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Paid

Preparer

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Fort: 990

Department of the Treasury

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2016

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

Inspection Internal Revenue Service ► Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2016 calendar year, or tax year beginning 2016, and ending 20 Check if applicable C Name of organization Adventist Adoption & Family Services D Employer identification number Doing business as Christian Family Adoptions 93-0801542 Address change Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone numbér 6040 S. E. Belmont Street 503-232-1211 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Portland, OR 97215-1974 Amended return G Gross receipts \$ 538,308 Application pending F Name and address of principal officer: H(a) Is this a group return for subordinates? Yes W No Gayle Fidanzo - above address H(b) Are all subordinates included? Yes No If "No," attach a list, (see Instructions) 501(c) (501(c)(3)) ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status: Website: ▶ christianfamilyadoptions.org H(c) Group exemption number Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation: 1987 M State of legal domicite: OR Summary Part I Briefly describe the organization's mission or most significant activities: counseling & adoption services Governance Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 14 Total number of individuals employed in calendar year 2016 (Part V. line 2a) 5 14 Total number of volunteers (estimate if necessary) 50 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 Current Year 23,881 Contributions and grants (Part VIII, line 1h) . 25,364 R SO-SI 9 Program service revenue (Part VIII, line 2g) 487,138 511,252 Investment income (Part VIII, column (A), lines 3,4, and 7d)
Other revenue (Part VIII, column (A), lines 5, 623c, 950 Vc, land 21e). 10 75 8,148 11 1,692 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A) 12 519,242 538,308 Grants and similar amounts paid (Part IX, column (A) lines 1-3 13 Benefits paid to or for members (Part IX, column (A), line 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 331,209 15 309,306 Professional fundraising fees (Part IX, column (A), line 11e) 16a THE THE PERSON NAMED IN Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 103,275 180.776 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 412,581 511,985 18 19 Revenue less expenses. Subtract line 18 from line 12 106,661 26,323 **Beginning of Current Year** End of Year 173,501 144,477 Total assets (Part X, line 16) 20 3,808 16,236 21 Total liabilities (Part X, line 26) . 169,693 128.241 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of proparer (other than officer) is based on all information of which preparer has any knowledge Sign Date Executive Director ridanzo. Here Type or pant name and title

Preparer's signature

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Print/Type preparer's name

Firm's name

Firm's address ▶

Cat. No. 11282Y

Date

Check [] if

self-employed

Firm's EIN ▶

Phone no.

Form 990 (2016)

☐ Yes ☐ No

Form 99	0 (2016)			Page 2
Part				
	Check if Schedule O contains a	response or note to any line in this Pa	art III	<u></u> 🗆
1	Briefly describe the organization's mis-	sion:		
	counseling & adoption services			
			·	

2	Did the organization undertake any sig	unificant program services during the ye	ar which were not listed on the	
				☐ Yes ☐ No
	If "Yes," describe these new services of			
3	Did the organization cease conducti	ng, or make significant changes ın h	ow it conducts, any program	
			• • • • • • • • •	☐ Yes ☐ No
	If "Yes," describe these changes on So			
4	Describe the organization's program s	ervice accomplishments for each of its	three largest program services	, as measured by
		(4) organizations are required to report	t the amount of grants and allo	cations to others,
	the total expenses, and revenue, if any	, for each program service reported.		
4a	(Code:) (Expenses \$	440,307 including grants of \$) (Revenue \$	462,944)
	pre-adoption counciling, adoption home	studies, adoptive placements and supervi	sion, preparing necessary docum	ents for adoptions

		·		
4b	(Code:) (Expenses \$	26,348 including grants of \$) (Revenue \$	53,831)
	crisis pregnancy counseling, assistance	with adoptive placements for birth parent	S	,

	***************************************			***************************************

	***************************************		***************************************	
4c	(Code:) (Expenses \$	10,241 including grants of \$	\/Revenue.\$	21,533)
40	promote adoption to the general public		/ (. to volido 🗘	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	promote dooption to the general pools			

			••••••••••••	

	01	abadula O)		
4d	Other program services (Describe in S		e v	
40	(Expenses \$ including Total program service expenses ▶	grants of \$) (Revenue	y)	

Part	IV Checklist of Required Schedules			Page
ı aı t	Onecklist of Required Scheddles		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	Γ		+
	complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	V	1
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		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
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		-
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		~
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V .	10		v
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	· ·	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII	11b		1
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	
A	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	111		V
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	1
14 a		14a	 	1
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		t	1
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

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

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

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.

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

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

16

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18

Part	IV Checklist of Required Schedules (continued)			age
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		V
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		~
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u> </u>
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		,
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	1		
	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	OFL.		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	25b		<u> </u>
20	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		~
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):	200		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		~
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		V
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		V
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		_
-	complete Schedule N, Part II	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt-or-taxable-entity?-II-"Yes;" complete-Schedule R, Part II, III,	33		
	or IV, and Part V, line 1	34		~
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		V
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	V	

	90 (2016) •			Page 5
Par				
	Check if Schedule O contains a response or note to any line in this Part V			. 🗆
			Yes	No
1a	The same reported in box bior to the resolution of it flot applicable	- 1	73 Y	100
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	ાં છું	7	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4		1
•	reportable gaming (gambling) winnings to prize winners?	1c		~
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	3	1	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 14		۱۶۱ نیم سرمضمحت	<u> </u>
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	<u> </u>
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
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			١.
	account)?	4a		"
b	If "Yes," enter the name of the foreign country:			-
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	,		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
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?	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 as charitable contributions?	6a		~
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	'	
7	Organizations that may receive deductible contributions under section 170(c).		1	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	Ì	' "	,
	and services provided to the payor?	7a		ン
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 to file Form 8282?	7c		~
ď	If "Yes," indicate the number of Forms 8282 filed during the year	1	,	4
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		V
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	$\neg \neg$	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		-:	
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		,	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.	(· · · ·	3.3	
а	Initiation fees and capital contributions included on Part VIII, line 12	- A'		
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	كأنعد	12.00	<u> </u>
11	Section 501(c)(12) organizations. Enter:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	At .
a	Gross income from members or shareholders	i		× 51
þ	Gross income from other sources (Do not net amounts due or paid to other sources		" . "	, s
	against amounts due or received from them.)		السعد	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	34	, ,	*,
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1 ",	- 4-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.	, .		
b	Enter the amount of reserves the organization is required to maintain by the states in which			ļ ¹
	the organization is licensed to issue qualified health plans	1	, , , ,	i.;
C	Enter the amount of reserves on hand	М		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See ins	for a	ions.
Sect	ion A. Governing Body and Management	 :	 :	. 1
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		Yes	No
ь 2 3	Enter the number of voting members included in line 1a, above, who are independent 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? Did the organization delegate control over management duties customarily performed by or under the direct	2		
4 5 6 7a	supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	3 4 5 6 7a		> > > > > > > > > > > > > > > > > > >
8 p	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		<u>, ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;</u>
a b 9	The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	8a 8b	٧ ٧	·
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co		
10a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a	Yes	No
11a b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	11a 12a 12b	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u>/</u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	V	
13 14 15	Did the organization have a written whistleblower policy?	13	7	
a b 16a	The organization's CEO, Executive Director, or top management official	15a 15b		٧ ا
	with a taxable entity during the year?	16a 16b	1.7.7	
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed none Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☑ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	>	

-orm	990	(2016)	,

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

	Check if	Sche	dule	O cc	ntain:	s a re	spo	nse o	r note	e to a	ın١	y line in thi	s Part V	11 .			 		_	. [٦
_											_				 	 	 	 		 	_

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.

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

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

Check this box if neither the organization n	or any relate	a org	anız			ompe	nsa	ted any curren	it officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any	box.	unles	Pos leck is pe d a d	rson	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	ndividua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Kristine Aldrich	0.58	}						}		
Board member	0				١	1		}		
(2) Pete Aldrich	1									
Treasurer	0]		[Į į	
(3) Bob Bedritis	0.58									
Board member	0	1			}					
(4) Christy Clark	0.58							T		
Board member	0	}							i	
(5) Joel Clark	0.58	-								
Board member	0	<u> </u>			<u> </u>	<u> </u>				
(6) Guy Majors	0 58					[-			
Board member	0		<u>.</u>					ļ		
(7) Nikki Raichart	0.58	1					_			
Board member	0	<u> </u>	<u> </u>		<u>. </u>		<u>L</u>			
(8) Tad Raichart	0.58]			[]		
Board member	0									
(9) Eric Schindler	1								}	
President	0	<u> </u>	1_				<u>L</u>	<u> </u>		
(10) Sally Schindler	1	ļ]	l	l _]		
Secretary	0									<u></u>
(11)Mary Starrett	0.58	}	_		[[}		
Board member	0	<u> </u>	_		<u></u>	L	L			
(12)Renee Saunders	0.58						1			
Board member	0		_	L	L	L	_		<u> </u>	
(13) Jenna Williams	0.58	}	}		-	1	1			
Board member	0			L			L	<u> </u>		
(14) Steve Williams	0.58]		1						
Board member	0		1	1	1	1	1	{	Į l	

Par	VII Section A. Officers, Directors, Trus	ees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (continued)
		İ	}		•	C)			}		
	(A)	(B)	(do n	Position to not check more than or					(D)	(E)	(F)
	Name and title	Average hours per	box, unless person is bot officer and a director/trus						Reportable compensation	Reportab compensation	
		week (list any						<u> </u>	from	related	other
		hours for related	Individual frustee or director	Institutional	ğ	Key employee	Highest compensated employee	Former	the organization	organizatio (W-2/1099-N	
		organizations	88	ition	ध	ğ	st co	4	(W-2/1099-MISC)	(11 🗷 1005	organization
		below dotted line)	٦	12		oye	qmo	1	1		and related organizations
		,	ie e	Irustee		l °	ensa	1	Į.		
				•	ŀ		ê		İ		
(15)											
		ļ							ļ		
(16)		ļ							[
		<u> </u>		\vdash		L			 		
<u>07)</u>		}]						1		
(40)									<u> </u>		
(10)		}							}		
			-		-	-					
3397			1						ļ		
(20)		 			_	-		-			
3=:77									į		
(21)											
<i>3</i> 2									}		
(22)											
(23)	***************************************										
								_			
(24)						1		ŀ]		}
 -										 	
(25)			1								
1b	 	L	ــــــــــــــــــــــــــــــــــــــ	لبا	<u> </u>	لــا					
C	Sub-total						•	>	}		
ď	Total (add lines 1b and 1c)							A			
2	Total number of individuals (including but								ho received m	ore than \$1	00 000 of
_	reportable compensation from the organi			050	. 1131	.cu i	above	2) **	no received in	oie mair wi	00,000 01
			-								Yes N
3	Did the organization list any former of	ficer, direc	tor, c	r tr	uste	эe,	key e	emp	loyee, or high	est compe	
	employee on line 1a? If "Yes," complete	Schedule J	for su	ıch	indi	ividı	ıal				3
4	For any individual listed on line 1a, is the	sum of re	portal	ole (con	nper	rsatio	n a	nd other comp	ensation fr	om the
	organization and related organizations	-	an \$1	50,	000	17 11	"Ye	s,"	complete Sch	edule J fo	r such
	individual		• •	•			•				4 "
5	Did any person listed on line 1a receive o										
	for services rendered to the organization	r ii res, c	ompi	818	SCI	ieac	ne J-i	or s	uch person	 	5
	on B. Independent Contractors								41 -4		C100 000 -4
1	Complete this table for your five highest compensation from the organization. Rep										
	year.	on compe	nsauc	JII IV	J1 (1	16 6	alend	ai y	real ending with	II OI WILLIIII	the organization a tax
	(A)							Γ-	(B)		(C)
	Name and business add	ress							Description of s	ervices	Compensation
											
2	Total number of independent contractor							th	ose listed ab	ove) who	1
	received more than \$100,000 of compens	ation from	the or	gan	izat	ion l	>			i	~ાં સુંધોનો ફે ર્ય

4	Check if Schedule O contains a re	sponse or note	to any line in this			F
<u>s</u> s	-		Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from to under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a	Ť	 	revenue	revenue	excluded from to under sections
s, S	b Membership dues 1b		1			512-514
Sift ar	d Related organizations 1d		1 1	1		
im.	e Government grants (contributions) 1e		1 1	ł		
ıtioi er S	f All other contributions, gifts, grants,		1	j		
ig ig	and similar amounts not included above			1	'	
<u>6</u> 5	9 Noncash contributions included in lines 1a-1f: \$	25,364	1	}	1	
<u></u>	h Total. Add lines 1a-1f			Ì	1.	
Program Service Revenue	_	Business Code	25,364		ſ	
£	2a Infant program b home study fees		200 004			
<u>ş</u> [c post placement fees		209,386	209,386		· · · · · · · · · · · · · · · · · · ·
Ser	d foster child program		140,274	106,600		
E	e application fees		37,825	140,274		
ğ	f All other program service revenue		17,167	37,825 17,167		
= -	_ 9			17,167		
	investment income (including	de interior	511,252			
	and other similar amounts)	ids, interest,				
- 1	Income from investment of tax-exempt bone Royalties	d proceeds			1	
		-				
-10	6a Gross rents (i) Real	(ii) Personal				
- {	b Less: rental expenses		1	1		
-	c Rental income or (loss)		1),	4	
1,	d Net rental income or (loss)			1	j	,
'	oross amount from sales of O Security	(ii) Other				
1	assets other than inventory b Less: cost or other having					
	b Less: cost or other basis and sales expenses .		J.		4	
.	Gain or (loss)		1	4	I	1
1	Net gain or (loss)		Ĭ	1	1	ř
	· · · -	▶				,
8a	- 300 mcome from fundroists - 1					
1	events (not including S	1	1	j	ľ	
l	of contributions reported on line 1c). See Part IV, line 18	<u> </u>	. ↓	1	,	ŀ
ь	ossi diriv, iile 18	4,082		}	٠ ١	1
	TTOO, GIICLI EXTIANCAC		į,	1		!
9a	Gross income from anni fundraising even	ts . ►	1,692	J		,
	Territ, inte 19					1,692
b	dii eti exilencac				-	.,
2	TO THOUSE OF THOSE TO THE TOTAL			1	1	
ıva						
	oranis and allowances	1				
.,	Less: cost of goods sold		1	1	1	
	Net income or (loss) from sales of inventory Miscellaneous Revenue					I
c		less Code				_,
c I1a	Busin		_	l		
<u> </u>	Busir				1	
l1a	Busin					
l1a b c	All other revenue					
l1a b c d	All other revenue Total. Add lines 11a-11d Total revenue. See instructions.					

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lin	e in this Part IX .		
Do no 8b, 9i	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				Unpulses.
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	294,449	276,782	17,667	
	section 401(k) and 403(b) employer contributions)	(8,749)	(8,224)	(524)	
9 10	Other employee benefits	51,285 (5,776)	46,156 (5,430)	5,129	
11	Fees for services (non-employees):	(3,778)	(3,430)	(347)	
а	Management				
b	Legal	12,745	12,745		
c d	Accounting	3,741	3,741		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other, (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O.)	4,613	4,613		
12 13	Advertising and promotion	15,079 26,949	15,079	2 224	
14	Office expenses	20,749	23,712	3,236	
15	Royalties				· - ·
16	Occupancy	6,251	6,251		
17	Travel	5,603	5,603		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	2,166	1,776	390	· ····································
20 21	Interest				
22	Depreciation, depletion, and amortization	584		584	
23	Insurance	11,957	11,957		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)		- '	·	`
а	birth parent costs	35,103	35,103		
ь	telephone expense	7,494	6,594	900	
c d	printing & publications	4,638	4,638		
e	All other expenses	43,855	35,801	8,054	
25	Total functional expenses. Add lines 1 through 24e	511,985	476,896	35,090	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here Infollowing SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

_		Check if Schedule O contains a response or note to any line in this Par	πX		
_			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	152,292	1	84,829
	2	Savings and temporary cash investments	3,311	2	41,712
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	957	4	1,579
	5	Loans and other receivables from current and former officers, directors,	ŧ		, , ,
	}	trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	tone were and the co		
	١.	L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section		, '	• •
]	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
s]	organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	· · · · · · · · · · · · · · · · · · ·	9	
	10a	Land, buildings, and equipment: cost or		3	 ,
	l	other basis. Complete Part VI of Schedule D 10a 29,540			,
	b	Less: accumulated depreciation 10b 29,136	988	10c	404
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	15,953	15	15,953
	16	Total assets. Add lines 1 through 15 (must equal line 34)	173,501	16	144,477
	17	Accounts payable and accrued expenses	1,646		3,283
	18	Grants payable		18	<u> </u>
	19 20	Deferred revenue		19	
	21	Tax-exempt bond liabilities		20	
u	22	Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors,		21	
Liabilities	22	trustees, key employees, highest compensated employees, and	•		, , , , , , , , , , , , , , , , , , ,
Ē		disqualified persons. Complete Part II of Schedule L		22	
2	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 (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	ļ		
		of Schedule D	2,162	25	12,953
	26	Total liabilities. Add lines 17 through 25	3,808	26	16,236
S		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	,		
5		complete lines 27 through 29, and lines 33 and 34.	1) 		+ , , , , , , , , , , , , , , , , , , ,
Ē	27	Unrestricted net assets	160,395		118,943
ä	28	Temporarily restricted net assets	9,298		9,298
핕	29	Permanently restricted net assets.		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.	1		<i>4</i>
ţ	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥.	32	Retained earnings, endowment, accumulated income, or other funds .		32	
ž	33	Total net assets or fund balances	169,693		128,241
	34	Total liabilities and net assets/fund balances	173,501	34	144,477

	90 (2016)			Pa	ige 12
Par	t XI Reconciliation of Net Assets				<u> </u>
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			8,308
2	Total expenses (must equal Part IX, column (A), line 25)	2		51	1,985
3	Revenue less expenses. Subtract line 2 from line 1	3		2	6,323
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		16	9,693
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		(4	1,452)
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		12	8,241
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," expl	lain in]. / .	{ !	
	Schedule O.		1		
2a	The state of the s		2a		4
	If "Yes," check a box below to indicate whether the financial statements for the year were compile	led or	, ,		,
	reviewed on a separate basis, consolidated basis, or both:		3 5 1		
	Separate basis Consolidated basis Both consolidated and separate basis		7	1	
þ	The same of the sa		2b		~
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	i on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			3	المالية
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over		İ	ĺ	1
	of the audit, review, or compilation of its financial statements and selection of an independent account	tant?	2c	1	L
	If the organization changed either its oversight process or selection process during the tax year, exp	lain in		1	·]
	Schedule O.		- L		
За		orth in			
	the Single Audit Act and OMB Circular A-133?		3a	<u></u>	~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	go the]	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such aud	dits.	3b	1	l

Form 990 (2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2016
Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Adventist Adoption & Family Services DBA Christian Family Adoptions 93-0801542 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 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 331/3% 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 331/2% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) Instructions instructions) Yes No (A) (B) (C) (D) (E)

r ar	Complete only if you also died the	auons Desc	ribed in Seci	(ions 170(b)(1	I)(A)(IV) and 1	170(b)(1)(A)(v	(i)
	(Complete only if you checked the	ne box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	alify under
500	Part III. If the organization fails to	o quality und	er the tests li	sted below, p	lease comple	ete Part III.)	
	tion A. Public Support			,			
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	{	1		{		:
	include any "unusual grants.")	[1	ļ	{	ĺ	
2		 	 	ļ	<u> </u>	<u> </u>	ļ
2	Tax revenues levied for the organization's benefit and either paid	1	ł		}	,	1
	to or expended on its behalf	[1	į	,		1
3	The value of services or facilities		 				
3	furnished by a governmental unit to the	}	1	}	}		
	organization without charge		İ	1	į		ļ
	_		ļ	ļ			
4	Total. Add lines 1 through 3		 	ļ	ļ		
5	The portion of total contributions by		ļ	{	, •		
	each person (other than a		ļ	1			
	governmental unit or publicly		,]	7		
	supported organization) included on			1	,		
	line 1 that exceeds 2% of the amount shown on line 11, column (f)			\	-		
6	Public support. Subtract line 5 from line 4		 -	 			<u> </u>
	ion B. Total Support		L		<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2012	(-) 2014	(4) 0045	(-) 0040	1000
7	Amounts from line 4	(4) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
8	Gross income from interest, dividends,		 		ļ.— <u>—</u> —		
•	payments received on securities loans,		}	1			
	rents, royalties and income from similar		}	}		!	1
	sources		1	<u> </u>			
9	Net income from unrelated business		 				
_	activities, whether or not the business		1				
	is regularly carried on		ì		1		
10	Other income. Do not include gain or						
	loss from the sale of capital assets		ł				
	(Explain in Part VI.)		ŀ	1			
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instructi	ons)			12	
13	First five years. If the Form 990 is for the	e organization	n's first, secon	d. third, fourth	or fifth tax ve	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her	re		· · · · ·			▶ □
Secti	on C. Computation of Public Suppor	t Percentag	e				
14	Public support percentage for 2016 (line 6	, column (f) d	vided by line 1	1, column (f))		14	%
15	Public support percentage from 2015 Sch	edule A, Part	li, line 14 .		1	15	%
16a	331/3% support test-2016. If the organi	zation dıd not	check the box	k on line 13, ar	nd line 14 is 33	1/3% or more,	check this
	box and stop here. The organization qual	lifies as a publ	licly supported	organization			▶ □
b	331/3% support test—2015. If the organic	zation did not	check a box of	n line 13 or 16	a, and line 15	is 331/3% or m	ore, check
	this box and stop here. The organization	qualifies aș a	publicly suppo	rted_organizati	on,, -		▶ "□
17ā	10%-facts-and-circumstances test-20	16. If the org	anızation did n	ot check a bo	x on line 13, 10	6a. or 16b. and	d line 14 is
	10% or more, and if the organization me	ets the "facts	-and-circumst	ances" test, ch	neck this box a	nd stop here.	Explain in
	Part VI how the organization meets the "	facts-and-circ	umstances" te	st. The organia	zation qualifies	as a publicly	supported
	organization						▶ □
b	10%-facts-and-circumstances test-20						
	15 is 10% or more, and if the organiza	tion meets th	e "facts-and-o	circumstances'	' test, check t	his box and s	stop here.
	Explain in Part VI how the organization m	neets the "fac	ts-and-circum:	stances" test, '	The organization	on qualifies as	a publicly
	supported organization						▶ □
18	Private foundation. If the organization did	d not check a	box on line 13,	, 16a, 16b, 17a	, or 17b, check	this box and	see
	instructions						▶□

Part		ations Descr	ibed in Sect	ion 509(a)(2)			
	(Complete only if you checked the	he box on line	e 10 of Part I	or if the orga	nızation failed	to qualify ur	ider Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	H.)	
	ion A. Public Support		···				
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees		}			1	- -
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise			ļ			
-	sold or services performed, or facilities]	l				
	furnished in any activity that is related to the		Į.				
•	organization's tax-exempt purpose			<u> </u>			
3	Gross receipts from activities that are not an	}					
	unrelated trade or business under section 513		ļ				
4	Tax revenues levied for the					i i	
	organization's benefit and either paid						
_	to or expended on its behalf		 				
5	The value of services or facilities	-	ŀ		1		
	furnished by a governmental unit to the organization without charge					ŀ	
6	· ·					L	
6 7a	Total. Add lines 1 through 5	ļ. 	 			<u> </u>	
, a	received from disqualified persons .	ļ	1				
b	Amounts included on lines 2 and 3	}					
Ð	received from other than disqualified					}	
	persons that exceed the greater of \$5,000	[
	or 1% of the amount on line 13 for the year	}				i .	
c	Add lines 7a and 7b			}			
8		新四世纪武士	Tarkeles	Link billion is on	Wall Liberation 2	Act And Sound of the Sound	
	line 6.)					4.5	
Secti	on B. Total Support	1 - Above C on 2-288	THE C SHALLS SHOWN		N. Sandara S. Sandara S. N. S. A.	Section at 12 and 12	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,					l	
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business					·	
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or	,		}		}	
	loss from the sale of capital assets]			
	(Explain in Part VI.)			ļ	ļ		
13	Total support. (Add lines 9, 10c, 11,		1	ł			
	and 12.)	L	Ļ <u></u>	<u> </u>			
-14 ⁻	First five years. If the Form 990 is for the						
<u> </u>	organization, check this box and stop he					<u>· · · · · ·</u>	
	on C. Computation of Public Suppor			0		1461	
15	Public support percentage for 2016 (line Public support percentage from 2015 Sci					15	<u>%</u> %
16 Secti	on D. Computation of Investment In			· · · · ·		1101	
17	Investment income percentage for 2016 (v line 13 colu	mn (fl)	17	%
18	Investment income percentage from 2019			-		18	%
19a	331/2% support tests—2016. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2015. If the organiz					_	
_	line 18 is not more than 331/3%, check this						
20	Private foundation If the organization di	d not check a	hox on line 14	19a or 19h (heck this hox	and see instru	ctions >

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	art V	.)	
on A. All Supporting Organizations			
		Yes	No
Are all of the organization's supported organizations listed by name in the organization's governing	Ι.	()	
documents? If "No," describe in Part VI now the supported organizations are designated. If designated by			<u> </u>
	1		ļ
Did the organization have any supported organization that does not have an IRS determination of status		.	1.
under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
• • • • • • • • • • • • • • • • • • • •	2		
	[
	3a		<u> </u>
	1	, ,	
v	3b		
Dutine organization ensure that all support to such organizations was used exclusively for section 1/0(c)(2)(B)			ļ
	3c		ļ
"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a	<u> </u>	<u></u>
Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign		1 12	1.5
supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			-
despite being controlled or supervised by or in connection with its supported organizations.	4b		
Did the organization support any foreign supported organization that does not have an IRS determination		3,0	
		1.	
		<u> </u>	
	4c		L
	1	· .	2.
	1 m-1		·
			4,
		, ja	
	5a		
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			l
	9a		
	٣	 	
	9h		
from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
Was the organization subject to the excess business holdings rules of section 4943 because of section			1,*
4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	Ľ		-
supporting organizations)? If "Yes," answer 10b below.	10a		<u> </u>
Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			,
	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. In Instoir and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. Did the organization have a supported organization qualified under section 501(c)(4), (6), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization?"? If "Yes," explain have ultimate control and discretion in deciding whether to make grants to the foreign supported organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization support any foreign supported organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. Did the organization support an	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 509(a)(1) or (6)? If "Yes," answer (b) and (c) below. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization and organized in the United States ("foreign supported organization?" If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below. Did the organization have utilinate control and discretion in deciding whether to make grants to the toreign supported organization and such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization supported organization was used exclusively for section 170(c)(2)(B) purposes being controlled or supervised by or in connection with its supported organizations. But the properties organization and sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI, invaliding its the organization and sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI, invaliding its the organization and	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization and continuing relationship, explain. Did the organization have any supported organization and continuing relationship, explain. Did the organization have any supported organization and does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization assets described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. Did the organization on supported organization qualified under section 501(c)(4), (6), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. Did the organization neuror that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," explain in Part VI how the organization has uncontrol and discretion in deciding whether to make grants to the foreign supported organization has uncontrol and discretion under sections 501(c)(3) and 509(e)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(8) purposes. Did the organization support to the foreign supported organization was used exclusively for section 170(c)(2)(8) purposes. Did the organization support to the foreign supported organization was used exclusions during the tax year? If "Yes," describe in Part VI with o

determine whether the organization had excess business holdings.)

Part	IV Supporting Organizations (continued)			Page 5
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	140
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	L']	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sect	on B. Type I Supporting Organizations			
_	BUILD III A CONTRACTOR OF THE		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			-
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			}
	controlled the organization's activities. If the organization had more than one supported organization,			į
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	 -		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	} ;		. ;
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			,
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			1
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
		لــــــ	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1	-1	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1	- ,	,
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		لــــا
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	- ' -		
~	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1		3
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		,	
	significant voice in the organization's investment policies and in directing the use of the organization's			!
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	<u> </u>		
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			•
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in:	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax-year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,		٠	
	how the organization was responsive to those supported organizations, and how the organization determined	1		-
	that these activities constituted substantially all of its activities.	2a		لـــا
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	1	-	,
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		- i	
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.]
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			1
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard	3b		

Don't V Turn III Non Franchisco III I I I I I I I I I I I I I I I I I			
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization			
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g tru	st on Nov. 20, 1970 (explai	n in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	ıızaı	ions must complete Section	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
4 Not obout torm popital rain	1.4	 	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2	· · · · · · · · · · · · · · · · · · ·	ļ
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or	i	•	
collection of gross income or for management, conservation, or	1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	Π		t µ.s.
instructions for short tax year or assets held for part of year):	1		li, m
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	1		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	1		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		!
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		-
Section C - Distributable Amount		, 5, 10	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4	1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	1		
emergency temporary reduction (see instructions).	6	, ,	
7 Check here if the current year is the organization's first as a non-functional	ly in	tegrated Type III supporting	organization (see
instructions).		O saybe merkering	, : <u>G</u>

Schedule A (Form 990 or 990-EZ) 2016

redule	A (Form 990 or 990-EZ) 2016	Ownerling Organiz	ations (continued)	
art ^s		Supporting Organiz	attoris	Current Year
		xempt purposes	ted	
	Amounts paid to supported organizations to accomplish a Amounts paid to perform activity that directly furthers exer organizations, in excess of income from activity	The bulboses of gabbas		
_				
~				
	Administrative expenses paid to accomplish exempt purposed from activity Amounts paid to acquire exempt-use assets			
	a light and anida amounts (Orior IRO approval required)			
6	Other distributions (describe in Part VI). See Instructions.			
7	Total annual distributions. Add lines 1 through 6.	h the organization is res	ponsive	
8	Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which	if the organization to re-		
	Invovide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	(1)	(ii)	(iii)
s	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
1_	the deviloper if any for years prior to 2016			
^	(reasonable cause required — explain in Part VI). See			
2	instructions	<u> </u>		
3	Excess distributions carryover, if any, to 2016:	 		
_ <u>a</u> b				
	From 2013	<u> </u>		
	From 2014			1
	From 2015	<u> </u>	 	
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
<u>`</u>	A - " to de control distributable amount	_ 		
	Carpyover from 2011 not applied (see instructions)			
' i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		 	
4	Distributions for 2016 from			
-	Section D line 7:			
	Applied to underdistributions of prior years			
_	Applied to 2016 distributable amount			
	Demainder Subtract lines 4a and 40 from 4.	_		
5				
3				
	greater than zero, explain in Part VI. Gee mountain			
		3n		
•	and 4b from line 1. For result greater than zero, explain	1 114	_	
	n-+VI See instructions.			
	7 Excess distributions carryover to 2017. Add lines 3j	}		
•	and 4c.		-	
	B Breakdown of line 7:			
	h Excess from 2013			
	c Excess from 2014			
	d Excess from 2015			
	e Excess from 2016		Scher	lule A (Form 990 or 990-E

	Form 990 or 990-EZ) 2016 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Inspection

2016
Open to Public

Name of the organization Employer identification number Adventist Adoption & Family Services DBA Christian Family Adoptions 93-0801542 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Aggregate value of contributions to (during year) Aggregate value of grants from (dunng year) . Aggregate value at end of year 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? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 Tax Year Total number of conservation easements . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures; or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items; b Assets included in Form 990, Part X .

Schedu	sle D (Form 8 90) 2016					Page 2		
Par	Organizations Maintaining	Collections of	Art, Historical	Treasures, or O	ther Similar Ass	ets (continued)		
3								
а	☐ Public exhibition		d 🗌 Loar	or exchange prog	ırams			
b	Scholarly research		e 🗌 Othe	*				
C	☐ Preservation for future generations			******************				
4	Provide a description of the organizati XIII.	ion's collections a	and explain how	they further the or	ganization's exem	ot purpose in Part		
5	During the year, did the organization assets to be sold to raise funds rather					Yes 🗌 No		
Par	IV Escrow and Custodial Arra							
	Complete if the organization 990, Part X, line 21.		" on Form 990,	Part IV, line 9, or	reported an amo	ount on Form		
12	is the organization an agent, trustee,	custodian or oth	er intermedians	for contributions of	s other accets not			
10	included on Form 990, Part X?	Custodian or our	ier internieulary i	or commodutions o	r other assets not	☐ Yes ☐ No		
b	If "Yes," explain the arrangement in Pa					☐ 162 ☐ 140		
~	ir rest explain the attangement in re	in Air and comple	ete the londwing t	aole.	I Am	ount		
С	Beginning balance			11				
d	Additions during the year							
e	Distributions during the year							
ť	Ending balance							
	Did the organization include an amoun					☐ Yes ☐ No		
	If "Yes," explain the arrangement in Pa				•			
Par	t V Endowment Funds.		<u>-</u>					
	Complete if the organization	answered "Yes"	" on Form 990,	Part IV, line 10.				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back		
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and							
	losses]			
d	Grants or scholarships							
e	Other expenditures for facilities and							
	programs			<u> </u>		<u></u>		
/ f	Administrative expenses					L		
g	End of year balance		<u></u>	<u> </u>	<u> </u>	L		
2	Provide the estimated percentage of the	ne current year en	id balance (line 1	g, column (a)) held	as:			
а	Board designated or quasi-endowmen		%					
b	Permanent endowment	%						
С	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2	% should agual 1	00%					
32	Are there endowment funds not in the			at are held and a	lministered for the			
Ja	organization by:					Yes No		
	(i) unrelated organizations					3a(i)		
	(ii) related organizations					3a(ii)		
b	If "Yes" on line 3a(ii), are the related or					3b		
4	Describe in Part XIII the intended uses	or the organization	on s endowment-	rungs,				

Part VI Land, Buildings, and Equipmer Complete if the organization ans		m 990, Part IV, lin	e 11a. See Form 990), Part X, line 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land			The state of the s	
b Buildings				
c Leasehold improvements				
d Equipment	27,123		26,719	40
e Other	2,417		2,417	
otal. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part)	(, column (B), line 10	0c.) ▶	40-

Part VII	Investments—Other Securities.					rage V
	Complete if the organization answered	"Yes" on For	m 990,	Part IV, lin	e 11b. See For	m 990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) B	ook value		ethod of valuation nd-of-year market value
(1) Financial	derivatives					
(2) Closely-h	eld equity interests					
(3) Other						
(A)						
(B)					l	
(C)						
(D)						
(E)						
(F)						
(G)						
(H)	200 D. AV 4 D.F 401 D.					
	n) must equal Form 990, Part X, col. (B) line 12)				<u></u>	
Part VIII	Investments—Program Related. Complete if the organization answered	l "Voe" on For	~ 000	Part IV lin	a 11a Saa Far	m 000 Part V line 12
		1 les on Foi	~	look value		
	(a) Description of investment	Ì	(0)	ook value		lethod of valuation id-of-year market value
/41						
(1)						
(2)						
(3)						
(4) (5)						
(6)						
(7)					 	
(8)	· · · · · · · · · · · · · · · · · · ·					
(9)						
) must equal Form 990, Part X, col. (B) line 13.) ▶				:	
Part IX	Other Assets.				l'	
	Complete if the organization answered	f "Yes" on For	m 990,	Part IV, line	e 11d. See For	m 990, Part X, line 15.
	(a) Descr					(b) Book value
(1)	======================================					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)		· · · <u> </u>		~ 		
(8)						
(9)						
	nn (b) must equal Form 990, Part X, col. (B)	line 15.)	<u> </u>	· · · · · ·	<u> </u>	<u> </u>
Part X	Other Liabilities.		000	D-4 N/ C-	- 44 446 0	F 000 Boot V
	Complete if the organization answered	"Yes" on For	m 990,	Part IV, IIn	e 11e or 111. S	ee Form 990, Part X,
	line 25.	(b) Book value				
1.	(a) Description of liability	(D) BOOK Value				
(1) Federal in		<u></u> -	2.052			
	lan contribution		2,953			
(3)						
(4)						
(5) (6)						
		 				
(7)						
(8)						
	n) must equal Form 990, Part X, col. (B) line 25)		2,953			
	uncertain tax positions. In Part XIII, provide the			organization	n's financial states	nents that reports the
	s liability for uncertain tax positions under FIN 4					
5	, re- energiant last pooniens and in the	_ ,				

- P. C. T.	Reconciliation of Revenue per Audited Financial Statements With Revenue per l	Page
I GI	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	return.
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains (losses) on investments	1
ь	Donated services and use of facilities	
C	Recoveries of prior year grants	
ď	Other (Describe in Part XIII.)	,
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
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	
b	Other (Describe in Part XIII.)	
c	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses pe	r Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	,
b	Prior year adjustments	
C	Other losses	,
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
ь	Other (Describe in Part XIII.)	
-	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
	KIII Supplemental Information.	
	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b	
2; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inf	ormation.
	,,,,,,	

Schedule D (Form 990) 2016 Page 5					
Part XIII	Supplemental Information (continued)				
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SCHEDULE O · (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization		Employer identification number			
Adventist Adoption & Family Se	ervices DBA Christian Family Adoptions	93-0801542			
Form 990, Part VI, Line 2 - Business or Family Relationships of Officers, Directors, etc.					
President Eric Schindler is marr	President Eric Schindler is married to Secretary Sally Schindler				
Treasurer Pele Aldrich is marrie	ed to Board member Kristine Aldrich	·····			
Board member Christy Clark Is married to Board member Joel Clark					
Board member Nikki Raichart is married to Board member Tad Raichart					
Board member Jenna Williams i	is married to Board member Steve Williams				
Form 990, Part VI, Line 11b - For	rm 990 Review Process	***************************************			
The Board of Directors reviews the annual Form 990 at its regularly schedule meeting to verify its contents.					
Form 990, Part VI, Line 12c - Exp	planation of Monitoring and Enforcement of Conflicts	•			
A written conflict of interest poli	icy is signed and reviewed by the Board of Directors on an annual basi	S.			
Form 990, Part VI, Line 15a - Cor	mpensation Review and Approval Process - CEO and Top Management				
The pay for the Executive Director is reviewed and set by the Board of Directors					
		···			
Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available for Public Inspection					
Form 990, Governing Documents, Conflict of Interest Policy and Financial Statements are available upon request.					
Form 990, Part VI, Line 19 - Othe	er Organization Documents Publicly-Available				
Form 990, Governing Documents, Conflict of Interest Policy and Financial Statements are available upon request					
Form 990, Balance Sheet Line 17 Accounts Payable and Accrued Expenses					
Credil cards payable \$3,265					
Payroll llabilities \$18					
Total \$3,283					