanages are located. This is accomplished by funding the construction of schools, providing child sponsorship, creating a fresh water supply and implementing vocational training and community based agricultural projects. In 2009 \$131,093 of expenses were incurred to support the Creche de I'Enfant Jesus orphanage in Ti Mache, Haiti. These expenses included \$98,170 of grants that went directly to the orphanage to help support their operations as well as \$10,446 of donated food, medical supplies and educational supplies.

Region: Central America and the Caribbean

(e) Specific Types of Services in Region: Chances for Children helps
support the adoption process of children under the care of orphanages in
Haiti by interfacing with the general public and adoption agencies who
represent families who are interested in international adoption. In 2009
\$114,371 of expenses were incurred to assist with the adoptions of
children from the Creche de I'Enfant Jesus orphanage in Ti Mache, Haiti.
These expenses included legal fees, travel expenses, meals, lodging,
postage & shipping, printing & publications as well as wages and payroll
costs for the organization's staff who helped with the adoptions. Chances
for Children helped complete 35 adoptions in 2009.

Part II, Column (h):

Region: Central America and the Caribbean

(h) Description of Non-cash Assistance: Non-cash assistance included donated items such as food, medical supplies and educational supplies.

#### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Chances for Children

Employer identification number 20 – 5835605

Form 990, Part VI, Section A, line 2: Description of family relationship
between any officer, director, trustee or key employee with any other
officer, director, trustee or key employee: Craig Juntunen and Kathi
Juntunen are husband and wife.

Form 990, Part VI, Section B, line 11: Process for review of Form 990:

The board of Chances for Children all receive a copy of the Form 990 prior
to filing. The 990 tax form is sent to each board member via Federal

Express for their review. Upon review a conference call is scheduled where
each member asks specific questions and approves the form.

Form 990, Part VI, Section B, Line 12c: Conflict of Interest Procedures

a. Duty to Disclose. In connection with any actual or possible conflict of

interest, an interested person must disclose the existence of the financial

interest and be given the opportunity to disclose all material facts to the

directors and members of committees with governing board delegated powers

considering the proposed transaction or arrangement.

- b. Determining Whether a Conflict of Interest Exists. After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.
- c. Procedures for Addressing the Conflict of Interest. An interested person may make a presentation at the governing board or committee meeting, but after the presentation, he/she shall leave the meeting during the

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211 02-03-10

#### **SCHEDULE 0**

Department of the Treasury

(Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Chances for Children

Employer identification number 20 – 5835605

discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest. The chairperson of the governing board or committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement. After exercising due diligence, the governing board or committee shall determine whether the corporation can obtain with reasonable efforts a more advantageous transaction or arrangement from a person or entity that would not give rise to a conflict of interest. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the governing board or committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the corporation's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination, it shall make its decision as to whether to enter into the transaction or arrangement. d. Violations of the Conflicts of Interest Policy. If the governing board or committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose. If, after hearing the member's response and after making further investigation as warranted by the circumstances, the governing board or committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

### SCHEDULE O

(Fôrm 990)

# **Supplemental Information to Form 990**

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Chances for Children

Employer identification number 20 – 5835605

Form 990, Part VI, Section B, Line 15: Process for determining
compensation of the organization's CEO, directors, officers and key
employees:
Compensation Approval Policies
A voting member of the governing board who receives compensation, directly
or indirectly, from the corporation for services is precluded from voting
on matters pertaining to that member's compensation.
A voting member of any committee whose jurisdiction includes compensation
matters and who receives compensation, directly or indirectly, from the
corporation for services is precluded from voting on matters pertaining to
that member's compensation.
No voting member of the governing board or any committee whose jurisdiction
includes compensation matters and who receives compensation, directly or
indirectly, from the corporation, either individually or collectively, is
prohibited from providing information to any committee regarding
compensation.
When approving compensation for directors, officers and employees,
contractors, and any other compensation contract or arrangement, in
addition to complying with the conflict of interest requirements and
policies as well as the preceding paragraphs of this section, the board or
a duly constituted compensation committee of the board shall also comply
with the following additional requirements and procedures:
a. The terms of compensation shall be approved by the board or compensation
committee prior to the first payment of compensation,
b.All members of the board or compensation committee who approve

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#### **SCHEDULE O** (Fdrm 990)

# **Supplemental Information to Form 990**

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization Chances for Children

**Employer identification number** 20-5835605

compensation arrangements must not have a conflict of interest with respect
to the compensation arrangement as specified in IRS Regulation Section
53.4958-6(c)(iii), which generally requires that each board member or
committee member approving a compensation arrangement between this
organization and a "disqualified person" (as defined in Section 4958(f)(1)
of the Internal Revenue Code and as amplified by Section 53.4958-3 of the
IRS Regulations):
1.Is not the person who is the subject of the compensation arrangement, or
a family member of such person;
2.Is not in an employment relationship subject to the direction or control
of the person who is the subject of the compensation arrangement
3.Does not receive compensation or other payments subject to approval by
the person who is the subject of the compensation arrangement
4. Has no material financial interest affected by the compensation
arrangement; and
5.Does not approve a transaction providing economic benefits to the person
who is the subject of the compensation arrangement, who in turn has
approved or will approve a transaction providing benefits to the board or
committee member.
c.The board or compensation committee shall obtain and rely upon
appropriate data as to comparability prior to approving the terms of
compensation. Appropriate data may include the following:
1.Compensation levels paid by similarly situated organizations, both
taxable and tax-exempt, for functionally comparable positions. "Similarly
situated" organizations are those of a similar size, purpose, and with
similar resources

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#### **SCHEDULE O**

(Form 990)

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Department of the Treasury
Internal Revenue Service

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Chances for Children

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2. The availability of similar services in the geographic area of this organization 3.Current compensation surveys compiled by independent firms 4. Actual written offers from similar institutions competing for the services of the person who is the subject of the compensation arrangement As allowed by IRS Regulation 4958-6, if this organization has average annual gross receipts (including contributions) for its three prior tax years of less than \$1 million, the board or compensation committee will have obtained and relied upon appropriate data as to comparability if it obtains and relies upon data on compensation paid by three comparable organizations in the same or similar communities for similar services. d. The terms of compensation and the basis for approving them shall be recorded in written minutes of the meeting of the board or compensation committee that approved the compensation. Such documentation shall include: 1. The terms of the compensation arrangement and the date it was approved 2. The members of the board or compensation committee who were present during debate on the transaction, those who voted on it, and the votes cast by each board or committee member 3. The comparability data obtained and relied upon and how the data was obtained 4. If the board or compensation committee determines that reasonable compensation for a specific position in this organization or for providing services under any other compensation arrangement with this organization is higher or lower than the range of comparability data\_obtained, the board or committee shall record in the minutes of the meeting the basis for its

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## **SCHEDULE 0**

# **Supplemental Information to Form 990**

(Fðrm 990)

Department of the Treasury

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5. If the board or committee makes adjustments to comparability data due to
geographic area or other specific conditions, these adjustments and the
reasons for them shall be recorded in the minutes of the board or committee
meeting.
6.Any actions taken with respect to determining if a board or committee
member had a conflict of interest with respect to the compensation
arrangement, and if so, actions taken to make sure the member with the
conflict of interest did not affect or participate in the approval of the
transaction (for example, a notation in the records that after a finding of
conflict of interest by a member, the member with the conflict of interest
was asked to, and did, leave the meeting prior to a discussion of the
compensation arrangement and a taking of the votes to approve the
arrangement).
7. The minutes of board or committee meetings at which compensation
arrangements are approved must be prepared before the later of the date of
the next board or committee meeting or 60 days after the final actions of
the board or committee are taken with respect to the approval of the
compensation arrangements. The minutes must be reviewed and approved by the
board and committee as reasonable, accurate, and complete within a
reasonable period thereafter, normally prior to or at the next board or
committee meeting following final action on the arrangement by the board or
committee.
Form 990, Part VI, Section C, Line 19: Public Inspection of Documents:

The following documents of the organization will be available for

inspection upon request and through the organization's web site:

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#### SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

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Chances for Children	Employer identification number 20-5835605
oTax Exemption Application (Form 1023)	
oInternal Revenue Service Determination Letter	
oArticles of Incorporation	<del></del> .
oBy-Laws containing Conflict of Interest Policy	
oForm 990	
The organization will make best efforts to ensure that the	e documents posted
on the organization's web site are the most updated version	ons of such
documents. When responding to a public inspection request	for any
organizational document or Form 990 by anyone, the organization	zation shall
fulfill such request in a timely fashion.	
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