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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)

OMB No 1545-0047

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

Open to Public Inspection

<u>A</u>	For the	20 <u>09</u> cal	endar year, or tax year beginning	and ending			
В	Check if applicable	e Please use IRS	C Name of organization		D Employer identific	cation number	
	Addre	ss label or print or	EMBRACE KIDS FOUNDATION				
Ē	Name chang	type	Doing Business As		22-3	092432	
	Initial return Termir ated	See Specific Instruc-	Number and street (or P 0 box if mail is not delined 121 SOMERSET STREET	vered to street address) Room/su		r 247-5300	
	Ameno	1	City or town, state or country, and ZIP + 4		G Gross receipts \$	1636461.	
	Applic		NEW BRUNSWICK, NJ 08901		H(a) is this a group re	eturn	
	pendir	F Nan	ne and address of principal officer:ROBERT	A. BROWN	for affiliates?	Yes X No	
					H(b) Are all affiliates inc	luded? Yes No	
				947(a)(1) or 527	If "No," attach a	list. (see instructions)	
			w.embracekids.org		H(c) Group exemption		
			n X Corporation Trust Association	Other ► L Y	ear of formation 1991 N	A State of legal domicile NJ	
P	art I	Summ					
9	1		scribe the organization's mission or most significa				
ğ			ort to the Pediatric Hema				
Activities & Governance	2	Check thi			1 1		
Ó	3		f voting members of the governing body (Part VI,	•	3	24	
90	4		f independent voting members of the governing	body (Part VI, line 1b)	4	24	
Ę.	5		ber of employees (Part V, line 2a)		5	7	
ξį	6		ber of volunteers (estimate if necessary)	(0) 1 40	6	0	
Ą			s unrelated business revenue from Part VIII, colu		7a	0.	
_	Ь	Net unrea	ated business taxable income from Form 990-T, li	ne 34	7b		
_	8	Contribut	ions and grants (Port VIII, line 1h)		Prior Year 626981.		
Ę	9		ions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g)		020701.	334107.	
Š	10		nt income (Part VIII, column (A), lines 3, 4, and 7d	`	-60229.	20487	
_پ پ	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10d	·	447294.		
∠ 40 lU Aevenue	12		enue - add lines 8 through 11 (must equal Part VIII		1014046.		
-	13		ed similar amounts paid (Part IX, column (A), lines		10110101	1124333.	
?¥ ⇒	14		paid to or for members (Part IX, column (A), line 4)				
			other compensation, employee benefits (Part IX, o	489607.	379193.		
Expenses	16a		nal fundraising fees (Part IX, column (A), line 11e)		0,7170.		
و ق	Ь		draising expenses (Part IX, column (D), line 25)				
	17		penses (Part IX, column (A), lines 11a-11d, 11f-24f	RECEIVED	792163.	754478.	
			enses. Add lines 13-17 (must equal Part IX, colum		O 1281770.	1133671.	
	140		less expenses. Subtract line 18 from line 12	ω	0 = 267724	-9138.	
Net Assets or	SB			AUG 1 7 2010	Beginning of Current Year	-9138. End of Year 1499515. 224800. 1274715.	
) S S	20	Total asse	ets (Part X, line 16)		≅ 1396068.		
t As	21	Total liabi	lities (Part X, line 26)	OGDEN, UT	216791.	224800.	
2	22		s or fund balances. Subtract line 21 from line 20		1179277.	1274715.	
P	art II		ture Block				
		Under pena and comple	lities of perjury, I declare that have examined this return, including the Declaration of preparer other than officer is based on all informations.	g accompanying schedules and statemer mation of which preparer has any knowled	nts, and to the best of my knowledg	ge and belief, it is true, correct,	
		1.			10/1	/	
Sign		Cur.	actives of officer		8/10/1	//	
He	ere	1 *	nature of officer	T	Date /		
		1 -	BERT A. BROWN, BOARD CHA	1 RMAN			
Pa	id	Preparer's		Date / /		r's identifying number tructions)	
	.u eparer's	signature		1 1/9/10	employed	006/3273	
	e Only	Firm s name yours if	CODI, DORI & DENICK,		EIN ► 22-	2354112	
	- 	self-employ address, an					
_		ZIP + 4	FLEMINGTON, NJ 08822		Phone no ▶90	08-782-7300	
Ma	ay the II	RS discus	s this return with the preparer shown above? (see	instructions)		X Yes No	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

22-3092432

Form 990 (2009)

EMBRACE KIDS FOUNDATION

Form 990 (2009)

	990 (2009) EMBRACE KIDS FOUNDATION 22-309	2432	P	age 3
Par	t 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," complète Schedule A	1	X	
2	Is the ofganization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	<u> </u>	X
5	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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			l
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	↓	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	ļ	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	ļ	X
9	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	9	├	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	 -	X
11	is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI.			
•	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 16? 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			
	the organization's separate of consolidated infancial statements for the tax year include a roomote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>			
12	Schedule D, Parts XI, XII, and XIII	12	x	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	 		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X	┪		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	†	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			<u> </u>
-	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
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	15		Х
16	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

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

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

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

complete Schedule G, Part III

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

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

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X

16

17

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19

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Par	t 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 17 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,			
	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? If "Yes," complete			
	Schedule J	23		Х
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			
	Schedule K. If "No", go to line 25	24a		Х
ь		24b		
c				
Ŭ	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	250		
	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	25ь		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor, or a grant selection committee member, or to a person related to such an individual? 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	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	X
	An entity of which a current or former officer, director, trustee, or key employee in the organization (or a family member) was	200		71
C	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29	Did the organization receive more than \$25,000 in non-cash contributions: If Fes, complete schedule in	29		1
30	contributions? If "Yes," complete Schedule M	30		х
24	Did the organization liquidate, terminate, or dissolve and cease operations?	30		-
31	If "Yes," complete Schedule N, Part I	31		х
22	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	Schedule N, Part II	32		Х
22	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		1
33	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	22		Х
24	•	33		- 23
34	Was the organization related to any tax-exempt or taxable entity?	24		Х
25	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		
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	25		Х
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	_35_		
36	If "Ves " complete Schedule R. Part V. line 2	36		x

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37

Х

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Note. All Form 990 filers are required to complete Schedule O.

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

22-3092432 Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V 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 X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 7 2a filed for the calendar year ending with or within the year covered by this return X 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) 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 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X 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. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 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 5с Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X 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 6ь were not tax deductible? 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 X provided to the payor? 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 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g 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 at any time during the year? 8 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? 9ь 10 Section 501(c)(7) organizations. Enter: 10a a Initiation fees and capital contributions included on Part VIII, line 12 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 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b

Form **990** (2009)

12a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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			
		0.4	Yes	No
1a	Enter the number of voting members of the governing body	24		
b	Enter the number of voting members that are independent	24		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	1		.,
	of officers, directors or trustees, or key employees to a management company or other person?	3	+	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	+	X
6	Does the organization have members or stockholders?	6	_	Х
7a		_		
	governing body?	7a		X
_		7b	-	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:		x	1
a		8a		-
	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	╁
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		X
200	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			
<u>sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		Yes	No
1 0 2	Does the organization have local chapters, branches, or affiliates?	10		X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	1.0	+-	
	and branches to ensure their operations are consistent with those of the organization?	10		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	<u> </u>	 	1
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12	a X	1
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			<u> </u>
_	to conflicts?	12	ь х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12	c	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	1	X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15	- 1	X
b	Other officers or key employees of the organization	15	b	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	ŀ		
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?	16	a	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	'n		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
<u> </u>	exempt status with respect to such arrangements?	16	b	1
	List the states with which a copy of this Form 990 is required to be filed ►NJ , PA			
17 10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) av	vallable for		
18	public inspection. Indicate how you make these available. Check all that apply.	aliaule IOf		
	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, conflict of interest po	alicy and fi	nancial	
	statements available to the public	o,, and if	, , w I U I al	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the or	ganization.	>	
	GLENN JENKINS - 732-247-5300	J		
	121 SOMERSET STREET, NEW BRUNSWICK, NJ 08901	*		
		Fo	rm 990	(2009)

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 vear. 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"

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

- 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	(C) Position						(D) Reportable	(E) Reportable	(F) Estimated
Name and Thic	hours per week	Individual trustee or director	lnstitutional trustee		that			compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ROBERT A. BROWN										
BOARD CHAIRMAN	2.00	X		Х				0.	0.	0.
DANIEL M. DIDOMENICO										
PRESIDENT/BOARD MEMBER	2.00	X		X			<u> </u>	0.	0.	0.
TIMOTHY X. GIBSON, ESQ		İ				l	ŀ			
VICE PRESIDENT/BOARD MEM	2.00	X		X				0.	0.	0.
JOHN H. MEHRLANDER		l							_	_
TREASURER/BOARD MEMBER	2.00	X	<u> </u>	X	ļ	<u> </u>		0.	0.	0.
BARBARA CRISCITO, CPA									_	
BOARD MEMBER	2.00	X			_	<u> </u>		0.	0.	0.
ROBERT J. DILEO		١								•
BOARD MEMBER	2.00	X		_	_	<u> </u>		0.	0.	0.
KRIS EMERSON	2 00	.							0	•
BOARD MEMBER	2.00	X			-	<u> </u>	ļ	0.	0.	0.
ANDY FINGERHUT, CPA	2 00	v						0.	^	0
BOARD MEMBER JOHN INGATO	2.00	X	├		 	 -			0.	0.
BOARD MEMBER	2.00	Х						0.	0.	0.
KIM JOHNSON	2.00	^	-			 		0.	0.	0.
BOARD MEMBER	2.00	X						0.	0.	0.
JERRY KAULIUS	2.00	A	 			<u> </u>		- 0.		0.
BOARD MEMBER	2.00	X						0.	0.	0.
JOHN MORTENSON, CPA	2.00	1	├		 	 		•		
BOARD MEMBER	2.00	x						0.	0.	0.
ART SCHWARTZ			┢			<u> </u>				
BOARD MEMBER	2.00	X						0.	0.	0.
TK SHAMY, ESQ										
BOARD MEMBER	2.00	X				ļ		0.	0.	0.
JOSEPH SHERIDAN										
BOARD MEMBER	2.00	X			l		ŀ	0.	0.	0.
MATT WOLKOFSKY										
BOARD MEMBER	2.00	X			L			0.	0.	0.
GLENN JENKINS							[-		
EXECUTIVE DIRECTOR	50.00	X		L_				111366.	0.	0.
										Farm 000 (2000)

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14590714 792543 13570

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13570 1

(A) Name and title	(B) Average			(C Posr	-)		(D) Reportable	(E) Reportable	Reportable			ed
	hours per week		Institutional trustee Officer			compensated		compensation from the organization (W-2/1099-MISC)	from related organizations		comp fro orga and	other censa om the anizati d relate	tion e ion ed
		_											
		-	-										
												·	
Tatal		<u> </u>	<u> </u>	<u> </u>				111366.		0.			0.
Total number of individuals (including b		hose	liste	ed al	000	e) wi	no re		,000 in reportabl				1
<u> </u>			e, ke	y em	plo	yee,	or h	nighest compensated er	mployee on		3	Yes	No X
and related organizations greater than	\$150,000? <i>If</i> "Yes	s," cc	mpl	ete S	Sche	edule	9 J f	for such individual			4		Х
the organization? If "Yes," complete Sc	-				a,,	,	Clai	ed Organization for Serv			5		Х
Complete this table for your five highes	t compensated in	ndep	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of con	npensa	ation f	rom	
(A)	ess address							(B) Description of s	ervices	C			n
			_				_			-			
											·		
		_											
							Ī		.				
Total number of independent contracto	un finalisates to t				A F			t ala avia) in the mean of	Ab				
	Name and title Total Total number of individuals (including becompensation from the organization) Did the organization list any former officine 1a? If "Yes," complete Schedule Jiffor any individual listed on line 1a, is the and related organizations greater than Did any person listed on line 1a receive the organization? If "Yes," complete Schedule Jiffor any individual listed on line 1a receive the organization? If "Yes," complete Schedule Jiffor any person listed on line 1a receive the organization? If "Yes," complete Schedule Jiffor any person listed on line 1a receive the organization? If "Yes," complete Schedule Jiffor any person listed on line 1a receive the organization? If "Yes," complete Schedule Jiffor any light and light an	Name and title Average hours per week Total Total number of individuals (including but not limited to t compensation from the organization Did the organization list any former officer, director or tri line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportal and related organizations greater than \$150,000? If "Yes Did any person listed on line 1a receive or accrue competence or ac	Name and title Average hours per week Total Total number of individuals (including but not limited to those compensation from the organization Did the organization list any former officer, director or trusted line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable coand related organizations greater than \$150,000? If "Yes," co Did any person listed on line 1a receive or accrue compensation the organization? If "Yes," complete Schedule J for such person listed on line 1a receive or accrue compensation organization? If "Yes," complete Schedule J for such person listed to only person listed on line 1a receive or accrue compensation the organization? If "Yes," complete Schedule J for such person listed to only person listed to only person listed on line 1a receive or accrue compensation B. Independent Contractors Complete this table for your five highest compensated indepthe organization. (A)	Name and title Average hours per week Page P	Name and title Average hours per week Did to a gas a populate Post (check all to per week Post (check all to per week	Name and title Average hours per week Average hours	Name and title Average hours Position (check all that app per week Average hours Position (check all that app per week Average hours Position (check all that app per week) Average hours Position (check all that app per week) Position (ch	Name and title Average hours per week Average hours per week Aver	Name and title Average hours per week Begin and by the compensation from the organization programment of the organization pr	Name and title Average Nours Position Reportable Compensation From related Companization Reportable Compensation Reportab	Name and title Average hours Per week Avera	Name and title Average hours Per week Avera	Name and title Average hours per week Average hours

22-3092432 Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Unrelated Related or Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 12249. 1a 1 a Federated campaigns **1b b** Membership dues 173471. c Fundraising events 1c 1d d Related organizations Government grants (contributions) 1e All other contributions, gifts, grants, and 368387. similar amounts not included above Noncash contributions included in lines 1a-1f \$ 554107. h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 10955. 10955. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 207973. assets other than inventory b Less: cost or other basis 198441 and sales expenses 9532. c Gain or (loss) 9532. 9532. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 173471. of including \$ contributions reported on line 1c). See 818918. Part IV, line 18 313487 b Less: direct expenses 505431. 505431 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV. line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 44508. 11 a School System Reimburs 44508. b d All other revenue 44508. e Total. Add lines 11a-11d 559471 1124533. 0. 10955. Total revenue See instructions

Part IX Statement of Functional Expenses

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

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, 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 governments and		· · · · · · · · · · · · · · · · · · ·	-						
	organizations in the U.S. See Part IV, line 21									
2	Grants and other assistance to individuals in				***************					
	the U.S. See Part IV, line 22									
3	Grants and other assistance to governments,				***************************************					
	organizations, and individuals outside the U.S.									
	See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,	-								
	trustees, and key employees	111366.	111366.							
6	Compensation not included above, to disqualified				- Annada -					
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	191905.	96650.	24640.	70615.					
8	Pension plan contributions (include section 401(k)				•					
-	and section 403(b) employer contributions)	31434.	21146.	2554.	7734.					
9	Other employee benefits	20269.	13636.	1646.	4987.					
10	Payroll taxes	24219.	16293.	1968.	5958.					
11	Fees for services (non-employees):									
а	Management									
b	Legal									
c	Accounting	16606.		16606.						
d	Lobbying									
е	Professional fundraising services See Part IV, line 17									
f	Investment management fees									
g	Other	33000.			33000.					
12	Advertising and promotion	2466.		2466.						
13	Office expenses	36540.	14264.	14264.	8012.					
14	Information technology									
15	Royalties									
16	Occupancy	54000.	45282.	4359.	4359.					
17	Travel									
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	28481.	22785.	2848.	2848.					
23	Insurance									
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)									
а	Other Program Costs	572085.	572085.							
h	Employee Leasing	6279.	4081.	314.	1884.					
~	Printing, Publications	3740.	1921.	1819.	1001.					
d	Telephone	1281.		1281.						
e										
f	All other expenses									
25	Total functional expenses. Add lines 1 through 24f	1133671.	919509.	74765.	139397.					
26	Joint costs Check here Infollowing									
_0	SOP 98-2 Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation									
	oducational campaign and full dialong solicitation	· · · · · · · · · · · · · · · · · ·			000 (0000)					

22-3092432 Page **11**

Pai	tΧ	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		214361.	2	135228.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		35747.	4	51285.
	5	Receivables from current and former officers, d	rectors, trustees, key			
		employees, and highest compensated employe	es. Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 49	58(c)(3)(B). Complete			
		Part II of Schedule L			6	
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ř	9	Prepaid expenses and deferred charges		6784.	9	11331.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a 1062483.	,		
	ь	Less: accumulated depreciation	10b 242814.	848151.	10c	819669.
	11	Investments - publicly traded securities		11	, , , , , , , , , , , , , , , , , , , ,	
	12	Investments - other securities. See Part IV, line	291025.	12	482002.	
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equ	1396068.	16	1499515.	
	17	Accounts payable and accrued expenses		109464.	17	141718.
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
Ş	21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
ij	22	Payables to current and former officers, directo				, , , , , , , , , , , , , , , , , , ,
Liabilities		highest compensated employees, and disqualif				
_		of Schedule L			22	
	23	Secured mortgages and notes payable to unrel	ated third parties	107327.	23	83082.
	24	Unsecured notes and loans payable to unrelate	ed third parties		24	
	25	Other liabilities. Complete Part X of Schedule D			25	· ·
	26	Total liabilities. Add lines 17 through 25		216791.	26	224800.
		Organizations that follow SFAS 117, check h	ere X and complete			
8 S		lines 27 through 29, and lines 33 and 34.				
Ę.	27	Unrestricted net assets		979277.	27	1074715.
Bali	28	Temporarily restricted net assets		200000.	28	200000.
ᅙ	29	Permanently restricted net assets	, <u>,</u>	, , ,,,,,	29	······································
ᅙ		Organizations that do not follow SFAS 117, or	heck here 🕨 📖 and			
9		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds	•		30	
Ass	31	Paid-in or capital surplus, or land, building, or e	quipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	ncome, or other funds		32	
Z	33	Total net assets or fund balances		1179277.	33	1274715.
	34	Total liabilities and net assets/fund balances		1396068.	34	1499515.

Form **990** (2009)

orm !	990 (2	2009) EMBRACE KIDS FOUNDATION 2	2-3092432	Pa	ge 12
Pari	: XI	Financial Statements and Reporting			
				Yes	No
1	Acco	ounting method used to prepare the Form 990: Cash X Accrual Other			
	If the	e organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were	e the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were	e the organization's financial statements audited by an independent accountant?	2b	X	
C	If "Ye	es" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	udit,		1
	revie	w, or compilation of its financial statements and selection of an independent accountant?	2c	X	<u> </u>
	If the	e organization changed either its oversight process or selection process during the tax year, explain in Schedu	ile O.		
d	If "Ye	es" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued o	na		
	cons	olidated basis, separate basis, or both:			
	X	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a	result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	Audit		
	Act a	and OMB Circular A-133?	3a		X

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public inspection

Name of the organization

Employer identification number
22-3002432

		EMBRACE	KIDS FOUNDA	TION				ļ		-3092	432	
Part I	Reason 1	for Public Chari	ty Status (All organiz	ations mus	st complet	e this part	.) See inst	ructions.				
he orga	ınızation ıs not a	private foundation b	pecause it is: (For lines 1	through 1	1, check o	only one b	ox.)					
1 [A church, cor	nvention of churches	, or association of churc	ches descr	1bed in se	ction 170	(b)(1)(A)(i)					
2	A school desc	cribed in section 17	0(b)(1)(A)(ii). (Attach Scl	hedule E.)								
3	A hospital or	a cooperative hospit	al service organization of	described i	n section	170(b)(1)((A)(iii).					
4	A medical res	earch organization of	perated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(ii	i). Enter th	e hospital'	s name	9,
	city, and state	e:										
5			penefit of a college or un	niversity ov	vned or op	erated by	a governr	nental uni	t describe	d in		
		(b)(1)(A)(iv). (Comple										
6	_		ent or governmental unit	described	ın sectio	n 170(b)(1)(A)(v).					
7	_		eives a substantial part					r from the	general p	ublic desci	ıbed ır	ì
	•	b)(1)(A)(vi). (Complet	•	• •		_						
8	_		ection 170(b)(1)(A)(vi). ((Complete	Part II.)							
9 X			erves: (1) more than 33 1			om contri	butions, m	nembershi	p fees, and	d gross red	eipts f	rom
	-	•	ctions - subject to certa									
			axable income (less sect									
		509(a)(2). (Complete										
10 🗀	_		erated exclusively to te	st for publ	c safety S	ee sectio	n 509(a)(4	I).				
11 🗀	An organizati	on organized and op	erated exclusively for th	ne benefit o	of, to perfo	rm the fur	nctions of,	or to carr	y out the p	ourposes o	f one c	or
	more publicly	supported organiza	tions described in section	on 509(a)(⁻	l) or sectio	n 509(a)(2	2). See se c	ction 509(a)(3). Chec	ck the box	that	
	describes the	e type of supporting	organization and comple	ete lines 1	1e through	11h.						
	a 🔲 Type I	l b 🗀	Type II o	: 🔲 Тур	e III • Func	tionally int	egrated		d 🗀	Type III - C	Other	
e 🗀	By checking	this box, I certify tha	t the organization is not	controlled	directly or	r indirectly	by one o	r more dis	qualified p	ersons oth	er thar	1
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	tions desc	cribed in s	ection 509	9(a)(1) or s	ection 509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check th	is box									
g	Since Augus	t 17, 2006, has the c	rganization accepted ar	ny gift or co	ontribution	from any	of the follo	owing per	sons?		· · · · · ·	
	(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons c	lescribed (ın (II) and (III) below,	·	Yes	No
	the gove	erning body of the si	upported organization?							11g(i)		
	(ii) A famıly	member of a persor	n described in (i) above?	•						11g(ii)		
	(iii) A 35% (controlled entity of a	person described in (i) of	or (II) above	9?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).							
				,		-						
(i) Nar	ne of supported	(ii) EiN	(iii) Type of organization		rganization			(vi) is organizati	the	(vii) Am	ount of	:
0	rganization		(described on lines 1-9		sted in your document?		r support?	(i) organiz U S	ed in the	sup	port	
			above or IRC section		·	\ ' '		ļ				
			(see instructions))	Yes	No	Yes	No	Yes	No			
					1							
		-		ļ				-	 			
				<u> </u>	 				+ +			
							j					
												
Total							}		1 1			_

932021 02-08-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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

Schedule A (Form 990 or 990-EZ) 2009

	ction A. Public Support			<u> </u>	(—) (Complete only	ii you checked the bu	X OII IIIIe 3 OI 7 alt 1
-	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and	(0) 2000	127233		147 = 333	19/200	17
•	membership fees received. (Do not						
	include any "unusual grants.")	586608.	580098.	577549.	440791.	380636.	2565682.
2	Gross receipts from admissions,						
-	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the	647498.	1164516.	1312408.	1004183.	863426.	4992031.
•	organization's tax-exempt purpose	017430.	1104310.	13121001	10011000	0031201	13320311
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
_	iness under section 513		<u> </u>			ļ	<u> </u>
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		4 = 4 = 4	1 2 2 2 2 2 2 2		10110	=======
6	Total. Add lines 1 through 5	1234106.	1744614.	1889957.	1444974.	1244062.	7557713.
7 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
ŧ	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.
•	Add lines 7a and 7b						0.
8	Public support (Subtract line 7c from line 6.)						7557713.
Se	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	1234106.	1744614.	1889957.	1444974.	1244062.	7557713.
10:	a Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources	2681.	30273.	29460.	17246.	10955.	90615.
1	b Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975					•	
	C Add lines 10a and 10b	2681.	30273.	29460.	17246.	10955.	90615.
	Net income from unrelated business						· -
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital	-8301.	160.	490.]	}	-7651.
13	assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12)	1228486.	1775047.			1255017.	7640677.
	First five years. If the Form 990 is for				·		
	check this box and stop here		, ,	.,,	,		▶□
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15				column (f))		15	98.91 %
16			-	(7)		16	99.06 %
_	ction D. Computation of Inve				 -		
17				ne 13. column (fl)	- · · ·	17	1.19 %
18	•	•	•	10 10, 00,0,,,,,		18	1.03 %
	a 33 1/3% support tests - 2009. If the			on line 14, and line	15 is more than 3		
13	more than 33 1/3%, check this box a	-					►X
	b 33 1/3% support tests - 2008. If the	-	-	•	-		
	line 18 is not more than 33 1/3%, che	=					a.io
20							
20	Private foundation. If the organization	on did not check a	50x on line 14, 19	a, or 190, check th		structions	2 200 571 2000

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

➤ Attach to Form 990. ➤ See separate instructions.

2009 Open to Public Inspection

Name of the organization

EMBRACE KIDS FOUNDATION

Employer identification number 22-3092432

Par	t i Organizations Maintaining Donor Advise		ds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor ad	vised funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		be used only
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Par	······································	ganization answered "Yes" to Form 990	, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		•
	Preservation of land for public use (e.g., recreation or p		historically important land area
	Protection of natural habitat	· —	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the for	m of a conservation easement on the last
_	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	2d	
3	Number of conservation easements modified, transferred, re		the organization during the tax
·	year ▶	, o	• . • . •
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		_ of
_	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		s during the year
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abor		
•	and section 170(h)(4)(B)(ii)?	,	Yes No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and exper	nse statement, and balance sheet, and
•	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		
Pa	rt III Organizations Maintaining Collections o	of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of	public service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
ь	If the organization elected, as permitted under SFAS 116, to		lance sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education,	•	
	these items:	•	,,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for finan-	
_	the following amounts required to be reported under SFAS 1		and gains provide
а	D 1 1 1 5 000 D 13/00 t 4	. , o , olding to those terms.	▶ \$
b			► \$ ► \$
J	Additionaded in Ferrit 500; Falt A		· · ·

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Schedule D (Form 990) 2009

Part VI Investments - Land, Bu	ildings, and Equipment. Se	ee Form 990, Part X, line 1	10.	
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		30547.		30547.
b Buildings		983482.	202356.	781126.
c Leasehold improvementsd Equipment		48454.	40458.	7996.
e Other Total Add lines 1a through 1e. (Column (d)	must oqual Form 990. Part Y. colur	mp (R) line 10(c))	•	819669.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities.	See Form 990, Part X, line	12		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua st or end-of-year mark	
Financial derivatives				
Closely-held equity interests				
Other				
				
				
			_ 	
	-			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	·			
Part VIII Investments - Program Related.	See Form 990, Part X, line	13.	4 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	A
(a) Description of investment type	(b) Book value	Co	(c) Method of valua st or end-of-year man	
	"			
				
				
Total (Cat /h) must soud Form 000 Port V and /D) line 12 \				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, II				
	(a) Description			(b) Book value
	(a) 2 a a a a a a a a a a a a a a a a a a			(-,
				-
				
	· · · · · · · · · · · · · · · · · · ·	· ···········		•
				
			,	
			,,,,,,,,	
Total. (Column (b) must equal Form 990, Part X, col (B)	line 15.)		>	
Part X Other Liabilities. See Form 990, Part				
1. (a) Description of liability		(b) Amount		
Federal income taxes		,		
]	
]	
			J	
			J	
]	
Total. (Column (b) must equal Form 990, Part X, col (B)	line 25)			
O. CINI 40 Feetrate In Dark VIV. provide the text of the		'a financial statement	- 4144- 41	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability founcertain tax positions under FIN 48.

02-01-1

che	dule D (Form 990) 2009 EMBRACE KIDS FOUNDATION				3092	432 P	age 4
o _{ar}	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited	Financial Sta	temen	ts		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			11245	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			11336	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3				38.
4	Net unrèalized gains (losses) on investments		4			1045	76.
5	Donated services and use of facilities		5				
6	Investment expenses		. 6				
7	Prior period adjustments		7				
8	Other (Describe in Part XIV.)		8				
9	Total adjustments (net). Add lines 4 through 8		9	_		1045	
0	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	9	10			954	138.
	t XII Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per	r Returr	<u>1</u>		
1	Total revenue, gains, and other support per audited financial statements			1		12291	.09.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				ļ		
а	Net unrealized gains on investments	2a	104570	6.	ĺ		
ь	Donated services and use of facilities	2b			1		
c	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIV)	2d					
е	Add lines 2a through 2d			2e		1045	
3	Subtract line 2e from line 1			3		11245	33.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	investment expenses not included on Form 990, Part VIII, line 7b	4a			1		
ь	Other (Describe in Part XIV.)	4b			ĺ		
c	Add lines 4a and 4b			4c	L		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5		11245	33.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents Witl	h Expenses p	er Retu	ırn		
1	Total expenses and losses per audited financial statements			1		11336	571.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.						
а	Donated services and use of facilities	2a					
b	Prior year adjustments	2b					
С	Other losses	2c					
d	Other (Describe in Part XIV.)	2d					
е	Add lines 2a through 2d			2e			0.
3	Subtract line 2e from line 1			3		11336	571.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			ŀ			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			[
b	Other (Describe in Part XIV)	4b					
С	Add lines 4a and 4b			4c			0.
5				5		11336	571.
	rt XIV Supplemental Information						
Corr	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	, lines 1a a	and 4; Part IV, line	s 1b and	2b, Parl	t V, line 4;	Part
						_	

X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. Part X Line 2 - Fin 48 Footnote - The FASB issued an interpretation

regarding Accounting for Uncertainty in Income Taxes. This interpretation clarifies the accounting for uncertainity in income taxes recognized in an enterprise's financial statements in accordance with Accounting for Income Taxes, and is effective for fiscal years beginning after December 15, 2008. The Organization adopted the provisions of the pronouncement and the adoption did not impact the amounts reported in the Organization's financial statements.

Embrace Kids Foundation Securities on Hand - 2009

	<u># Shs</u>	Cost <u>12/31/09</u>	FMV 12/31/09
Abbott Laboratories Abbott Laboratories Berkshire Hathaway Inc	600	\$ 26,291	\$ 32,394
	80	3,780	4,319
	10	28,867	32,860
Comcast Corp Fidelity Floating Rate Hi Inc Fd Intel Corp	1,600	21,847	25,616
	4,440.563	35,203	41,786
	1,500	33,051	30,600
Intel Corp Intl Bus Machines Intl Bus Machines Johnson & Johnson	150	3,425	3,060
	200	24,361	26,180
	20	2,443	2,618
	400	24,383	25,764
Laboratory Corp Amer Hldgs Laboratory Corp Amer Hldgs Lowes Cos	400	23,724	29,936
	40	2,390	2,994
	1,000	41,338	36,350
Lowes Cos Marlin Business Services Marlin Business Services Malaga Cooks Browled Co	70	2,900	2,545
	2,000	20,905	15,860
	200	2,052	1,586
	600	24,353	27,096
Molson Coors Brewing Co Molson Coors Brewing Co News Corp Occidental Petroleum	75 150 500	24,333 3,047 2,934 25.898	3,387 2,053 40.675
Packaging Corp Amer	1,400	31,338	32,214
Spdr Gold Tr Gold Shs	300	28,451	32,193
Travelers Cos Inc	600	29,161	29,916
		\$ 442,142	\$ 482,002

# Shs		Trade Date	Sales		Short Term	Long Term
or \$ Value	Securities	Sold	Proceeds	Cost	Gain (Loss)	Gain (Loss)
400	Automatic Data Processing	5/7/09	14,060.71	13,975.55	85.16	
500	Automatic Data Processing	5/20/09	17,997 53	17,477 88	519.65	
60	Automatic Data Processing	5/7/09	2,101 54	2,076.80	24 74	
2	Berkshire Hathaway	5/27/09	5,893 88	5,773 33		120 55
600	Cabot Oil & Gas	6/8/09	20,873.98	21,060 00		(186 02)
300	Everest Reinsurance	5/27/09	20,148 48	20,433 20	(284.72)	
3,800 217	Fidelity High Income Fd	8/4/09	35,000 00	30,135.72	4,864.28	
377 912	Fidelity High Income Fd	8/4/09	3,480 57	3,014 93	465 64	
1,200	Microsoft Corp	9/4/09	28,973 89	23,321.84	5,652.05	
150	Microsoft Corp	9/10/09	3,617 79	2,921.00	696.79	
500	Nokia Corp	5/7/09	7,572.70	9,772 22		(2,199.52)
1,000	Nokia Corp	5/27/09	14,963.81	19,544 78		(4,580.97)
1,500	Vodafone	11/6/09	33,287 94	28,934 00	4,353.94	
.,			207,972 82	198,441 25	16,377 53	(6,845.96)
		ST	158,668 45	142,290 92		
		LT	49,304 37	56,150 33		

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization	Attach to Form 990 or Form 990-E	<u> </u>	ee se	parate instructions	i	Employer idea	ntification number
EMBRACE	KIDS FOUNDATION					22-3092	
Part I Fundraising Activities. required to complete this part	Complete if the organization answers.	ered "Y	es" to	Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
Indicate whether the organization rais	e Solicitat f Solicitat g X Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) purs	ion of ion of fundra (includ	non-govern using of ding of sonal f	overnment grants nment grants events fficers, directors, trus undraising services?	stees	Yes	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	ustody trol of	(iv) Gross receipts from activity	to (d	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total	>						
List all states in which the organization NJ, PA	on is registered or licensed to solicit	runas	or nas	been notified it is ex	emp	t from registrati	on or licensing.
	· · · · · · · · · · · · · · · · · · ·						

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

Schedule G (Form 990 or 990-EZ) 2009

Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events Dinner Dance (add col. (a) through Auction 15 Marathon col. (c)) (total number) (event type) (event type) 185739 293188 513462 992389. Gross receipts 42475 55044 75952 Less: Charitable contributions 173471. 143264 238144 437510. 818918. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses 23824. 108488 132312. Rent/facility costs Food and beverages Entertainment 34705 48599. 97870 181174. Other direct expenses 313486 Direct expense summary. Add lines 4 through 9 in column (d) 505432 Net income summary. Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes % Yes Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column (d), and line 7 Yes No Enter the state(s) in which the organization operates gaming activities: NJ a is the organization licensed to operate gaming activities in each of these states? 9a Х b If "No," explain: Х 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain: X Does the organization operate gaming activities with nonmembers? 11 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?

Schedule G (Form 990 or 990-EZ) 2009 EMBRACE KIDS FOUNDATION 22-	309243		age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	<u>%</u>		-
b An outside facility	0 %		-
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name ▶ Glenn Jenkins	_		
Address ► 121 Somerset Street - New Brunswick, NJ 08905-0109			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		X
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount			-
of gaming revenue retained by the third party > \$			
c If "Yes," enter name and address of the third party:	ŀ		Ε
Name ▶			į
Address			
16 Gaming manager information:			
Name ▶			
Gaming manager compensation ▶ \$			
Description of services provided ▶			
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a is the organization required under state law to make charitable distributions from the gaming proceeds to	47-		Х
retain the state gaming license?	17a		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			
organization's own exempt activities during the tax year 🚩 🦻		<u> </u>	<u> </u>

SCHEDULE O

(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

Department of the Treasury
Internal Revenue Service

Name of the organization

EMBRACE KIDS FOUNDATION

Employer identification number 22-3092432

Form 990, Part VI, Section B, line 11: The Organization receives a Draft
copy of Form 990 from the preparer prior to filing. The governing body is
instructed to review the information return. The preparer awaits approval
of the return from the governing body. Upon receiving this approval, the
preparer submits a final draft of Form 990 for signature and submission.
Form 990, Part VI, Section C, Line 19: The Organization utilizes their
website to makes its governing documents, conflict of interest policy, and
financial statements available to the public.
Form 990, Part XI, Line 2c
The organization's oversight process for audit during the year ended
December 31, 2009 has not changed from the period year.

EMBRACE KIDS FOUNDATION FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

EMBRACE KIDS FOUNDATION

FINANCIAL STATEMENTS AND

SUPPLEMENTAL INFORMATION

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

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Cust, Dori & Benick, P.A.

Certified Public Accountants 5 Bartles Corner Road Flemington, NJ 08822 (908) 782-7300 Fax: (908) 782-8904 Members
Division for CPA Firms
AICPA
New Jersey Society of
Certified Public Accountants
New York Society of
Certified Public Accountants

John J. Cust, Jr., CPA Bruno N. Dorn, CPA Frank D. Benick, CPA, CVA Michael A. Petrecca, CPA

INDEPENDENT AUDITORS' REPORT

To The Board of Trustees of Embrace Kids Foundation

We have audited the accompanying statements of financial position of Embrace Kids Foundation (a non-profit organization), as of December 31, 2009 and 2008, and the related statements of activities and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. 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 audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Embrace Kids Foundation as of December 31, 2009 and 2008, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The schedules of functional expenses on pages 9 and 10 are presented for purposes of additional analysis and are not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, are fairly stated in all material respects in relation to the basic financial statements taken as a whole.

July 21, 2010

Cut. Dois Bend

EMBRACE KIDS FOUNDATION STATEMENTS OF FINANCIAL POSITION DECEMBER 31, 2009 AND 2008

<u>ASSETS</u>				
		<u>2009</u>		<u>2008</u>
CURRENT ASSETS				
Cash and Cash Equivalents	\$	135,228	\$	214,361
Revenue Receivables		51,285		35,747
Marketable Securities (Notes 2 and 3)		482,002		291,025
Prepaid Expenses		11,331		6,784
Total Current Assets		679,846		547,917
PROPERTY & EQUIPMENT (NOTES 1 AND 4)				
Land		30,547		30,547
Building and Improvements		983,482		983,482
Furniture, Fixtures & Equipment		48,454		48,454
Total		1,062,483		1,062,483
Less: Accumulated Depreciation		242,814		214,332
Net Property Plant & Equipment		819,669	_	848,151
TOTAL ASSETS	<u>\$</u>	1,499,515	<u>\$</u>	1,396,068
LIABILITIES AND NET ASSETS				
CURRENT LIABILITIES				
Accrued Expenses and Other Current Liabilities	\$	141,718	\$	109,464
Mortgage Loan Payable - Current Portion (Note 4)		25,974		24,487
Total Current Liabilities		167,692		133,951
OTHER LIABILITIES				
Mortgage Payable - Long-Term Portion (Note 4)		57,108		82,840
Total Liabilities		224,800	_	216,791
NET ASSETS				
Unrestricted		1,074,715		979,277
Temporarily Restricted (Note 2)		200,000		200,000
Total Net Assets		1,274,715		1,179,277

<u>\$ 1,499,515</u> <u>\$ 1,396,068</u>

TOTAL LIABILITIES AND NET ASSETS

EMBRACE KIDS FOUNDATION STATEMENTS OF ACTIVITIES FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

		2009		2008
UNRESTRICTED NET ASSETS				
SUPPORT				
Special Events - Fund-raising - Net School System Reimbursements Contributions and Grants	\$	678,902 44,508 368,387 12,249	\$	633,484 32,027 387,983 20,781
Total Support		1,104,046	_	1,074,275
NET ASSETS RELEASED FROM DONOR RESTRICTIONS		- 1,104,046		- 1,074,275
REVENUES				
Interest and Dividends Realized Gain (Loss) on Sale of Investments Unrealized Gains (Loss) on Investments		10,955 9,532 104,576		17,246 (77,475) (242,287)
Total Revenues (Losses) - Net	_	125,063		(302,516)
TOTAL SUPPORT AND REVENUES		1,229,109		771,759
EXPENSES Program Services		919,509		1,036,563
Supporting Services Management and General Fund-raising		74,765 139,397	_	88,532 156,675
Total Expenses		1,133,671	_	1,281,770
INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS		95,438	_	(510,011)
TEMPORARILY RESTRICTED NET ASSETS Contributions Net Assets Released from Donor Restrictions		-		· .
INCREASE (DECREASE) IN TEMPORARILY RESTRICTED NET ASSETS			_	
TOTAL INCREASE (DECREASE) IN NET ASSETS		95,438		(510,011)
NET ASSETS AT BEGINNING OF YEAR		1,179,277	_	1,689,288
NET ASSETS AT END OF YEAR	<u>\$</u>	1,274,715	<u>\$</u>	1,179,277

EMBRACE KIDS FOUNDATION STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

		2009	2008
CASH FLOWS FROM OPERATING ACTIVITIES			
Increase (Decrease) in Net Assets	\$	95,438	\$ (510,011)
Adjustment to Reconcile Changes in Net Assets to Net Cash Provided by (Used for) Operating Activities:		·	
Depreciation and Amortization		28,482	30,760
Realized (Gain) Loss on Sale of Securities		(9,532)	•
Unrealized (Gain) Loss on Securities		(104,576)	•
Changes in Assets and Liabilities		(,,
(Increase) Decrease in Revenue Receivables		(15,538)	24,618
(Increase) Decrease in Prepaid Expenses		(4,547)	1,138
Increase in Accrued Expenses and Other Current Liabilities		32,254	76,187
Decrease in Deferred Revenue		-	(6,000)
Net Cash Provided by (Used for) Operating Activities		21,981	(63,546)
CASH FLOWS FROM INVESTING ACTIVITIES			
Acquisition of Property & Equipment		-	(11,207)
Proceeds from Sale of Investments		207,973	533,979
Purchase of Investments		(284,842)	•
Net Cash Flows Provided by (Used for) Investing Activities		(76,869)	55,831
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayment of Mortgage Payable		(24,245)	(22,673)
NET DECREASE IN CASH AND CASH EQUIVALENTS		(79,133)	(30,388)
CASH AND CASH EQUIVALENTS - BEGINNING OF YEAR		214,361	244,749
CASH AND CASH EQUIVALENTS - END OF YEAR	\$	135,228	\$ 214,361
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION			
Interest Paid	<u>\$</u>	6,350	\$ 8,053

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Organization - Embrace Kids Foundation is a non-profit organization founded and chartered in New Jersey committed to enhance and support the quality of life and care of children with cancer and blood disorders and to provide a full range of support services to those children treated at the Cancer Institute of New Jersey and Robert Wood Johnson University Hospital.

<u>Basis of Presentation</u> - The accompanying financial statements follow the standards of accounting for non-profit organizations which are in conformity with recommendations of the American Institute of Certified Public Accountants.

<u>Cash and Cash Equivalents</u> - Cash equivalents consists of certificates of deposit with original maturities of three months or less. Certificates of deposit with original maturities that exceed three months are classified as temporary investments.

<u>Use of Estimates in the Preparation of Financial Statements</u> - The preparation of financial statements in conforming with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Actual results could differ from those estimates.

Marketable Securities - Embrace Kids Foundation recognizes FASB ASC 958 Non-Profit Entities (FAS 124). Under FAS 124, investments in marketable securities with readily determinable fair values and all investments in debt securities are included in the change in net assets.

<u>Recognition of Donor Restrictions</u> - All donor-restricted support is reported as an increase in temporarily or permanently restricted net assets depending on the nature of the restriction. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets.

<u>Financial Statement Presentation</u> - Embrace Kids Foundation recognizes FASB ASC 958 Non-Profit Entities (FAS 117). Under FAS 117, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. In addition, The Embrace Kids Foundation is required to present a statement of cash flows.

<u>Contributions</u> - Embrace Kids Foundation recognizes FASB ASC 958 Non-Profit Entities (FAS 116). In accordance with FAS 116, contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions. Under FAS 116, such contributions are required to be reported as temporarily restricted support and are then reclassified to unrestricted net assets upon expiration of the restriction.

<u>Federal Income Tax Status</u> - Embrace Kids Foundation is classified as an exempt organization under the Internal Revenue Code Section 501 (c)(3) and as a public charity qualified for charitable contributions under the Internal Revenue Code Section 170.

<u>Concentration of Credit Risk</u> - Embrace Kids Foundation's cash equivalents and marketable securities are reviewed by management along with the financial institutions its funds are invested and has determined that the Embrace Kids Foundation's exposure to concentrations of credit risk is limited.

NOTE 1 (CONT'D)

<u>Property and Equipment</u> - Property and equipment are stated at cost. Depreciation is computed using the straight-line and declining balance methods over the estimated useful lives of the related assets as follows:

Building and Improvements

40 Years

Furniture, Fixtures and Equipment

5-7 Years

Expenditures for general repairs and maintenance are expensed as incurred. Expenditures for major renewals and improvements that extend the useful lives of the property and equipment are capitalized. Upon disposition, the cost and related accumulated depreciation are removed from the accounts and the resulting gain or loss is reflected in operations for the period.

Depreciation expense was \$28,481 and \$30,761 for the years ended December 31, 2009 and 2008, respectively.

<u>Loan Origination and Acquisition Costs</u> - Loan origination fees and acquisition costs are amortized by the straight-line method over five years.

<u>Subsequent Events</u> - The Organization adopted FASB ASC 855 Subsequent Events (FAS 165). Under FAS 165 the Organization did not have any subsequent events through July 21, 2010, which is the date the financial statements were available to be issued for events requiring recording or disclosure in the financial statements for the year ended December 31, 2009.

Accounting for Uncertainty in Income Taxes

The Financial Accounting Standards Board ("FASB") issued an interpretation regarding Accounting for Uncertainty in Income Taxes. This interpretation clarifies the accounting for uncertainty in income taxes recognized in an enterprise's financial statements in accordance with Accounting for Income Taxes, and is effective for fiscal years beginning after December 15, 2008. The Organization adopted the provisions of the pronouncement and the adoption did not impact the amounts reported in the Organization's financial statements.

NOTE 2 TEMPORARILY RESTRICTED NET ASSETS

There were no net assets released from donor restrictions during the years 2009 and 2008.

As of December 31, 2009, management has reviewed all prior donor restrictions and has determined the balance of restricted net assets, to be represented by an emergency family needs fund in the amount of \$200,000.

NOTE 3 MARKETABLE SECURITIES

Marketable securities consisted of corporate equities with a fair market value of \$482,002 as of December 31, 2009. As of December 31, 2009 and 2008, marketable securities in the amount of \$200,000 and \$200,000, respectively, were temporarily restricted. As of December 31, 2008, marketable securities consisted of corporate equities and government bonds with a fair market value of \$291,025.

<u>Fair Value Measurements</u> - In September 2006, the FASB issued *Fair Value Measurements and Disclosures*, in order to establish a single definition of fair value and a framework for measuring fair value in accounting principles generally accepted in the United States of America ("GAAP") that is

NOTE 3 MARKETABLE SECURITIES (CONT'D)

intended to result in increased consistency and comparability in fair value measurements. Fair Value Measurements and Disclosures also expands disclosures about fair value measurements. Fair Value Measurements and Disclosures applies whenever other authoritative literature requires (or permits) certain assets or liabilities to be measured at fair value, but does not expand the use of fair value. Fair Value Measurements and Disclosures was originally effective for financial statements issued for fiscal years beginning after November 15, 2007, and interim periods within those years with early adoption permitted.

In early 2008, the FASB issued Effective Date of Fair Value Measurements and Disclosures, which delayed, by one year, the effective date of Fair Value Measurements and Disclosures for all nonfinancial assets and nonfinancial liabilities, except those that are recognized or disclosed at fair value in the financial statements on a recurring basis (at least annually). During the 2009 fiscal year, the Organization adopted the portion of Fair Value Measurements and Disclosures which was previously delayed by the FASB. The guidance pertains to items including, but not limited to, nonfinancial assets and nonfinancial liabilities initially measured at fair value in a business combination, nonfinancial assets (such as real estate or donation-in-kind) recorded at fair value at the time of donation, and long-lived assets measured at fair value for impairment assessment under Accounting for the Impairment or Disposal of Long-Lived Assets.

Fair Value Measurements and Disclosures establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. Fair Value Measurements and Disclosures defines fair value as the price that would be received to sell an asset or paid to transfer a liability (i.e., the "exit price") in an orderly transaction between market participants.

In determining fair value, an organization can use various valuation approaches, including market, income and/or cost approaches. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements), and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under Fair Value Measurements and Disclosures and the Organization's related types, are described below:

- Level 1 Quoted prices for identical instruments in active markets.
- Level 2 Quoted prices for similar instruments in active markets; quoted prices for identical or similar instruments in markets that are not active; and model-driven valuations whose inputs are observable or whose significant value drivers are observable.
- Level 3 Significant inputs to the valuation model are unobservable.

The following table summarizes the valuation of the Organization's assets within the aforementioned valuation hierarchy as of December 31, 2009:

	 	<u>In</u>	vestments	at Fair V	alue		
	 Level 1	Le	vel 2	Le	vel 3		Total
Equities	\$ 440,216	\$	-	\$	-	\$	440,216
Bond Funds	 41,786		•				41,786
Total	 482,002	\$	-	\$	<u> </u>	_\$_	482,002

NOTE 4 MORTGAGE LOAN PAYABLE

In November, 2002, Embrace Kids Foundation obtained a commercial mortgage of \$245,000 from the Somerset Valley Bank for its building located at 121 Somerset Street, New Brunswick, NJ. The loan was paid through November 2007 at which time the loan balance was \$130,000. This balance was refinanced with New Millennium Bank, payable over five years with monthly payments of \$2,549.51 including interest, currently at 6.50%. The land and building are collateral for the loan. The loan balance at December 31, 2009 and 2008 was \$83,082 and \$107,327, respectively.

	2009		<u>2008</u>
Total Debt	\$ 83,082	\$	107,327
Less: Current Portion	 25,974	_	24,487
Long-Term Debt - Net of Current Portion	\$ 57,108	\$_	82,840

Maturities of long-term debt are as follows::

Year Ending December 31,	
2010	\$ 25,974
2011	27,714
2012	 29,394
	\$ 83,082

NOTE 5 GRANT TO ROBERT WOOD JOHNSON MEDICAL SCHOOL

Embrace Kids Foundation has an agreement with the Robert Wood Johnson Medical School to provide support services to children and their families. Support services include teaching, child activities, counseling, emergency and other family needs, along with other program costs. Grants to the Robert Wood Johnson Medical School and other program costs for the years ended December 31, 2009 and 2008 were \$270,000 and \$320,824, respectively.

NOTE 6 COMMITMENTS AND CONTINGENCIES

There were no research grants awarded to the Cancer Institute of New Jersey in 2009 and 2008.

NOTE 7 BUILDING OPERATIONS

The building's operational costs incurred for the period ended December 31, 2009 and 2008 were as follows:

	<u>2009</u>	2008
Depreciation and Amortization	\$ 28,481	\$ 30,761
Interest Expense	6,350	8,053
Utilities	14,952	19,287
Insurance	13,597	14,310
Office Expense	4,664	4,001
Repairs and Maintenance	7,491	7,336
Other Costs	6,946	 3,952
Total Building Costs	\$ 82,481	\$ 87,700

NOTE 8 PENSION PLAN

In January 2003, the Organization established a 401-K savings plan for all eligible participants with a safe harbor contribution of 3% of eligible compensation. The Organization's safe harbor contribution for 2009 and 2008 was \$31,434 and \$16,025, respectively.

EMBRACE KIDS FOUNDATION SCHEDULE OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2009

					oddne	Supporting Services	ွ			Total
		Program Services	Man	Management and General	n T	Fund Raising		Total Supporting Services		
EXPENSES										
Salaries	ઝ	208,016	↔	24,640	₩	70,615	↔	95,255	↔	303,271
Payroli Taxes		16,293		1,968		5,958		7,926		24,219
Health Insurance		13,636		1,646		4,987		6,633		20,269
Pension Expense		21,146		2,554		7,734		10,288		31,434
Professional Fees				16,606		33,000		49,606		49,606
Tutors, Family Services, Etc.		572,085		. 1				•		572,085
Employee Leasing		4,081		314		1,884		2,198		6,279
Office Expenses		14,264		14,264		8,012		22,276		36,540
Telephone		•		1,281				1,281		1,281
Advertising & Public Relations		•		2,466		•		2,466		2,466
Printing, Publications & Postage		1,921		1,819		•		1,819		3,740
Research Grant		•		,		•		•		•
Travel and Meeting Expenses						•		•		•
Miscellaneous Expense		•		•		•		•		ı
Building Expense (Note 7)	ł	68,067		7,207		7,207	l	14,414		82,481
Total Expenses	₩.	919,509	σ	74,765	s	139,397	₩.	214,162	S	1,133,671

1.5

EMBRACE KIDS FOUNDATION SCHEDULE OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2008

					Support	Supporting Services				Total
		Program Services	Mana and (Management and General	FU	Fund Raising	•	Total Supporting Services		
EXPENSES	•	000	6	902.00		70.447	6	100 153	¥	404 135
Date: 1 Taxon 9 Descrits	Ð	292,302	ð	20,700	9	13,447	9	16,365	→	44 864
Looth he was		20,433		, c		3 137		5,490		24 583
Pension Expense		2,55 8,758		1 110		6.147		7.257		16,025
Professional Fees		3		25.211		32,625		57,836		57,836
Tutors, Family Services, Etc.		604,117		•		•				604,117
Employee Leasing		4.051		419		2,164		2,583		6,634
Office Expenses		•		14.177		13,404		27,581		27,581
Telephone		•		673		` .		673		673
Advertising & Public Relations		•		1.349		•		1,349		1,349
Printing, Publications & Postage		3,811		2,462		•		2,462		6,273
Research Grant		•		•		•		•		•
Travel and Meeting Expenses				•		•				•
Miscellaneous Expense		•		•		•		•		•
Building Expense (Note 7)		72,242		7,729		7,729	ı	15,458	}	87,700
Total Expenses	₩	1,036,563	₩.	88,532	છ	156,675	€9	245,207		\$ 1,281,770

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

internal neve	inite a separate application for each return.	
	are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ X
•	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	•
Do not c	omplete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed Form 8868.
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A corpora	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete
Part I onl	,	▶ □
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ome tax returns.	extension of time
noted be (not auto you must	ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension ow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file poy/efile and click on e-file for Chanties & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T Instead,
Type or	Name of Exempt Organization	Employer identification number
print	EMBRACE KIDS FOUNDATION	22-3092432
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. 121 SOMERSET STREET	
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW BRUNSWICK, NJ 08901	
Check ty	pe of return to be filed (file a separate application for each return):	
For	m 990	27 69
Telepi	GLENN JENKINS books are in the care of 121 SOMERSET STREET - NEW BRUNSWICK, NJ none No. 732-247-5300 FAX No. proganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this	▶ □
box ►	. If it is for part of the group, check this box and attach a list with the names and EINs of all it	
is f	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unti- $\begin{array}{c} \text{August 15, 2010} \\ \text{or the organization's return for:} \\ \hline \textbf{X} \end{array}$ calendar year $\frac{2009}{}$ or	
>	tax year beginning, and ending	•
2 If t	nis tax year is for less than 12 months, check reason: Initial return	Change in accounting period
3a If t	nis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
	nrefundable credits. See instructions.	3a \$
b If t	nis application is for Form 990-PF or 990-T, enter any refundable credits and estimated	
	payments made. Include any prior year overpayment allowed as a credit.	3b \$
	lance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	
	posit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	
Se	e instructions.	3c \$ N/A
Caution.	If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	8879-EO for payment instructions.
LHA F	or Privacy Act and Paperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev 4-2009)