	0	00	Return of Organization Exempt Fr	rom Ir	ncome Tax	OMB No. 1545-0047					
Form 990			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C	ept private foundation	s) 2022						
Demes		6 Ala a Turana a unu s	Do not enter social security numbers on this form as it		Open to Public						
Interna	al Rever	f the Treasury nue Service	Go to www.irs.gov/Form990 for instructions and the		Inspection						
AF	or the			nding A	PR 30, 2023						
B CI ap	neck if plicable		forganization		D Employer identific	ation number					
Address NATIONAL COUNCIL FOR ADOPTION											
]chang Name		usiness as		75-172167	71					
]chang Initial return	¥		oom/suite	E Telephone number	·					
	Final return/	/ 131	N. LEE STREET	0011/00110	703299663	33					
	termin	-	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,368,337.					
]Ameno]return		ANDRIA, VA 22314		H(a) Is this a group re						
	Applic] tion	IF Name a	nd address of principal officer: RYAN HANLON		for subordinates	? Yes 🔀 No					
	pendir	[431 N	LEE STREET, ALEXANDRIA, VA 22134		H(b) Are all subordinates ind	sluded? Yes No					
<u> </u> T	ax-exe	empt status:		527	lf "No," attach a l	ist. See instructions					
	/ebsit		ADOPTIONCOUNCIL.ORG		H(c) Group exemption						
Pa		summary	X Corporation Trust Association Other	L Year (of formation: 1980 M	State of legal domicile: TX					
	and others	and the second	e the organization's mission or most significant activities: RESEA	סרים							
e			CATION FOR EVERYONE IMPACTED BY ADO			, conmunity					
Activities & Governance		Check this bo				ets					
veri					3	18					
ဗီ			lependent voting members of the governing body (Part VI, line 1b)			18					
s S			of individuals employed in calendar year 2022 (Part V, line 2a)			10					
vitie			of volunteers (estimate if necessary)			0					
lcti	7 a	Total unrelate	d business revenue from Part VIII, column (C), line 12			0.					
\rightarrow	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	·····		0.					
	_				Prior Year	Current Year					
e			and grants (Part VIII, line 1h)		762,213.	714,812.					
Revenue		-	ice revenue (Part VIII, line 2g)		<u>169,389</u> . 1,853,709.	241,966. _104.					
Be			come (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,683.	0.					
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,796,994.	956,674.					
			milar amounts paid (Part IX, column (A), lines 1-3)		0.	0.					
			to or for members (Part IX, column (A), line 4)		0.	0.					
s			r compensation, employee benefits (Part IX, column (A), lines 5-10)		617,779.	510,497.					
enses	16a	Professional f	undraising fees (Part IX, column (A), line 11e)		0.	0.					
Expe			ing expenses (Part IX, column (D), line 25) 70,262								
ш			es (Part IX, column (A), lines 11a-11d, 11f-24e)		612,281.	656,022.					
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,230,060.	1,166,519.					
	19	Revenue less	expenses. Subtract line 18 from line 12		1,566,934.	<u>-209,845.</u> End of Year					
Net Assets or -und Balances	20	Total aposto (Dart V lina 16)		ginning of Current Year 2,504,494.	2,267,494.					
Asse Bala		•	⊃art X, line 16) s (Part X, line 26)		376,265.	348,930.					
Net /			s (Part X, line 26) fund balances, Subtract line 21 from line 20		2,128,229.	1,918,564.					
	rt II	Signature									
Unde	r pena	alties of perjury,	I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my	knowledge and belief, it is					
true,	correc	ct, and complete	. Declaration of preparer (other than officer) is based on all information of whic	ch preparer	has any knowledge.	1					
		KA	fn		9/15/	2023					
Sigr		Signature 0 d			Date /						
Here	e	RYAN HA									
·		Type or print r		l r	Date Check	PTIN					
Date		Print/Type pre			if						
Paid Prep	aror	Firm's name	. GILL JR.DAVID J. GILL JR.HAEFELE, FLANAGAN & CO., P.C.	•	Self-employe	₫ <u>₽00935081</u> 2-3008776					
Use		Firm's name			FILLISEIN Z.	- JUUU//U					
500	y		MAPLE SHADE, NJ 08052		Phone no. (8!	56) 722-5300					
May	the IF	RS discuss thi	s return with the prenarer shown above? See instructions								

232001 12-13-22

²⁻¹³⁻²² LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **990** (2022)

Pai		721671	Page
	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		Χ
1	Briefly describe the organization's mission:		
	PASSIONATELY COMMITTED TO THE BELIEF THAT EVERY CHILD DESERVE	S TO	
	THRIVE IN A NURTURING, PERMANENT FAMILY, NATIONAL COUNCIL FOR		
	ADOPTION'S MISSION IS TO MEET THE DIVERSE NEEDS OF CHILDREN, I	EXPECTA	NT
	PARENTS, BIRTH PARENTS, ADOPTED INDIVIDUALS, ADOPTIVE FAMILIE	S, AND	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the tota	•	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$155,069. including grants of \$) (Revenue \$)	111.	779.
iu	CONSTITUENT SERVICES - NCFA SERVED OUR 114 MEMBER ADOPTION A		
	AND ATTORNEYS, WITH EDUCATION, NETWORKING, AND ADVOCACY RESOU		
	PARTICIPATED IN MEETINGS WITH CONGRESSIONAL STAFF, FEDERAL GO		
	PERSONNEL, THINK-TANKS, AND INSTITUTIONS OF HIGHER LEARNING.		<u> </u>
	NOTABLY, WE INCREASED OUR ENGAGEMENT WITH PARTNER ORGANIZATIO		н
	100+ MEETINGS WITH OTHER ADOPTION AND CHILD WELFARE-ORIENTED	ND, WII	
	ORGANIZATIONS. NCFA PROVIDES RESOURCES AND SUPPORT TO BIRTH PARTY	ΛΡΕΝΤΟ	
	ADOPTEES, ADOPTIVE PARENTS, AND ALL OTHERS IMPACTED BY ADOPTIC		
	ADOPIEES, ADOPIIVE PARENIS, AND ALL OINERS IMPACIED BI ADOPIIV	JIN •	
4b	(Code:) (Expenses \$174,686. including grants of \$) (Revenue \$)	39,	261.
	EDUCATION AND COMMUNICATION - NCFA OFFERS FREE AND LOW-COST W	EBINARS	тО
	EXPECTANT AND CURRENT ADOPTIVE PARENTS. ADOPTION PROFESSIONAL	S. AND	
	EXPECTANT AND CURRENT ADOPTIVE PARENTS, ADOPTION PROFESSIONAL OTHER INTERESTED PARTIES, TRAINING MORE THAN 3,000 PEOPLE EAC	- ·	
	OTHER INTERESTED PARTIES, TRAINING MORE THAN 3,000 PEOPLE EAC	H YEAR.	
	OTHER INTERESTED PARTIES, TRAINING MORE THAN 3,000 PEOPLE EAC NCFA ALSO CARRIES OUT COMMUNICATIONS CAMPAIGNS TO HELP THE PU	H YEAR. BLIC	
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Form 990 (FOR	ADOPTION
Part IV	Ch	ecklist of Required Schedules		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		v	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		х
~	similar amounts as defined in Rev. Proc. 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	6		х
7	provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i> Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		<u></u>
7	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		- 23
0		8		х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			- 21
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D. Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	F		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
u	Part VI	11a	х	
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 16? If "Yes," complete Schedule D, Part VII	11b		х
с	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		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X_
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		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			77
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			v
00-	complete Schedule G, Part III	19		X X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		х
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232003 12-13-22

Form	990	(2022)
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 Form 990 (2022)
 NATIONAL
 COUNCIL
 FOR
 ADOPTION

 Part IV
 Checklist of Required Schedules (continued)
 (continued)
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 (continued)

22 Dit the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, soumm (N, line 27, III * Yes, * to Part IX, School J, Part J and III 22 X 24 Dit the organization answer **** to Part IX, School A, line 34, et s. \$3,000 compensation of the organization is current and former officers, directors, trusters, key employees, and highest compensated employees? II **ex, * complete Schedule V, Part IX, School A, Dine 34, et al. \$1,000 T / Yes, * canaver line 28 do the organization is current and former officers, directors, trusters, key employees, and highest compensated employees? II **ex, * complete Schedule V, Part IX, Wes, * answer line 28 do through 22 dand complete 240 Did the organization invest may proceeds of tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the lists duy of the organization invest may proceeds of tax-exempt bond sevend a temporary period exception? 246 251 Bector 50(16(2), 50(16(4), empaged in an excess benefit transaction with a disqualified person in a prory ex, and that the transaction with a disqualified person in a prory ex, and that the transaction may and the part II. Yes, * complete Schedule I, Part I 256 X 261 Dit the organization report any amount on Part X, line 5 or 22, for reservables to any ourset 256 X 270 Dit the organization report any amount on Part X, line 5 or 22, for reservables to any ourset 256 X 280 Dist the organization any of these persons? III * Yes, * complete Schedule I, Part II 266				Yes	No
Part X, column (A), line 27, if "Yes," complete Schedule (Parts) and II. 22 X 20 Did the organization answer" visit for Part II. Schedule (Parts) Part II. Schedule (Parts) Part II. Schedule (Parts) 23 X 24a Did the organization answer" visit for Part II. Schedule (Parts) Part II. Schedule (Parts) 23 X 24a Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24a 24a 24b <	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		100	
23 Did the organization arower "Yes" to Fart NL Section A, Ires 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>H</i> "Yes," complete Schedule / <i>H</i> "No," to organization have a taxeouring bond issue with an outstanding principal arower lines 24b through 24d and complete Schedule / <i>H</i> "No," to <i>Ires</i> 230 Z 24a Did the organization instant an escow account other than a returning sector at any time during the year 1 defease 24e Zdp 2 bid the organization and the regard in a necess benefit transaction with a disqualified person during the year? Zdd Zdd 2 bis Section 50(45), 50(16),40,40,40,40,40,40,40,40,40,40,40,40,40,			22		x
and former officers, directors, trustees, key employees, and highest compensated employees? # "Yes," complete 23 X 240 Did the organization have a tax exempt bonds beyond a temporary proof exception? 24a X 241 Did the organization invest any proceeds of tax exempt bonds beyond a temporary proof exception? 24a X 242 Did the organization invest any proceeds of tax exempt bonds beyond a temporary proof exception? 24d X 243 Did the organization invest any necesory account the thran a refution genomy proof exception? 24d X 244 Did the organization invest any necesory account the thran a refution genomy proof exception? 24d X 255 Exception 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization angle in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization is prior year, and that the transaction has not been reported on any of the person? If Yes, "complete Schedule L, Part I 25b X 250 Did the organization organization a prior tay amount on Part X, line 5 or 22, for receivables to any current or former files, circectr, trustee, key employee, creator or founder, substantial contributor, or 35% controlled ently of neurly member of any of these persons? If Yes, "complete Schedule L, Part IV 26b X 260 Did the organization avecase part or thera sastillation contri	23				
Schedule J 23 X 44 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the Schedule K, If No; "go to line 25a. 24a X b Did the organization inwest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 24b c Did the organization mantain an escrew account other than a refunding acrow at any time during the year to delease any tax-exempt bonds? 24d 24d 25 Section 50(2(4), 50(1c(4), 40(1c(4)) organizations. Did the organization engage in an excess benefit transaction with a disqualified perion during the year? 24d 24d 25 Section 50(2(4), 50(1c(4), 40(1c(4)) organizations. Did the organization splot Forms 990 or 990CF2 in "res," complete Schedule L, Part I 25a X 26 Did the organization report any amount on Part X, line 6 or 22, for receivables from or payables to any current or forme officer, directry, truttee, key employee, creator or founder, directry, truttee, key employee, creator or founder, director, truttee, key employee, creator or founder, director, truttee, key employee, creator or founder, director, truttee, key employee, creator or founder, or substantial contributor or any of these parano? If "Yes," complete Schedule L, Part I 26a X 27 Did the organization approve thereof, a grant selection committee mamber, or to a 55% controlled entity or family member of any of these parano? If "Yes," complete Schedule L, Part I 26a X 28 Did the organization neave the mass 25,000 in non-cash cortribut					
24 D bid the organization have a tra-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, flat was situal date December 31, 2002? // *Yes,* answer lines 24b through 24d and compiled Schedule K. If Ybe; 7 to b ine 25a 24a X 2 bid the organization marks an encorve account other than a retunding sectore x1 any time during the year to defease any trace-exempt bonds? 24d 24d 2 bid the organization area tas an "on behal of" issuer for bonds outstanding at any time during the year to defease any trace-exempt bonds? 24d 24d 2 bid the organization area tas an "on behal of" issuer for bonds outstanding at any time during the year? 24d 24d 2 bid the organization area tas an "on behal of" issuer for bonds outstanding at any time during the year? 24d 24d 2 bid the organization area that a engaged in an excess benefit transaction with a disqualified proson in a prior year, and that the transaction has not the reportal of any of these persons? If "Yes," complete Schedule L, Part I 25a X 2 bid the organization provide a grant or other assistance to any current of former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of nounder, substantial contributor, or 35% controlled entity of nounders, and these persons? If "Yes," complete Schedule L, Part II. 26a X 2 Wide the organization neove any dividual descriptions, and exceptions of the methy any individual descriptions, and exception (sinctor, trustee, key emp			23	Х	
is day of the year, that was issued after December 31, 2002? If "Yes," enswer lines 24b through 24d and complete 24a X b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24b c Did the organization mantain an escrow account other than a refurding escrow at any time during the year to detease any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 50(40)(3), 501(44), 4n e50(4)(3) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 24d 25a Did the organization acres that the tangade 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 provide schedule L, Part I 25a 25 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantiatio contributior or 305% controlled entity of namily member of any of these person? If "Yes," complete Schedule L, Part II. 26a X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantiation anthuin or to a 30% controlled entity of one or memory holybes, creator or founder, or substantial contribution? If "Yes," complete Schedule L, Part IV. 26a X 28 Was the organization neave or or morindiviatiant densory dimension or substantial contributio	24a				
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d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c8), 501(c4), 401(c4), 401 6(c1), 401 fb organizations. Did the organization encage in an access benefit transaction with a disqualified person during the year? if 'Yes,' complete Schedule L, Part I 25a b Is the organization aware that It engaged in an excess benefit transaction with a disqualified person tar prior year, and that the transaction are not been reported on any of the organization's prior Forms 800 or 904-227 Yes,' complete Schedule L, Part I 25a X 27 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 27b X 28 Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or agrinal member of any of these persons? If 'Yes,' complete Schedule L, Part IV 28 X 28 Was the organization report bars of mode or difficer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV 28a X 29 Did the organization receive on thick dista adsocribed in line 28a? If 'Yes,' complete Schedule L, Part IV 28a X 29 Did the organization receive on thick dista discribed in	С				
25a Section 501(c)(3), 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 25a Section 501(c)(3), 501(c)(29) organization are excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior Forms 990 or 990-E27 // If 'Yes,' complete Schedule L, Part I 25a X 25b Ub the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with organization approxement or forms of organization approxement or forms of the organization approxement or forms of 900-E27 // If 'Yes,' complete Schedule L, Part II 25b X 27 Did the organization approximation approximation or part or other assistance to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor or a 35% controlled entity of to abusiness transaction with one of the following parties (see the Schedule L, Part II) 26 X 28 Was the organization approximation receive any partitication engraphication receive any complete Schedule L, Part IV 27 28 X 28 A approximation approximation approximation approximation approximation approximation app					
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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-E27 (ff "Yes," complete Schedule L, Part I 259 X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III) 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III) 28 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified on N. Part I 28 X 29 Did the organization neceive contributions of art, historical treasures, or other similar assets, or qualified on N. Part I 20 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified N. Part I 28 X 31 Did	25a				
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Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 9 1b 0 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1a 9 1b 0 1c X	24		33		
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b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O complete Schedule O 38 X 39 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O contains a response or note to any line in this Part V 38 X 9 The Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 9 1b 0 10 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	35a				
within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X 38 Did the organization comduct more than 5% of its activities through an entity that is not a related organization 37 X 38 Did the organization complete Schedule 0 and provide explanations on Schedule 0 for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule 0 complete Schedule 0 38 X Note: All Form 990 filers are required to complete Schedule 0 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance 28 X Check if Schedule 0 contains a response or note to any line in this Part V 1 1 1 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1 1 1 1 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1 1 1 1 1 c Did the organization comply with backup with					
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O Yes No The the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 9 V <			35b		
If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance 38 X Check if Schedule O contains a response or note to any line in this Part V Image: Schedule O for Part V is the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 9 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 Image: Schedule G for Part V is to prize winners? c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Image: Schedule for the form form forms for the form form form form form form form form	36				
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X 9 Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 38 Yes 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 9 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X			36		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O 9art V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a 9 b Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 9 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	37				
Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Image: Im		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 9 Ves b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	38	• • • • • • • • • • • • • • • • • • • •			
Check if Schedule O contains a response or note to any line in this Part V Yes No 1a 9 1a 9 1a 9 1a 1a 9 1a 1a 9 1a 1a 1a 9 1a		Note: All Form 990 filers are required to complete Schedule O	38	Х	
Yes No 1a 9 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	Par				
1a 9 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1a 9 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		Check If Schedule O contains a response or note to any line in this Part V			
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X					
(gambling) winnings to prize winners?					
	С		10	x	
	232004				ı (2022)

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Form	990 (2022) NATIONAL COUNCIL FOR ADOPTION		75-1721	671	Р	_{age} 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
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	10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a			4a		x
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 A	ccour	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		,	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		x
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					
ou	any contributions that were not tax deductible as charitable contributions?			6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contribut					
D.				6b		
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices	provided to the pavor?	7a		х
	······································			7a 7b		- 23
			uirad			
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was to file Form 20202			7-		x
	to file Form 8282?			7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	•			x
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c			7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		
-	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	•				
•				8		
9	Sponsoring organizations maintaining donor advised funds.			•		
				9a		<u> </u>
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	1	1			
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
	Section 501(c)(12) organizations. Enter:	1	1			
	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			<u>13a</u>		
	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 the	ı I	1			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				17
				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t inco	me?	16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					
232005	12-13-22			Form	990	(2022)

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Check if Schedule O contains a response or note to any line in this Part VI

75-1721671 Page 6

X

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 on Schedule O. See instructions.

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	18			
	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 on Schedule 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with ar	ny other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct s	supervision			
				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	•				
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		•			
а	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, trustee, or key employee listed in Part VII, Section A, who cannot be read					
0	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue C	Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
				10b	v	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y before	filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			10-	v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	~	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "}			10-	х	
40	on Schedule O how this was done			12c 13	X	
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			14	X	
1 4 15	Did the organization have a written document retention and destruction policy?			14		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		ependent			
а	The organization's CEO. Executive Director, or top management official			15a	х	
h	Other officers or key employees of the organization			15b		x
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			10.0		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent wit	ha			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, C	O,CT	,DC,FL,IL	, IN,	KS,	ΚY
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, ar					
	for public inspection. Indicate how you made these available. Check all that apply.			• •		
	X Own website Another's website Upon request Other (explain	n on Sch	edule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	financ	cial	
	statements available to the public during the tax year.		-			
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and	records			
	THE ORGANIZATION - (703)299-6633					
	431 N. LEE STREET, ALEXANDRIA, VA 22314					
232006	12-13-22 SEE SCHEDULE O FOR FULL LIST OF STATES			Form	990	(2022)
	6					

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

____ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)		(C)		(D)	(E)	(F)			
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box, unless pe		ss per	s person is both an d a director/trustee)			compensation	compensation	amount of
	week		cer an	dad	irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ual tr	tional		yolqr	t con	_	1099-NEC)		organizations
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) RYAN HANLON	40.00	_	_							
PRESIDENT AND CEO		1				X		137,784.	Ο.	28,535.
(2) ANDREA T. VAVONESE	2.00									
CHAIR-ELECT		X		Х				0.	Ο.	0.
(3) MICHELE JACKSON	2.00									
BOARD MEMBER		х						0.	Ο.	0.
(4) DANA JOHNSON	2.00									
BOARD MEMBER		Х						0.	0.	0.
(5) HEIDI BRUEGEL COX	2.00									
IMMEDIATE PAST CHAIR		Х						0.	0.	0.
(6) JANE CASTANIAS	2.00									
VICE-PRESIDENT		Х		Х				0.	0.	0.
(7) JOSEPH FIRSCHEIN	2.00									
BOARD MEMBER		Х						0.	0.	0.
(8) KYLE CLARK	2.00									
TREASURER		Х		Х				0.	0.	0.
(9) LISA SINCLAIR	2.00									
VICE-PRESIDENT		Х		Х				0.	0.	0.
(10) MIKE THORNE	2.00									
CHAIRMAN		Х		Х				0.	0.	0.
(11) PAMELA STEVENSON	2.00									
BOARD MEMBER		Х						0.	0.	0.
(12) ASHLEY WILSON	2.00									
BOARD MEMBER		Х						0.	0.	0.
(13) REBECCA SPICER	2.00									
BOARD MEMBER		Х						0.	0.	0.
(14) STEVEN A. SUNDAY	2.00									
BOARD MEMBER		Х						0.	0.	0.
(15) WILLIAM P. ROSEN, ESQ.	2.00									
BOARD MEMBER		Х						0.	0.	0.
(16) KATE TRAMBITSKAYA	2.00									
SECRETARY		Х		Х				0.	0.	0.
(17) ERIC CURTIS	2.00									
BOARD MEMBER		Х						0.	0.	0.
222007 12-13-22										Form 990 (2022)

232007 12-13-22

Form 990 (2022)

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Form 990 (2022	1 3 / 11									210	571	Page 8	
Part VII Sec	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)									s (continued)			
(A) Name and title		(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than o s both	an	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estima amour othe compens	ated at of er
		hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	(W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)		from organiz and rel organiza	the ation ated
(18) EVAMARI	E PISANI	2.00											
BOARD MEMBER			Х						0.		0.		0.
(19) BETH RU BOARD MEMBER	2.00	x						0.		0.		0.	
									120 004		_		
	n continuation sheets to Part VI d lines 1b and 1c)	, Section A							137,784. 0. 137,784.		0. 0. 0.		535. 0. 535.
2 Total num	nber of individuals (including but na ation from the organization								eceived more than \$100,	000 of reportable			1
	rganization list any former officer, [•] "Yes," complete Schedule J for si	-		-	•	•		Ŭ	hest compensated emp	2		Yes 3	s No X
4 For any in and relate	ndividual listed on line 1a, is the su ed organizations greater than \$150	m of reportable ,000? If "Yes,	e co " co	mpe mple	ensat ete S	tion Sche	and edule	oth J f	er compensation from t	he organization		4 X	
	erson listed on line 1a receive or a to the organization? <i>If</i> "Yes," com											5	x
	lependent Contractors			01 00	υπĻ	2010	011 .						
•	this table for your five highest con ization. Report compensation for t	•	•						the organization's tax y	•	ensat		
	(A) Name and business	address	NC	ONE	2			_	(B) Description of s	ervices	С	(C) ompensat	ion
								_					
2 Total num	ber of independent contractors (ir		nt lin	aitod		thee		tod	above) who received me	ore than			
	of compensation from the organiz	•), III I	meo	101	()	ieu	above, who received mit			- 000	

Form **990** (2022)

232008 12-13-22

Form					JNCIL FOR	ADOPTION		75-1721	671 Page 9
Pa	rt V	111	Statement of Rev	venue					
			Check if Schedule O c	contains a respon	se or note to any lir			(2)	
						(A)	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
						Total revenue	function revenue	business revenue	from tax under
									sections 512 - 514
ts ts	1	аF	Federated campaigns	1a					
ran		b	Membership dues	1b	111,779.				
G U		сF	Fundraising events	1c					
ifts ar A		d F	Related organizations	1d					
s, G nils			Government grants (contri			1			
Sii			All other contributions, gifts,						
buti			similar amounts not included	-	603,033.				
Contributions, Gifts, Grants and Other Similar Amounts			Noncash contributions included in I						
Cor		-	Total. Add lines 1a-1f			714,812.			
					Business Code				
ð	2	a (CONFERENCE IN	COME	611710	201,705.	201,705.		
vic	-		TRAINING REVE		611710	22,708.			
Ser			CONSULTING IN		611710	17,553.	17,553.		
žer Ver		d _							
Program Service Revenue		u e				1			
Pro		-	All other program service r		_				
_			Total. Add lines 2a-2f			241,966.			
	3		Investment income (includ						
I	5		•			19,553.			19,553.
	4		Income from investment o			1373331			
	5		Royalties		•				
	5	ſ		(i) Real	(ii) Personal				
	6	_ (Crace rente		(ii) i cisonai	1			
		6 a Gross rents 6a b Less: rental expenses 6b				-			
					-				
			Net rental income or (loss) Gross amount from sales of	(i) Securitie	es (ii) Other				
	'			7a 392,000		-			
			assets other than inventory	7a552,000	J•	-			
Ø			Less: cost or other basis	7ь411,663	2				
evenue			and sales expenses	7c - 19,65		-			
eve			Gain or (loss)			_19 657	-19,657.		
Other Ro			Net gain or (loss)			-19,057.	-19,057.		
the	8		Gross income from fundraisir including \$						
0				of					
			contributions reported on		0-				
			Part IV, line 18		8a 8b				
			Less: direct expenses						
			Net income or (loss) from t	- 1	s				
	9		Gross income from gaming	-	0-				
			Part IV, line 19		<u>9a</u>				
			Less: direct expenses		9b				
			Net income or (loss) from ([
	10		Gross sales of inventory, le		10-				
			and allowances		10a				
			Less: cost of goods sold		10b				
		0	Net income or (loss) from s	sales of inventory					
S					Business Code				
eor	11								
lan		b_							
Sev		с _							
Miscellaneous Revenue			All other revenue						
_			Total. Add lines 11a-11d				000 000		10 550
	12	1	Total revenue. See instructio	ons		956,674.	222,309.	0.	19,553.
23200	9 12-	13-22	2						Form 990 (2022)

9

NATIONAL COUNCIL FOR ADOPTION Part IX Statement of Functional Expenses

Do r	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
'n,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	400 000	210 641	F A 210	40 110
7	Other salaries and wages	427,077.	312,641.	74,318.	40,118
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	00 100	C1 0 C -		E 000
9	Other employee benefits	83,420.	61,067.	14,517.	7,836
0	Payroll taxes				
1	Fees for services (nonemployees):				
а	Management				
b	Legal	40.055		40.055	
С	Accounting	48,855.		48,855.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	00.050		01 000	
	column (A), amount, list line 11g expenses on Sch 0.)	98,253.	76,845.	21,309.	99
2	Advertising and promotion	11,276.	11,276.		
3	Office expenses				
4	Information technology				
5	Royalties				
6	Occupancy	7,650.	01 500	7,650.	
7	Travel	30,103.	21,522.	8,576.	5
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	110 100	112 000	2 2 7 2	
9	Conferences, conventions, and meetings	117,163.	113,790.	3,373.	
0	Interest				
1	Payments to affiliates	A A A A A A A A A A A A A A A A A A A		A A A A A A A A A A A A A A A A A A A	
2	Depreciation, depletion, and amortization	44,491. 12,817.		44,491.	
3		12,01/.		12,817.	
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	160 051		160 051	
a	INCOME TAXES	169,851.	22 020	169,851.	
b	INDEPENDENT CONTRACTOR	32,704.	32,039.	11 044	665
С	BANK FEES	15,601.	4,357.	11,244.	
d	DUES AND SUBSCRIPTIONS	12,742.	2,691.	10,051.	01 500
	All other expenses	54,516.	165,669.	-132,691.	21,538
5	Total functional expenses. Add lines 1 through 24e	1,166,519.	801,897.	294,361.	70,261
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

10

09250915 799581 12012.00

33

Total liabilities and net assets/fund balances

2,504,494.

33

		Check if Schedule O contains a response or note	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		527,949.	1	310,764.
	2	Savings and temporary cash investments	181,893.	2	217,660.	
Assets	3	Pledges and grants receivable, net		49,500.	3	18,668.
	4	Accounts receivable, net	1,697.	4	2,000.	
	5	Loans and other receivables from any current or				
		trustee, key employee, creator or founder, substa	antial contributor, or 35%			
		controlled entity or family member of any of these		5		
	6	Loans and other receivables from other disqualifi	ed persons (as defined			
		under section 4958(f)(1)), and persons described	in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9			25,647.	9	47,656.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	<u>10a</u> <u>1,365,957</u> .	1 100 000		1 1 1 5 2 4 0
	b	Less: accumulated depreciation		1,189,839.	10c	1,145,348.
	11	Investments - publicly traded securities		527,969.	11	525,398.
	12	Investments - other securities. See Part IV, line 1	Г		12	
	13	Investments - program-related. See Part IV, line 1	E CONTRACTOR OF CO		13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		2,504,494.	15	2,267,494.
	16	Total assets. Add lines 1 through 15 (must equa		136,071.	16	69,566.
	17	Accounts payable and accrued expenses	130,071.	17	09,000.	
	18 19	Grants payable		240,194.	18 19	279,364.
	20	Deferred revenue		240,1940	20	275,504.
	20	Tax-exempt bond liabilities Escrow or custodial account liability. Complete P	Part IV of Schodulo D		20	
	22	Loans and other payables to any current or forme			21	
Liabilities	~~	trustee, key employee, creator or founder, substa				
bili		controlled entity or family member of any of these			22	
Lia	23	Secured mortgages and notes payable to unrelat			23	
	24	Unsecured notes and loans payable to unrelated	· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pay	Г			
		parties, and other liabilities not included on lines				
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		376,265.	26	348,930.
		Organizations that follow FASB ASC 958, chec	k here X			
ces		and complete lines 27, 28, 32, and 33.				
aŭ	27	Net assets without donor restrictions		2,009,031.	27	1,724,683.
Ba	28	Net assets with donor restrictions		119,198.	28	193,881.
pun		Organizations that do not follow FASB ASC 95	i8, check here			
Net Assets or Fund Balances		and complete lines 29 through 33.				
tso	29	Capital stock or trust principal, or current funds			29	
sse	30	Paid-in or capital surplus, or land, building, or equ			30	
ît A:	31	Retained earnings, endowment, accumulated inc	· · · · · · · · · · · · · · · · · · ·	0 100 000	31	
Re	32	Total net assets or fund balances	2,128,229.	32	1,918,564.	

Part X Balance Sheet

2,267,494. Form **990** (2022)

Part XI Reconciliation of Net Assets Check if Schedule Q contains a response or note to any line in this Part XI X 1 Total expenses (must equal Part IX, column (A), line 25) 1 1.166,519. 2 1.166,519. 2 1.166,519. 3 Revenue less expenses. Subtract line 2 from line 1 3 -209,845. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2,128,229. 5 Net unrealized gains (losses) on investments 6 1.422,346. 7 -4,052. 8 7 -4,052. 8 Prior period adjustments 9 -142,346. 1 1,918,564. 9 Other changes in net assets or fund balances (explain on Schedule O) 8 7 -4,052. 9 Other changes in net assets or fund balances (explain on Schedule O) 1 1,918,564. Part XII Financial Statements and Reporting 1 1,918,564. Part XII Check if Schedule O contains a response or note to any line in this Part XII 1 1,918,564. 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 1<		1990 (2022) NATIONAL COUNCIL FOR ADOPTION	75-	1721671	Pag	_{ge} 12
1 Total revenue (must equal Part VIII, column (A), line 12) 1 956, 674. 2 Total expenses (must equal Part IX, column (A), line 12) 2 1, 166, 519. 2 Total expenses (must equal Part IX, column (A), line 1 3 -209, 845. 3 -209, 845. 3 -209, 845. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2, 128, 229. 5 Net unrealized gains (losses) on investments 6 142, 346. 6 0.0142, 346. 7 -4, 0552. 8 Prior period adjustments 9 -142, 346. 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142, 346. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1, 918, 564. Peart XII Financial Statements and Reporting	Pa	rt XI Reconciliation of Net Assets				
2 Total expenses (must equal Part IX, column (A), line 25) 2 1,166,519. 3 Revenue less expenses. Subtract line 2 from line 1 3 -209,845. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2,128,229. 5 Net unrealized gains (losses) on investments 6 142,346. 6 Investment expenses 7 -4,052. 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142,346. 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142,346. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, colurnn (B)) 1 1,918,564. Part XII Financial Statements and Reporting		Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			X
2 Total expenses (must equal Part IX, column (A), line 25) 2 1,166,519. 3 Revenue less expenses. Subtract line 2 from line 1 3 -209,845. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2,128,229. 5 Net unrealized gains (losses) on investments 6 142,346. 6 Investment expenses 7 -4,052. 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142,346. 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142,346. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, colurnn (B)) 1 1,918,564. Part XII Financial Statements and Reporting						
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4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2,128,229. 5 Net unrealized gains (losses) on investments 5 4,2322. 6 Donated services and use of facilities 6 142,346. 7 -4,052. 8 Prior period adjustments 9 -142,346. 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142,346. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B) 10 1,918,564. Part XII Financial Statements and Reporting 10 1,918,564. Check if Schedule O contains a response or note to any line in this Part XII Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X If "Yes, 'check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a X If "Yes, 'check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes, 'check a box below to indicate whether the financial statements for the year were audited on a	2	Total expenses (must equal Part IX, column (A), line 25)		<u> </u>		
5 Net unrealized gains (losses) on investments 6 142,346. 7 investment expenses 8 7 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142,346. 10 Net assets or fund balances (explain on Schedule O) 9 -142,346. 10 1,918,564. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: 1 Cash X Accrual Other If the organization is financial statements compiled or reviewed by an independent accountant? 16 Yes, "check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis, consolidated basis, or both: X Separate basis Consolidated basis Donolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis b Were the organization is financial statements and selection of an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis D Were the organization statements and selection of an i	3	· · · · · · · · · · · · · · · · · · ·	3			
6 Donated services and use of facilities 7 Investment expenses 8 7 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Other changes in net assets or fund balances (explain on Schedule O) 9 0 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (E)) 10 1,918,564. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XI 1 Accounting method used to prepare the Form 990: 1 Accounting method used to prepare the Form 990: 2a Were the organization s' financial statements compiled or reviewed by an independent accountant? 1 Mere the organization's financial statements compiled or reviewed by an independent accountant? 1 M'res, 'check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. b Were the organization's financial statements and teppendent accountant? 1 M'res,'' check a box below to indicate whether the financial statements for the year were audited on a separate basis. consolidated basis, or both: 2b 1 Separate basis 1 Consolidated basis 1 M'res,'' check a box below to indicate whether the financial statements for the year were audited on a separate basis. consolidated basis, or both: 2b 1 M'res,'' check a box below to indicate whether the financial statements accountant? </th <td>4</td> <td></td> <td></td> <td></td> <td><u> </u></td> <td></td>	4				<u> </u>	
7 Investment expenses 7 -4,052. 8 Prior period adjustments 9 -142,346. 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142,346. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,918,564. Part XII Financial Statements and Reporting 10 1,918,564. Check if Schedule O contains a response or note to any line in this Part XII 1 Yes 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. 2a X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," the che a paization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its	5		5			
8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 -142,346. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 1,918,564. Part XII Financial Statements and Reporting 10 1,918,564. Check if Schedule O contains a response or note to any line in this Part XII 1 Yes 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization's financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis Consolidated basis Both consolidated and separate basis 2b X b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether t	6	Donated services and use of facilities			<u> </u>	
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10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 1,918,564. Part XII Financial Statements and Reporting	8		8			
column (B) 10 1,918,564. Part XII Financial Statements and Reporting	9	Other changes in net assets or fund balances (explain on Schedule O)	9	-142	2,3	<u>46.</u>
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Image: Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled on a separate basis 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X 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 process during the tax year, explain on Schedule O. 2a X 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
Check if Schedule O contains a response or note to any line in this Part XII Yes 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," explain on Schedule O. 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X 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 on Schedule O. 3a As a result	_	column (B))	10	1,918	8,5	64.
Yes No 1 Accounting method used to prepare the Form 990: Cash X If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," the in a consolidated basis Both consolidated and separate basis 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 changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the	Pa	rt XII Financial Statements and Reporting				
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If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a X Separate basis Consolidated basis Both consolidated and separate basis 2b X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis 2b X Separate basis Consolidated basis Both consolidated and separate basis 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X 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 on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 3a					Yes	No
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2b X Separate basis Consolidated basis Both consolidated and separate basis 2b X b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X 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 on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Image: Consolidated basis		If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
separate basis, consolidated basis, or both: Separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 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 on Schedule O and describe any steps taken to undergo such audits	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
 Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Image: Consolidated basis		separate basis, consolidated basis, or both:				
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Image: Consolidated basis Image:		Separate basis Consolidated basis Both consolidated and separate basis				
consolidated basis, or both: Image: Consolidated basis Both consolidated and separate basis Image: Consolidated basis Both consolidated and separate basis 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? Image: Consolidated basis	b	Were the organization's financial statements audited by an independent accountant?		2b	X	
X Separate basis Consolidated basis Both consolidated and separate basis Image: Consolidated basis Consolidated basis Consolidated and separate basis Consolidated basis		If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
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 on Schedule O. 2c X 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 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 on Schedule O and describe any steps taken to undergo such audits 3b 3b		consolidated basis, or both:				
review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 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 on Schedule O and describe any steps taken to undergo such audits 3b		X Separate basis Consolidated basis Both consolidated and separate basis				
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 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 on Schedule O and describe any steps taken to undergo such audits 3b	С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the 3a X Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 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 on Schedule O and describe any steps taken to undergo such audits 3b		review, or compilation of its financial statements and selection of an independent accountant?		2c		X
Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 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 on Schedule O and describe any steps taken to undergo such audits 3a X		If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
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 on Schedule O and describe any steps taken to undergo such audits	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
or audits, explain why on Schedule O and describe any steps taken to undergo such audits						X
	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit	t		1
		or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization

Name	lame of the organization Employer identification number								
				IL FOR ADOPT					5-1721671
Par	tl	Reason for Public C	Charity Status.	All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The o	rgani	zation is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of chu	urches, or associatio	n of churches described	in sectio	n 170(b)(1)(A)(i).		
2		A school described in secti	ion 170(b)(1)(A)(ii). (/	Attach Schedule E (Forn	ו 990).)				
3 [A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).		
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 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 gov	vernment or governm	ental unit described in	section 17	70(b)(1)(A)	(v).		
7 [An organization that normal	lly receives a substar	ntial part of its support fi	om a gove	ernmental u	unit or from th	ne general p	public described in
-		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)				
9 [An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	nction with a	land-grant	college
		or university or a non-land-g	grant college of agricu	ulture (see instructions).	Enter the	name, city,	and state of	the college	or
		university:							
10 [Х	An organization that normal	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	is, membersh	ip fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support fi	rom gross investment
		income and unrelated busir		(less section 511 tax) fro	m busines	ses acquir	ed by the org	anization a	fter June 30, 1975.
г		See section 509(a)(2). (Cor	-						
11 [An organization organized a	-	•	•				
12 [An organization organized a	-	-	-			•	
		more publicly supported org	-						Check the box on
		lines 12a through 12d that o						-	
а		Type I. A supporting orga		-	• • • •	-			
		the supported organizatio			majority c	of the direc	tors or trustee	es of the su	ipporting
		organization. You must c	-					- (-)	·
b		Type II. A supporting orga	-				-		-
		control or management o			ame perso	ns that cor	ntrol or manag	ge the supp	orted
-		organization(s). You mus	-			ion with a	nd functional	lu integrato	d with
С		Type III functionally inter						ly integrate	a with,
4		its supported organization		-				tod organi-	ration(a)
d		J Type III non-functionally						-	
		that is not functionally inter- requirement (see instructi			•			anallenin	eness
•		Check this box if the orga	,	•					
е		functionally integrated, or					турет, туре	n, rype m	
f	Ente	er the number of supported of			ig organiz	ation.			
		ride the following information	•	d organization(s)					
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)
_									
Total									

Schedule A	(Form	990	2022
		330	1 2022

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support		-	1	-	-	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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 \dots						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,		,			12	
13	First 5 years. If the Form 990 is for the						
-	organization, check this box and stop	<u>o here</u>					
	ction C. Computation of Publi		-			1 1	
	Public support percentage for 2022 (I					14	%
	Public support percentage from 2021					15	%
16a	33 1/3% support test - 2022. If the o				14 is 33 1/3% or n	nore, check this bo	ix and
_	stop here. The organization qualifies		•				
k	33 1/3% support test - 2021. If the o				d line 15 is 33 1/39	6 or more, check th	
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			-	-	t VI how the organi	zation
	meets the facts-and-circumstances te	-		• • • •	•	17. and line 17 is	
Ľ	10% -facts-and-circumstances test					-	10% Or
	more, and if the organization meets the						
10	organization meets the facts-and-circle		•				······
10	Private foundation. If the organization	T UIU HOL CHECK a		a, 100, 17a, 01 17			<u>s</u> (Form 990) 2022

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1087116.	775,137.	704,447.	762,213.	714,812.	4043725.
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	229,229.	256,292.	101,107.	136,535.	223,438.	946,601.
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	1316345.	1031429.	805,554.	898,748.	938,250.	4990326.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0.
c	Add lines 7a and 7b						0.
8	Public support. (Subtract line 7c from line 6.)						4990326.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	1316345.	1031429.	805,554.	898,748.	938,250.	4990326.
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources	146,215.	147,073.	149,282.	40,679.	19,553.	502,802.
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	146,215.	147,073.	149,282.	40,679.	19,553.	502,802.
	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on				506,407.		506,407.
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)	63,222.	65,223.	55,156.	32,854.	17,553.	234,008.
13	Total support. (Add lines 9, 10c, 11, and 12.)	1525782.	1243725.	1009992.	1478688.	975,356.	6233543.
	First 5 years. If the Form 990 is for th	ne organization's fir	st. second. third. 1	ourth. or fifth tax v	ear as a section 5		n.
	check this box and stop here			, ,		()()	
Se	ction C. Computation of Publi						
15	Public support percentage for 2022 (I	ine 8. column (f). d	ivided by line 13. c	olumn (f))		15	80.06 %
	Public support percentage from 2021					16	82.18 %
	ction D. Computation of Inves					•	
	Investment income percentage for 20			ne 13, column (f))		17	8.07 %
	Investment income percentage from					18	8.13 %
	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						X
٢	33 1/3% support tests - 2021. If the	-	-				
~	line 18 is not more than 33 1/3%, che	•					
20	Private foundation. If the organization			•		•	
	23 12-09-22			,, enoon in			(Form 990) 2022

15

1

2

3a

3b

3c

4a

4b

4c

5a

Yes No

Part IV Supporting Organizations

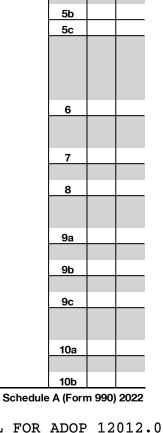
(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** 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.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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232024 12-09-22



Schedule A (Form 990) 2022 NATIONAL COUNCIL FOR ADOPTION

2

Га	Supporting Organizations (continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
	11c below, the governing body of a supported organization? 11a		
b	A family member of a person described on line 11a above? 11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
	detail in Part VI. 11c		
Sec	tion B. Type I Supporting Organizations		
		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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. Section C. Type II Supporting Organizations

 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 or management of the supporting organization was vested in the same persons that controlled or managed
 Image: Control organization was vested in the same persons that controlled or managed

 1
 Image: Control organization was vested in the same persons that controlled or managed
 Image: Control organization was vested in the same persons that controlled or managed

Section D. All T	ype III Suppor	ting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, 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			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the orga	anization used to satisfy t	the Integral Part Test during	the year (see instructions).
•	Onech the box heat to the method that the orge		the integral i are rescuuning	

a 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 bel	low.
---	--	------------------	---------------	----------------	-----------	----------------	---------------------	------

С		The organization supported a	a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instructions	s).
---	--	------------------------------	------------------------	-------------------------	-----------------	---------------------	-------------------	-----

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- 2 Activities Test. Answer lines 2a and 2b below.
- 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, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more 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 activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a 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? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

 Yes
 No

 2a

 2a

 2b

 2b

 3a

 3b

232025 12-09-22

Schedule A	(Form 990) 2022	NAT	TIONAL	COUNCIL	FOR	ADOPTIC	ON
Part V	Type II	l Non-F	unctionally	/ Integrat	ed 509(a)(3)	Suppo	orting Orga	nizations

1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970(<i>explain in</i> I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complete	e Sections A through E.	
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
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		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990) 2022

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		CIL FOR ADOPTIC			5-1721671 Page 7
Par		a)(s) Supporting Orga	nizations (continu	ied)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer			1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
_4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive		-	
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	[10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ıs	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022		AL COUNCI			75-1721671 Page 8
Part VI	line 1; Part IV, Section A, Iir	ies 1, 2, 3b, 3c, 4b, n D, lines 2 and 3;	4c, 5a, 6, 9a, 9b Part IV, Section E	, 9c, 11a, 11 , lines 1c, 2a	b, and 11c; Part IV a, 2b, 3a, and 3b; P	Part II, line 17a or 17b; Part III, line 12; , Section B, lines 1 and 2; Part IV, Section C, art V, line 1; Part V, Section B, line 1e; Part V, art for any additional information.
232028 12-09-2	2			20		Schedule A (Form 990) 2022

SCHEDULE C	Po	litical Campaign a	nd Lobbying	g Activities		OMB No. 1545-0047		
(Form 990)	2022							
	27 0-E 7	. Open to Public						
Department of the Treasury Internal Revenue Service								
If the organization answ	wered "Yes," on	Form 990, Part IV, line 3, or For	m 990-EZ, Part V, line	e 46 (Political Cam	baign Ac	tivities), then		
		plete Parts I-A and B. Do not com	•					
		1(c)(3)) organizations: Complete P	arts I-A and C below. I	Do not complete Pa	t I-B.			
 Section 527 organiza 	•							
-		Form 990, Part IV, line 4, or For						
		nave filed Form 5768 (election und		•	•			
	•	nave NOT filed Form 5768 (election		, ,		•		
Tax) (See separate inst		Form 990, Part IV, line 5 (Proxy	Tax) (See separate in	istructions) or Forn	n 990-EZ	, Part V, line 35c (Proxy		
		ions: Complete Part III.						
Name of organization	, or (o) organizat				Employ	ver identification number		
0	NATIONA	L COUNCIL FOR ADO	PTION			75-1721671		
Part I-A Comple		anization is exempt under		r is a section 5	27 orga			
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities in	Part IV.				
2 Political campaign					\$			
3 Volunteer hours for	political campai							
		-						
Part I-B Comple	ete if the org	anization is exempt under	r section 501(c)(3).				
1 Enter the amount o	f any excise tax	incurred by the organization unde	r section 4955		\$ _			
		incurred by organization managers						
3 If the organization i	ncurred a section	n 4955 tax, did it file Form 4720 fo	or this year?			Yes No		
4a Was a correction m						Yes No		
b If "Yes," describe in		anization is exempt under	reaction E01(a)	woont contion	501/2)/	2)		
-		•		-	. , .	<i>.</i>		
		by the filing organization for sect			\$ _			
		ization's funds contributed to othe	C C		•			
exempt function ac		. Add lines 1 and 2. Enter here and			···· 🏼 🏲 🗕			
	-				¢			
		1120-POL for this year?				Yes No		
00		ployer identification number (EIN)	of all section 527 polit					
		tion listed, enter the amount paid		•				
		omptly and directly delivered to a s						
political action com	mittee (PAC). If a	additional space is needed, provid	e information in Part IV	V.	•			
(a) Name	9	(b) Address	(c) EIN	(d) Amount paid	from	(e) Amount of political		
				filing organization	on's o	contributions received and		
				funds. If none, en	ter -0	promptly and directly delivered to a separate		
						political organization.		
						If none, enter -0		
For Doporturaria Destruction	ion Act Nation	soo the Instructions for Form 00	 0 or 990 E7	1		hadula C (Earm 990) 2022		

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

Schedule C (Form 990) 2022

232041 11-08-22

Schedule C (Form 990) 2022 Part II-A Complete if the org	NATION Ianizatio	IAL CO	UNCIL FOR AI	DOPTION 501(c)(3) and file	75-1 d Form 5768 (ele	721671 Page 2
section 501(h)).	Jannzatio					
A Check if the filing organiza	ation belong	s to an affil	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and sha	re of excess	s lobbying e	expenditures).			
B Check if the filing organiza	ation checke	ed box A ar	nd "limited control" pro	visions apply.		
	its on Lobb ditures" me		nditures nts paid or incurred.)		(a) Filing organization's	(b) Affiliated group totals
					totals	
1a Total lobbying expenditures to influence	uence publi	c opinion (g	grassroots lobbying)		4,303.	
b Total lobbying expenditures to influence						
c Total lobbying expenditures (add li	nes 1a and	1b)			4,303. 939,940.	
d Other exempt purpose expenditure	es				939,940.	
e Total exempt purpose expenditure	es (add lines	1c and 1d			944,243.	
f Lobbying nontaxable amount. Ente	er the amou	int from the	following table in both	n columns.	166,636.	
If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of t	the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	,000,000	\$225,00	0 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,0	000.			
g Grassroots nontaxable amount (en	nter 25% of	line 1f)			41,659.	
h Subtract line 1g from line 1a. If zer	o or less, e	nter -0			0.	
i Subtract line 1f from line 1c. If zero	o or less, er	ter -0			0.	
j If there is an amount other than ze	ro on eithei	line 1h or l	ine 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year?	<u></u>				Yes No
(Some organizations t	hat made a	section 50	raging Period Under D1(h) election do not l ate instructions for lin	nave to complete all o	f the five columns be	low.
	Lobb	ying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	186	5,930.	44,060.	119,771.	166,636.	517,397.
b Lobbying ceiling amount (150% of line 2a, column(e))						776,096.
c Total lobbying expenditures	9	,364.	2,396.	5,117.	4,303.	21,180.
d Grassroots nontaxable amount	Δ <i>β</i>	5,733.	36,866.	29,943.	41,659.	155,201.
e Grassroots ceiling amount		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	50,000.	2,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	±1,009•	100,2010
e Grassroots ceiling amount (150% of line 2d, column (e))						232,802.
f Grassroots lobbying expenditures		,364.	2,396.	5,117.	4,303.	21,180.

Schedule C (Form 990) 2022

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

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(t)
	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
е	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?				
g	Grants to other organizations for lobbying purposes?				
i	Other activities? Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5)	, or sec		
1	Were substantially all (90% or more) dues received nondeductible by members?			Yes	No
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	e prior year?	3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."		•		3, is
1	Dues, assessments and similar amounts from members		. 1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).				
	Current year Carryover from last year				
С	Total		2c		
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po expenditures next year?	olitical			
5 Par	Taxable amount of lobbying and political expenditures. See instructions t IV Supplemental Information		. 5		
Provi	de the descriptions required for Part I.A. line 1: Part I.B. line 4: Part I.C. line 5: Part II.A (affiliated group	list)· Part II.A	lines 1 a	nd 2 (See	

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

Schedule C (Form 990) 2022

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SCHEDULE D	

Name of the organization

(Form	990)
-------	------

Supplemental Financial Statements

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

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



Employer identification number 75-1721671

Department of the Treasury Internal Revenue Service

NATIONAL COUNCIL FOR ADOPTION

Par			or Accou	Ints. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		(1) =	
		(a) Donor advised funds	(b) Fu	inds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	-		
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	ised only	
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose c	onferring	
Dev				
Par			art IV, line	7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recrea			y important land area
	Protection of natural habitat	Preservation of a	a certified h	nistoric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	of a conserv	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		<u>2</u> a	
b	Total acreage restricted by conservation easements		<u>2b</u>	
	Number of conservation easements on a certified historic stru-		<u>2c</u>	
d	Number of conservation easements included in (c) acquired a			
	historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	organizatior	n during the tax
	year			
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the per			
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation eas	sements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservati	on easeme	nts during the year
8	Does each conservation easement reported on line 2(d) abov			
-				
9	In Part XIII, describe how the organization reports conservation	-		
	balance sheet, and include, if applicable, the text of the footr	iote to the organization's financial statemer	nts that des	scribes the
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or Oth	ner Simila	ar Assets
I UI	Complete if the organization answered "Yes" on Form			
10			d balance (aboat worka
Id	If the organization elected, as permitted under FASB ASC 95 of art, historical treasures, or other similar assets held for put	· ·		
				public
h	service, provide in Part XIII the text of the footnote to its finar			tworks of
b	If the organization elected, as permitted under FASB ASC 95 art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items:	exhibition, education, or research in furthe	erance of pr	ublic service,
				¢
	(i) Revenue included on Form 990, Part VIII, line 1			
0		agurag, ar othar similar agosta far financial		
2	If the organization received or held works of art, historical tree the following amounts required to be reported under EASE A		yanı, provic	
-	the following amounts required to be reported under FASB A	-		¢
a b	Revenue included on Form 990, Part VIII, line 1			\$ ¢
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2022
232051	09-01-22	31		

Sche		L COUNCIL I						75-17			age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	easures, or	[·] Other	⁻ Simila	r Assets	contin	ued)	
3	Using the organization's acquisition, accession	on, and other record	ls, check	any of the	following that	make si	gnificant ι	use of its			
	collection items (check all that apply):										
а	Public exhibition	c	з <u>—</u> г	oan or exc	hange progra	ım					
b	Scholarly research	e	• 🗌 (Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ellections and explain	n how the	ey further th	ne organizatio	n's exen	npt purpos	se in Part	XIII.		
5	During the year, did the organization solicit of	r receive donations	of art, his	torical treas	sures, or othe	r similar	assets		_		_
_	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arrang		ete if the	organizatic	on answered "	Yes" on	Form 990	, Part IV,	ine 9, or		
	reported an amount on Form 990, Par										
1 a	Is the organization an agent, trustee, custodia							_	_		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing ta	ıble:							
									Amount		
С	Beginning balance										
d	Additions during the year										
е	Distributions during the year										
f	Ending balance						1f		7		1
	Did the organization include an amount on Fo						ty?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII. rt V Endowment Funds. Complete i										
I ai	rt V Endowment Funds. Complete i	(a) Current year		rior year	(c) Two year		0. (d) Three y	ware back	(e) Four	Veare	hack
4.		(a) Current year		ioi yeai		5 Daux	(u) mee y	Cars Dack	(e) i oui	years	Dack
1a	Beginning of year balance										
D	Contributions										
C	Net investment earnings, gains, and losses										
a	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
т	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	•		, column (a)) neid as:						
a L	Board designated or quasi-endowment		%								
u o	Permanent endowment	% %									
C	Term endowment The percentages on lines 2a, 2b, and 2c show										
20		· · · · ·	ation that	are held a	ad administor	od for th	0				
Ja	Are there endowment funds not in the posses organization by:	ssion of the organiza	ation that	are neiu ai			e		ſ	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
h	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the								0.0		
Par	rt VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990	D, Part IV,	line 11a. S	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o basis (investr	other	(b) Cost	t or other (other)	(c) A	ccumulate preciation	ed	(d) Bool	< value	ə
	Land	· · · · ·	nenty		0,906.	uep	- COALION		601),90	06
-	Land				3,938.		17,49	35		5,44	
b	Buildings			40	• • • • • • •		т, 4 .	· · · ·	-10	, 44	тJ.
-	Leasehold improvements			1	5,128.		4,1	15	1 ·	L,01	1 २
d	Equipment				5,985.	1	<u>4,1</u> 198,99			5,98	
	Other		N !		, ,				1,14!		
Tota	I. Add lines 1a through 1e. <i>(Column (d) must</i> e	<u>qual Form 990, Part</u>	х, columi	п (В), line 1	UC.)				<u>-, -</u> -,	, , , ,	± U •

Schedule D (Form 990) 2022

	Investments - Other Securities. Complete if the organization answered "Yes"			
(a) Descrip	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
 Financia 	al derivatives			
2) Closely	held equity interests			
3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	h) must aqual Form 000 Dart V asl (D) line 10)			
Part VIII	b) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related.			
	Complete if the organization answered "Yes"	on Form 990 Part IV line	11c. See Form 990. Part X line 13	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)		. ,		,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Part IX	Other Assets. Complete if the organization answered "Yes" (a)	on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
(1)		•		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Fotal. (Colu Part X	Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	TTE OF THE SEE FORM 990, Part X, line 2	
	(a) Description of liability			(b) Book value
1.				
(1) Fed	deral income taxes			
(1) Fed (2)				
(1) Fed (2) (3)				
(1) Fed (2) (3) (4)				
(1) Fed (2) (3) (4) (5)				
(1) Fed (2) (3) (4) (5) (6)				
(1) Fed (2) (3) (4) (5) (6) (7)				
(1) Fed (2) (3) (4) (5) (6) (7) (8)				
(1) Fed (2) (3) (4) (5) (6) (7) (8) (9)	ieral Income taxes umn (b) must equal Form 990. Part X. col. (B) line	25)		

Schedule D (Form 990) 2022

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Schedule D (Form 990) 2022

Sche	dule D (Form 990) 2022 NATIONAL COUNCIL FOR ADOPTI	ION		75-1	L721671	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per Ret	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	1,099,	,200.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	4,232.			
b	Donated services and use of facilities	2b	142,346.			
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		<u>,578.</u>
3	Subtract line 2e from line 1			3	952	,622.
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	4,052.			
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		,052.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	956	,674.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With	Expenses per R	leturr	ı.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1		0.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
с	Other losses	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3		0.
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				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5		0.
Pa	t XIII Supplemental Information.					

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

PART X, LINE 2:

NCFA IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL
REVENUE CODE, EXCEPT ON THE NET INCOME DERIVED FROM UNRELATED BUSINESS
ACTIVITIES. NCFA FOLLOWS THE ACCOUNTING GUIDANCE FOR UNCERTAINTY IN INCOME
TAXES, WHICH PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE
FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT
OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AND ALSO
PROVIDES GUIDANCE ON VARIOUS RELATED MATTERS SUCH AS DERECOGNITION,
INTEREST, PENALTIES AND DISCLOSURES REQUIRED. NCFA RECOGNIZES INTEREST AND
PENALTIES, IF ANY, RELATED TO UNRECOGNIZED TAX BENEFITS IN THE APPLICABLE
OPERATING EXPENSE ACCOUNT. NCFA BELIEVES THAT IT HAS APPROPRIATE SUPPORT
FOR ANY TAX POSITION TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX
232054 09-01-22 Schedule D (Form 990) 2022 34
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Part XIII Supplemental Information (continued)

POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2022

232055 09-01-22

SCH	HEDULE J	Compensation Information		OMB No. 1	545-004	17
(For	rm 990)	- For certain Officers, Directors, Trustees, Key Employees, and Highest		20	7 7)
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20		•
Depart	tment of the Treasury	Attach to Form 990.		Open to		ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nam	e of the organizatio			identificatio		nber
De		NATIONAL COUNCIL FOR ADOPTION	75-1	L72167:	1	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
		iate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
	·	line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or o	°				
		Ipanions Payments for business use of personal re cation and gross-up payments Health or social club dues or initiation fee				
		spending account				
			II, CHEI)			
h	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
				1b		
		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	-	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization's	i			
		ector. Check all that apply. Do not check any boxes for methods used by a related organization				
		ation of the CEO/Executive Director, but explain in Part III.				
	Compensation					
	Independent of	compensation consultant Compensation survey or study				
		ther organizations X Approval by the board or compensation of	ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	lated organization:				
		e payment or change-of-control payment?		4a		X
b	Participate in or rec	ceive payment from a supplemental nonqualified retirement plan?		4b		X
	-	ceive payment from an equity-based compensation arrangement?		4c		X
	If "Yes" to any of lin	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
		c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n			
	contingent on the r			_		v
						X X
		ation?		5b		
		or 5b, describe in Part III.	2			
	contingent on the r	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation part carriers of:	11			
	-	-		62		x
		ation?				X
		pr 6b, describe in Part III.				
		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		nes 5 and 6? If "Yes," describe in Part III		7		x
		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				
				8		x
		id the organization also follow the rebuttable presumption procedure described in		···· •		
	Regulations section					
		eduction Act Notice, see the Instructions for Form 990.		ule J (Forn	n 990)	2022
	•	-		•	'	

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Schedule J (Form 990) 2022

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) RYAN HANLON	(i)	137,784.	0.	0.	0.	28,535.	166,319.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

FORM 990, PART

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



75-1721671

Name of the organization

NATIONAL COUNCIL FOR ADOPTION

LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PASSIONATELY COMMITTED TO THE BELIEF THAT EVERY CHILD DESERVES TO

PERMANENT FAMILY, THRIVE IN A NURTURING, NATIONAL COUNCIL FOR

ADOPTION'S MISSION IS TO MEET THE DIVERSE NEEDS OF CHILDREN, EXPECTANT

ADOPTED INDIVIDUALS, PARENTS, BIRTH PARENTS, ADOPTIVE FAMILIES, AND ALL

THOSE TOUCHED BY ADOPTION THROUGH GLOBAL ADVOCACY, EDUCATION, RESEARCH

LEGISLATIVE ACTION, AND COLLABORATION.

I,

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ALL THOSE TOUCHED BY ADOPTION THROUGH GLOBAL ADVOCACY, EDUCATION

LEGISLATIVE ACTION, AND COLLABORATION. RESEARCH,

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

LEGISLATIVE ACTION, SPAUDLING, GENERAL PROGRAMS RESEARCH,

EXPENSES \$ 310,147. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PAGE 2, PART III, 4A

EDUCATION AND COMMUNICATION. NCFA'S GLOBAL ADOPTION PROJECT AIMS TO

IMPROVE INTERCOUNTRY ADOPTION AND ADOPTION GLOBALLY THROUGH REGULAR

ENGAGEMENT WITH US AND FOREIGN GOVERNMENTS, COLLABORATION WITH

LIKE-MINDED ORGANIZATIONS AND THROUGH SPECIAL EVENTS SUCH AS HOSTING

DELEGATIONS OF FOREIGN OFFICIALS AND TRAVELING OVERSEAS TO SHARE ABOUT

THE US CULTURE AND EXPERIENCE OF ADOPTION.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22

Schedule O (Form 990) 2022

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FORM 990, PART VI, SECTION B, LINE 11B:

UPON PREPARATION BY AN INDEPENDENT CPA, FORM 990 IS REVIEWED BY THE

DIRECTOR OF OPERATIONS AND CEO BEFORE DISTRIBUTING TO BOARD MEMBERS AND

FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS ARE REQUIRED TO SIGN THE BOARD AGREEMENT ON AN ANNUAL BASIS.

BY SIGNING THE AGREEMENT, BOARD MEMBERS AGREE TO ABSTAIN FROM ANY

VOTE/ACTION THAT MIGHT LEAD TO OR BE PERCEIVED AS A CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A:

COMPENSATION IS REVIEWED AND APPROVED BY AN EXECUTIVE COMMITTEE FOR CEO

COMPENSATION AND BY THE CEO FOR KEY EMPLOYEES. COMPARABLE COMPENSATION DATA

(SURVEYS AND SALARY INFO FROM 990'S OF SIMILAR ORGANIZATIONS) IS USED.

DELIBERATION AND DISCUSSION ARE DOCUMENTED.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AK,AR,CA,CO,CT,DC,FL,IL,IN,KS,KY,ME,MD,MA,MI,MN,MS,NJ,NM,NY,NC,OH,OK,OR PA,RI,SC,TN,UT,VA,WA,WV,WI,GA

FORM 990, PART VI, SECTION C, LINE 18:

UPON PREPARATION BY AN INDEPENDENT CPA, FORM 990 IS REVIEWED BY THE

DIRECTOR OF OPERATIONS AND CEO BEFORE DISTRIBUTING TO BOARD MEMBERS AND

FILING WITH THE IRS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION CONSIDERS REQUESTS FOR DOCUMENTS WHICH ARE NOT REQUIRED BY

 LAW TO BE MADE PUBLIC AND THESE DOCUMENTS ARE AVAILABLE UPON REQUEST

 232212 10-28-22
 Schedule O (Form 990) 2022

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chedule O (Form 990) 2022 ame of the organization	Employer identification numl
NATIONAL COUNCIL FOR ADOPTION	75-1721671
ORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
DNATED SERVICES	-142,346
212 10-28-22	Schedule O (Form 990) 2