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Return of Organization Exempt From Income Tax

2009

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

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

Open to Public Inspection

For the 2009 calendar year, or tax year beginning

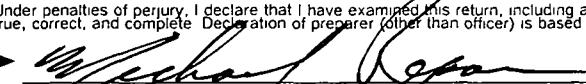
, 2009, and ending

B Check if applicable		C		D Employer Identification Number	
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		ADVOCATES FOR KIDS 71 E. LIVINGSTON AVENUE COLUMBUS, OH 43215		31-1407921	
		F Name and address of principal officer SAME AS C ABOVE		E Telephone number 614-224-3667	
				G Gross receipts \$ 11,319,046.	
				H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If No, attach a list (see instructions)	
				H(c) Group exemption number ►	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				J Website: ► N/A	
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		L Year of Formation		M State of legal domicile OH	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities ADVOCATES FOR KIDS PRIMARILY SUPPORTS ORGANIZATIONS THAT PROVIDE MEDICAL AND/OR THERAPEUTIC SERVICES TO CHILDREN WITH SPECIAL NEEDS. ADVOCATES FOR KIDS ACCOMPLISHES IT'S GOALS AND OBJECTIVES BY MANAGING A STATE WIDE GIVING PROGRAM, ESTABLISHING INITIATIVES TO PROMOTE SERVICES				
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets	3 7			
	3 Number of voting members of the governing body (Part VI, line 1a)	4 4			
	4 Number of independent voting members of the governing body (Part VI, line 1b)	5 3			
	5 Total number of employees (Part V, line 2a)	6 30			
	6 Total number of volunteers (estimate if necessary)	7a 0.			
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7b 0.			
	b Net unrelated business taxable income from Form 990-T, line 34				
	8 Contributions and grants (Part VIII, line 1h)	9 11 NOV 15 2010 IRS-OSC			
	9 Program service revenue (Part VIII, line 2g)	10 411 -473,612. 409,625.			
	10 Investment income (Part VIII, column (A), lines 3-4 and 7d)	11 696,115. 949,894.			
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9b, 10c, and 11e)	12 378,207. 1,505,190.			
12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)					
Revenue Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	14 156,344. 162,242.			
	14 Benefits paid to or for members (Part IX, column (A), line 4)	15 248,254. 265,855.			
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)				
	16a Professional fundraising fees (Part IX, column (A), line 11e)				
	b Total fundraising expenses (Part IX, column (D), line 25) ► 110,273.				
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	18 351,109. 285,498.			
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	19 755,707. 713,595.			
	19 Revenue less expenses Subtract line 18 from line 12	-377,500. 791,595.			
	20 Total assets (Part X, line 16)	Beginning of Year 2,406,181.			
	21 Total liabilities (Part X, line 26)	End of Year 3,197,776.			
22 Net assets or fund balances Subtract line 21 from line 20	0. 0.				
	2,406,181. 3,197,776.				

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	Signature of officer ► 		Date ► 11/12/10
	Type or print name and title ► Michael Repas, Executive Director, President		

Paid Preparer's Use Only	Preparer's signature ► 	Date ► 11-11-10	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) P00368108
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► FRUSH & ASSOCIATES 699 S FRONT ST COLUMBUS, OH 43206-1013	EIN ► 31-1308134	Phone no ► (614) 445-7217	

May the IRS discuss this return with the preparer shown above? (see instructions)

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

TEEA0113L 12/29/09 Form 990 (2009)

917

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
If 'Yes,' describe these new services on Schedule O

 Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If 'Yes,' describe these changes on Schedule O

 Yes No

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

4a (Code: **████████**) (Expenses \$ 548,189, including grants of \$ _____) (Revenue \$ _____)
SEE ATTACHED SCHEDULE.

4b (Code: **████████**) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: **████████**) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

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

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ► 548,189.

Part IV Checklist of Required Schedules

	Yes	No
1	X	
2	X	
3	X	
4	X	
5		
6	X	
7	X	
8	X	
9	X	
10	X	
11	X	
12	X	
12 A	X	
13	X	
14a	X	
14b	X	
15	X	
16	X	
17	X	
18	X	
19	X	
20	X	

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

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

4 **Section 501(c)(3) organizations** Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

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

6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III

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

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

11 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

- 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 liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X

12 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII

12A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

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

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

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

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III

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

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, 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, and 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 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)	28a X	
a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b X	
b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28c 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	29 X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	30 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	31 X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	32 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	33 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	34 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	35 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	36 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	37 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	38 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		

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 U S Information Returns Enter -0- if not applicable	1a	16
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	248
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
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	3
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
3b	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 financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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	4a	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
5b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
5c	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 any contributions that were not tax deductible?	6a	X
6b	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).	7a	X
7b	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?	7b	
7c	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7c	X
7d	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
7e	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7e	X
7f	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	X
7g	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
7h	g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7h	
8	h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	8	
9a	8 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?	9a	
9b	9 Sponsoring organizations maintaining donor advised funds.	9b	
10a	a Did the organization make any taxable distributions under section 4966?	10a	
10b	b Did the organization make any distribution to a donor, donor advisor, or related person?	10b	
11a	10 Section 501(c)(7) organizations. Enter: a Gross income from other members or shareholders	11a	
11b	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	11 Section 501(c)(12) organizations. Enter: a Gross income from other members or shareholders	12a	
12b	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body 1a 7
 b Enter the number of voting members that are independent 1b 4

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? SEE SCHEDULE O 2 X

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X

4 Did the organization make any significant changes to its 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 X

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a X

b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b X

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
 a The governing body? 8a X
 b Each committee with authority to act on behalf of the governing body? 8b X

9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 X

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

10a Does the organization have local chapters, branches, or affiliates? 10a X

b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b

11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 X

11A Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O

12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a X

b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X

c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O 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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
 a The organization's CEO, Executive Director, or top management official 15a X
 b Other officers of key employees of the organization SEE SCHEDULE O 15b X
 If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a X

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? 16a X

b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ► MICHAEL REPAS 71 E. LIVINGSTON AVENUE COLUMBUS OH 43215 614-224-3667

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 employees.'
- 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

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

1 b Total

0. | 0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 0

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

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 0

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	145,671.		
	g Noncash contribns included in lns 1a-1f		\$		
h Total. Add lines 1a-1f			145,671.		
PROGRAM SERVICE REVENUE		Business Code			
	2a				
	b				
	c				
	d				
	e				
	f All other program service revenue				
g Total. Add lines 2a-2f					
3	Investment income (including dividends, interest and other similar amounts)		419,316.		419,316.
4	Income from investment of tax-exempt bond proceeds				
5	Royalties				
6a	Gross Rents	(i) Real	(ii) Personal		
b	Less: rental expenses				
c	Rental income or (loss)				
d	Net rental income or (loss)				
7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	504,880.				
b	Less: cost or other basis and sales expenses	514,571.			
c	Gain or (loss)	-9,691.			
d	Net gain or (loss)		-9,691.	-9,691.	
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c)				
	See Part IV, line 18	a			
b	Less: direct expenses	b			
c	Net income or (loss) from fundraising events				
9a	Gross income from gaming activities See Part IV, line 19	a	10246984.		
b	Less: direct expenses	b	9,299,285.		
c	Net income or (loss) from gaming activities		947,699.		947,699.
10a	Gross sales of inventory, less returns and allowances	a			
b	Less: cost of goods sold	b			
c	Net income or (loss) from sales of inventory				
11a	MISCELLANEOUS	Miscellaneous Revenue	Business Code		
b					
c					
d	All other revenue				
e	Total. Add lines 11a-11d			2,195.	
12	Total revenue. See instructions			1,505,190.	-9,691.
				0.	1,369,210.

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	162,242.	162,242.		
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	101,988.	71,392.	10,199.	20,397.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	105,614.	73,930.	10,561.	21,123.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	42,000.	29,400.	4,200.	8,400.
9 Other employee benefits				
10 Payroll taxes	16,253.	11,377.	1,625.	3,251.
11 Fees for services (non-employees)				
a Management				
b Legal	2,750.	1,925.	275.	550.
c Accounting	6,400.	4,480.	640.	1,280.
d Lobbying				
e Prof fundraising svcs See Part IV, In 17	11,958.	8,371.	1,196.	2,391.
f Investment management fees	50,079.	35,055.	5,008.	10,016.
g Other	1,733.	1,213.	173.	347.
12 Advertising and promotion	2,373.	1,661.	237.	475.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	122,711.	85,898.	12,271.	24,542.
17 Travel	7,083.	4,958.	708.	1,417.
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	7,719.	5,403.	772.	1,544.
23 Insurance	25,132.	17,592.	2,513.	5,027.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a SUPPLIES	18,075.	12,653.	1,807.	3,615.
b MEALS & ENTERTAINMENT	7,874.	5,512.	787.	1,575.
c REPAIRS & MAINTENANCE	7,262.	5,083.	726.	1,453.
d POSTAGE AND SHIPPING	6,303.	4,412.	630.	1,261.
e PRINTING AND PUBLICATIONS	4,396.	3,077.	440.	879.
f All other expenses	3,650.	2,555.	365.	730.
25 Total functional expenses. Add lines 1 through 24f	713,595.	548,189.	55,133.	110,273.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash – non-interest-bearing	61,511.	1	105,267.
	2 Savings and temporary cash investments	101,576.	2	308,833.
	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 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	214,362.	7	230,317.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	62,576.		
	b Less: accumulated depreciation.	10b 47,873.	10c 22,422.	14,703.
	11 Investments – publicly-traded securities	1,995,759.	11	2,515,325.
	12 Investments – other securities See Part IV, line 11		12	
	13 Investments – program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	10,551.	15	23,331.
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,406,181.	16	3,197,776.	
LIABILITIES	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		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.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	2,406,181.	27	3,197,776.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2,406,181.	33	3,197,776.
	34 Total liabilities and net assets/fund balances.	2,406,181.	34	3,197,776.

BAA

Form 990 (2009)

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
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 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	3b	

BAA

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.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

ADVOCATES FOR KIDS

Employer identification number

31-1407921

Part I - Reason for Public Charity Status (All organizations must complete this part.) See instructions

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

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name, city, and state
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 9 An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h

a Type I b Type II c Type III – Functionally integrated d Type III – Other

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	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)	

h Provide the following information about the supported organizations

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

BAA 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

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

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

Section A. Public Support

Calendar 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 'unusual grants')						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
4 Total. Add lines 1-through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)						12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
b 33-1/3 support test – 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test – 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal yr 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 'unusual grants')	449,356.	395,571.	176,512.	155,704.	145,671.	1,322,814.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	508,541.	857,313.	688,013.	696,115.	949,849.	3,699,831.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 Total. Add lines 1 through 5	957,897.	1,252,884.	864,525.	851,819.	1,095,520.	5,022,645.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 Public support (Subtract line 7c from line 6)						5,022,645.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	957,897.	1,252,884.	864,525.	851,819.	1,095,520.	5,022,645.
10a Gross income from interest, 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	28,832.	75,410.	196,109.	127,704.	115,259.	543,314.
c Add lines 10a and 10b	28,832.	75,410.	196,109.	127,704.	115,259.	543,314.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV	6,658.	39,484.	-66,861.	-601,316.	294,366.	-327,669.
13 Total support. (add lns 9, 10c, 11, and 12)						5,238,290.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	95.9 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	100.0 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	10.4 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	9.2 %
19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		▶ <input checked="" type="checkbox"/>
b 33-1/3 support tests – 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		▶ <input type="checkbox"/>
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		▶ <input type="checkbox"/>

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

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, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

ADVOCATES FOR KIDS

Employer identification number

31-1407921

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

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

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

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

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

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

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

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

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements \$ _____

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

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs
 e Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

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

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If 'Yes,' explain the arrangement in Part XIV

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

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

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment > _____ %

b Permanent endowment > _____ %

c Term endowment > _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations
 (ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements		18,926.	10,990.	7,936.
d Equipment		43,650.	36,883.	6,767.
e Other				

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

> 14,703.

BAA

Schedule D (Form 990) 2009

Part VII Investments–Other Securities See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		

Total. (Column (b) must equal Form 990 Part X, col (B) line 12)

Part VIII Investments—Program Related (See Form 990, Part X, line 13)

N/A

Total. (Column (b) must equal Form 990, Part X, Col (B) line 13)

Part IX. Other Assets (See Form 990, Part X, line 15)

N/A

Total. (Column (b) must equal Form 990, Part X, col (B), line 15)

Part X: Other Liabilities (See Form 990, Part X, line 25)

(a) Description of Liability	(b) Amount
Federal Income Taxes	

Total (Column (b) must equal Form 990, Part X, col (B) line 25)

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 for uncertain tax positions under FIN 48

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

N/A

- 1 Total revenue (Form 990, Part VIII, column (A), line 12)
- 2 Total expenses (Form 990, Part IX, column (A), line 25)
- 3 Excess or (deficit) for the year Subtract line 2 from line 1
- 4 Net unrealized gains (losses) on investments
- 5 Donated services and use of facilities
- 6 Investment expenses
- 7 Prior period adjustments
- 8 Other (Describe in Part XIV)
- 9 Total adjustments (net). Add lines 4 through 8
- 10 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9

Part XII: Reconciliation of Revenue per Audited Financial Statements With Revenue per Return N/A

7 N/A

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

Part XIII: Reconciliation of Expenses per Audited Financial Statements With Expenses per Return N/A

1

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

Part XIV: Supplemental Information

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

Part XIV: Supplemental Information (continued)

Part II 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.

REVENUE		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
	1 Gross receipts				
	2 Less. Charitable contributions				
	3 Gross income (line 1 minus line 2)				
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4- through 9 in column (d)				►
	11 Net income summary Combine lines 3, column (d) and line 10				►

Part III 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.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1 Gross revenue	900,058.	9,346,926.		10,246,984.
DIRECT EXPENSES	2 Cash prizes	350,000.	7,766,088.		8,116,088.
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses	488,047.	695,150.		1,183,197.
	6 Volunteer labor	<input checked="" type="checkbox"/> Yes 100 % <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 100 % <input type="checkbox"/> No	<input type="checkbox"/> Yes 0 % <input checked="" type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				► 9,299,285.
	8 Net gaming income summary Combine lines 1, column (d) and line 7				► 947,699.

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

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

9a	X

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

10a	X

11	X

12	X

b If 'Yes,' explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

13 Indicate the percentage of gaming activity operated in

- a The organization's facility
- b An outside facility

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

Name ► LORI BUTLER

Address ► 71 E. LIVINGSTON AVENUE, COLUMBUS, OH 43215

15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?

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

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

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$ _____

Description of services provided ►

Director/officer

Employee

Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

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 ► \$ _____

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

ADVOCATES FOR KIDS

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.
► Attach to Form 990.

2009

**Open to Public
Inspection**

Name of the organization

ADVOCATES FOR KIDS

Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II **Grants and Other Assistance to Governments and Organizations in the United States** Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

1 (a) Name and address of organization or government	1 (b) EIN	1 (c) IRC section if applicable	1 (d) Amount of cash grant	1 (e) Amount of non-cash assistance	1 (f) Method of valuation (book, FMV, appraisal, other)	1 (g) Description of non-cash assistance	1 (h) Purpose of grant or assistance
CLEVELAND HEARING & SPEECH CENTER 11206 EUCLID AVENUE CLEVELAND, OH 44106	34-0714648		7,500.	0.			SUMMER YOUTH PROGRAMMING
COMM SVCS FOR THE DEAF-AKRON 212 E. EXCHANGE AVENUE AKRON, OH 44304	34-0714398		7,500.	0.			SUMMER YOUTH PROGRAMMING
DEAF COMMUNITY CENTER-DAYTON 3333 STANLEY AVENUE DAYTON, OH 45404	20-5202136		7,500	0.			SUMMER YOUTH PROGRAMMING
DEAF INITIATIVES 563 S. DAWSON AVENUE COLUMBUS, OH 43209	31-1589808		10,000.	0.			PROGRAMMING
DEAF SERVICES CENTER 5830 N. HIGH STREET COLUMBUS, OH 43085	31-1329649		28,475.	0.			KODA & SUMMER PROGRAMS
DISABILITY RESOURCE NETWORK 525 MAIN STREET GROVEPORT, OH 43125	31-1812068		11,600.	0.			PROGRAMS
EXTREME MOBILITY 2551 REGENCY ROAD # 105 LEXINGTON, KY 40503			8,423.	0.			GAIT TRAINER FOR DISABLED
HEARING, SPEECH & DEAF CENTER-CI 2825 BURNET AVENUE CINCINNATI, OH 45219	31-05336654		7,500.	0.			SUMMER YOUTH PROGRAMMING

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

TEEA3901L 02/10/10

Schedule I (Form 990) 2009

11

1

Part IV: Supplemental Information: Complete this part to provide the information required in Part I, line 2, and any other additional information

PART II LINE 2 - GRANTMAKER'S DESCRIPTION OF HOW GRANTS ARE USED

GRANTEES RECEIVING \$5,000 OR MORE ARE REQUIRED TO SUBMIT DETAILED PROGRAM DESCRIPTION AND FINANCIAL REPORTS AT LEAST ANNUALLY. AT A MINIMUM THE REPORTS INCLUDE, DESCRIPTION OF THE PROGRAM AND PROGRAM ACTIVITIES, NUMBERS OF DISABLED CHILDREN ATTENDING, RESULTS OF MEASURABLE OBJECTIVES AND OUTCOMES, AND AN EVALUATION OF THE PROGRAM. ONE TO ONE COMMUNICATION, INCLUDING SITE VISITS, CAN TAKE PLACE THROUGHOUT THE FUNDING PERIOD.

Schedule I (Form 990) 2009

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**

OMB No 1545-0047

2009Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
► Attach to Form 990.Open to Public
Inspection

Name of the organization

ADVOCATES FOR KIDS

Employer identification number

31-1407921**FORM 990, PART III, LINE 1 - ORGANIZATION MISSION**

ADVOCATES FOR KIDS PRIMARILY SUPPORTS ORGANIZATIONS THAT PROVIDE MEDICAL AND/OR THERAPEUTIC SERVICES TO CHILDREN WITH SPECIAL NEEDS. ADVOCATES FOR KIDS ACCOMPLISHES IT'S GOALS AND OBJECTIVES BY MANAGING A STATE WIDE GIVING PROGRAM, ESTABLISHING INITIATIVES TO PROMOTE SERVICES FOR CHILDREN WITH SPECIAL NEEDS, SUPPORTING CHARITABLE ORGANIZATIONS IN THE DEVELOPMENT OF THEIR ABILITY TO PROVIDE SERVICES, AND BY CONSULTING WITH NOT FOR PROFIT ORGANIZATIONS REGARDING THEIR FUND RAISING AND CHARITABLE GIVING PROGRAMS. IN SUPPORT OF THESE PROGRAMS, ADVOCATES FOR KIDS IS CREATING AND MANAGING AN ENDOWMENT TO ENSURE THE CONTINUATION OF THE ORGANIZATION'S MISSION FOR YEARS TO COME.

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECT

MICHAEL REPAS IS MARRIED TO MARGOT ALLEN-REPAS AND BROTHER TO DANIEL REPAS AND DIANA KEATING.

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

A COMPLETED FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS, AT LEAST ONE WEEK PRIOR TO A MEETING HELD FOR THE PURPOSE OF REVIEWING THE FORM 990. AFTER REVIEW, AND INCLUSION OF ANY AMENDMENTS, THE BOARD OF DIRECTORS WILL AUTHORIZE ITS SUBMISSION.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE CONFLICT OF INTEREST POLICY WAS ESTABLISHED ON OCTOBER 24, 2006. AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE, THAT REQUIRES DISCLOSURE OF ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST, IS COMPLETED EACH YEAR BY BOARD MEMBERS AND KEY EMPLOYEES. THE CONFLICT OF INTEREST QUESTIONNAIRES ARE REVIEWED ANNUALLY BY THE BOARD. MEMBERS INDICATING POSSIBLE CONFLICTS ARE PROHIBITED FROM PARTICIPATING IN THE BOARDS DELIBERATIONS AND DECISIONS IN RELATED TRANSACTIONS.

Name of the organization

ADVOCATES FOR KIDS

Employer identification number

31-1407921

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEE

THE BOARD ESTABLISHED THE EXECUTIVE COMPENSATION POLICY STATEMENT ON APRIL 28, 2007.

THE POLICY REQUIRES INDEPENDENT BOARD MEMBERS TO DETERMINE THE BOUNDS OF COMPARABLE

COMPENSATION WITHIN COMPARABLE ORGANIZATIONS OF SIMILAR SIZE AND GEOGRAPHICAL AREA

OR AREAS SIMILAR TO IT. THE BOARD DOCUMENTS THE BASIS FOR ITS DETERMINATION IN THE

MINUTES OF THE BOARD MEETING CALLED FOR THE PURPOSE OF SETTING EXECUTIVE

COMPENSATION.

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

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE

MAINTAINED AT THE PRIMARY OFFICE FACILITY OF ADVOCATES FOR KIDS. THESE DOCUMENTS

ARE MADE AVAILABLE FOR VIEWING BY THE PUBLIC DURING REGULAR BUSINESS HOURS. VIEWING

OF THESE DOCUMENTS BY THE PUBLIC AT TIMES OUTSIDE OF THE REGULAR BUSINESS HOURS IS

PERMISSIBLE BUT BY APPOINTMENT ONLY.

Name of the organization

ADVOCATES' FOR KIDS

Employer identification number

| 31-1407921

Advocates for Kids
EIN – 31-1407921
2009 – 990, page 2, Part III, Line 4a, 4b, & 4c

4a) Managing a Statewide Giving Program:

In 2009 a milestone for the Advocates for Kids Statewide Giving Program was achieved. In 2009 Advocates for Kids total giving primarily in support of programs serving children with special needs reached over one million dollars. In 2009 Advocates for Kids provided \$162,242 of support. In 2009, \$96,975 provided support for programs serving children who are deaf or hard of hearing. Deaf Services Center in Columbus Ohio received \$29,475 in funding and represented the largest single recipient of support. The remainder of the grants awarded ranged from \$100 to \$12,500. Of the total \$1,040,264 awarded to date, \$434,171 has been given to deafness related programs. The vast majority of grants awarded were for under \$8,000 and given to organizations with revenues under \$5,000,000.

4b.) Establishing Initiatives to Promote Services for Children with Special Needs: Creating summer programming and communication opportunities for children who are deaf and hard of hearing throughout Ohio.

Many parents and educators acknowledge that children's academic skills may regress during the summer months. However, in the absence of the quality and quantity of support services received during the school year, children with special needs are at much greater risk of significant regression academically, socially and emotionally. For example, throughout the school year, development of communication skills is an ongoing priority for children who are deaf. They spend most of the school day with teachers and staff who are trained to communicate using a variety of communication modes. Additionally, the children have an opportunity to communicate with other friends and fellow students who are deaf. Because of this communication-rich environment, generally children who are deaf or hard of hearing thrive. However, during the summer months, this communication-rich environment is not available. Furthermore, many of these children are in situations where communication is extremely limited and, in some extreme instances, almost non-existent. This lack of communication during summer months can have a dramatic, negative impact. Consequently, Advocates for Kids created an initiative to create summer programming for children who are deaf and hard of hearing throughout Ohio. As a result of this initiative, summer camps and other therapeutic activities specifically designed to promote socialization as well as communication for children who are deaf and hard of hearing have been developed throughout the state. In 2004, initial grants of \$5,000 were awarded to six organizations in Ohio. Prior to these grants, the Columbus Deaf Services Center was the only Community Center for the Deaf in Ohio to regularly provide summer programming for children who are deaf and hard of hearing. In 2005, seven organizations received summer programming grants. In 2006 and 2007 eight centers received summer programming grants of \$7,500 each. In 2008 Advocates for Kids awarded seven \$7,500 grants in support of summer activities and in 2009 Advocates for Kids provided nine grants of \$7,500 for summer programming and activities for children who are deaf or hard of hearing. To date, Advocates for Kids has awarded grants to centers of and for the Deaf in the following cities throughout Ohio: Akron, Canton, Cleveland, Cincinnati, Columbus, Dayton, Mansfield, Portsmouth, Toledo and Youngstown. As a result of this initiative, over 300 children who are deaf participate in summer youth programming annually.

4c.) Supporting Other Charitable Organizations in the Development of Their Service Programs-- Consulting with Other Charitable Organizations in Fundraising and Charitable Giving Programs:

Advocates for Kids selected the following four organizations in Columbus, Ohio as priority programs in 2006/2007: Deaf Initiatives, Deaf Services Center, Disability Resource Network, and Willow Ridge Therapeutic Riding Program. Disability Resource Network and Willow Ridge are two newly established programs that received start-up funds and management consultation. Deaf Services Center received financial support for their Deaf Kids and Teens Club and also receives ongoing management and development consultation. In addition to supporting these priority programs, in 2009 Advocates for Kids assisted 20 veteran and fraternal organizations throughout Ohio in their fundraising and charitable giving programs.

4d.) Creating and Managing an Endowment to Assure the Continuation of Advocates for Kids mission:

In order to support our mission for years to come, Advocates for Kids strives to build a strong financial base. In 1999 the organization had no endowment and held only \$7,369 in total assets. By the end of 2005 corporate assets reached \$1,650,368 and by 2006 year-end assets climbed to \$2,254,290. In 2007 Advocates for Kids assets equaled \$2,671,458 and due to the economic slowdown and poor investment returns in 2008 total corporate assets were \$2,406,181. In 2009 our total assets reached \$3,197,776. Funds not used in fund raising or the operations of the corporation are considered part of the Board established endowment fund. All endowment fund expenditures require prior Board approval.

2009

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

CLIENT 1788

ADVOCATES FOR KIDS

31-1407921

8/31/10

02.43PM

PART III, LINE 12 - OTHER INCOME

<u>NATURE AND SOURCE</u>	<u>2009</u>	<u>2008</u>	<u>2007</u>	<u>2006</u>	<u>2005</u>
NET UNREALIZED GAIN/LOSS	304,057.	-545,881.	-71,009.	34,157.	
MISCELLANEOUS				6,005.	
SALE OF SECURITIES	-9,691.	-55,435.	4,148.	-678.	6,658.
TOTAL	<u>\$ 294,366.</u>	<u>\$ -601,316.</u>	<u>\$ -66,861.</u>	<u>\$ 39,484.</u>	<u>\$ 6,658.</u>

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return.

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

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only ► []*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns*

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form; visit www.irs.gov/file and click on e-file for Charities & Nonprofits

Type or print	Name of Exempt Organization ADVOCATES FOR KIDS	Employer identification number 31-1407921
File by the due date for filing your return. See instructions	Number, street, and room or suite number. If a P O box, see instructions 71 E. LIVINGSTON AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions COLUMBUS, OH 43215	
Check type of return to be filed (file a separate application for each return):		
<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ► MICHAEL REPAS

Telephone No ► 614-224-3667 FAX No. ►

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

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15, 20 10, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

- calendar year 20 09 or
- tax year beginning , 20 , and ending , 20

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

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

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

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev 4-2009)