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# Extended to March 17, 2025 Return of Organization Exempt From Income Tax

Form **990** 

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. Inspection and ending APR 30

A F	or the	2023 calendar year, or tax year beginning MAY 1, 2023 and ending	APR 30, 2024	
3 C	heck if	C Name of organization	D Employer identific	cation number
	oplicable ⊐ Addres			
L	Addres change	National Council for Adoption		m 4
<u>_</u>	]Name ]change ]Initial		75-17216	
느	return Final	Number and street (or P.O. box if mail is not delivered to street address)		
	⊐return/	431 N. Lee Street	(703)299	
	termin- ated Amend	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,603,132.
<u> </u>	⊒return ∃Applica	Alexandila, VA 22314	H(a) Is this a group re	
	Jtion pendin	IF Name and address of principal officer; it y all lially off	for subordinates	
			H(b) Are all subordinates in  If "No." attach a	list. See instructions
	Vebsit		H(c) Group exemptio	
				↑ State of legal domicile: TX
		Summary	our or formation.	Totato or rogar dominono; 222
		Briefly describe the organization's mission or most significant activities: Research	, advocacy, a	wareness,
Activities & Governance		and education for everyone impacted by adopt	ion committed	to the
rna		Check this box if the organization discontinued its operations or disposed of n		
ove.	1		3	18
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)		18
es 8		Total number of individuals employed in calendar year 2023 (Part V, line 2a)		8
Ϋ́Ε	6	Total number of volunteers (estimate if necessary)	6	20
Ę	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
			Prior Year	Current Year
e		Contributions and grants (Part VIII, line 1h)	714,812.	528,539.
ē	1	Program service revenue (Part VIII, line 2g)	241,966.	432,899.
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	-104.	6,131.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0. 956,674.	16,525.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	950,674.	984,094.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	510,497.	601,168.
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
ben		Total fundraising expenses (Part IX, column (D), line 25) 137, 357.		
$\overline{\Sigma}$		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	656,022.	536,088.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,166,519.	1,137,256.
	l	Revenue less expenses. Subtract line 18 from line 12	-209,845.	-153,162.
os es			Beginning of Current Year	End of Year
Net Assets or und Balances	20	Total assets (Part X, line 16)	2,267,494.	2,322,010.
d Asi	21	Total liabilities (Part X, line 26)	348,930.	340,635.
		Net assets or fund balances. Subtract line 21 from line 20	1,918,564.	1,981,375.
	art II	Signature Block		
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta		y knowledge and belief, it is
true,	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	1/2-2:1
		Signature of officer	Date Date	12024
Sig		Ryan Hanlon, President and CEO	Duto	•
Her	e	Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	II PTIN
Paid	d	Amanda E. Waterhouse (Limanda F. Watunga)	12/19/24 of self-employ	
	parer	Firm's name Rogers & Company PLLC	Firm's EIN 5	8-2676261
	Only	Firm's address 8300 Boone Boulevard, Suite 600	Timil SLIN S	
		Vienna, VA 22182	Phone no. (7	03) 893-0300
Mar	ı tho II	RS discuss this return with the preparer shown above? See instructions	1	X Yes No

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Passionately committed to the belief that every child deserves to
	thrive in a nurturing, permanent family. National Council for
	Adoption's mission is to meet the diverse needs of children, expectant
	parents, birth parents, adopted individuals, adoptive families, 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?
	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 X No
	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 total expenses, and
	revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 249,288. including grants of \$ ) (Revenue \$ 258,405.)
	Conference - NCFA through its annual conference offers continuing
	education and high-caliber training to professionals from the adoption,
	social work, and child welfare communities who all share a common commitment to helping children thrive in nurturing, permanent families.
	The annual conference is an opportunity to highlight NCFA's research
	projects and findings done in cooperation with adoption researchers
	across the country.
	across the country:
4h	(Code:) (Expenses \$ 100,257. including grants of \$) (Revenue \$ 19,896.)
	Education and communication - NCFA offers free and low-cost webinars to
	expectant and current adoptive parents, adoption professionals, and
	other interested parties, training more than 3,000 people each year.
	NCFA also carries out communications campaigns to help the public
	better understand adoption and the needs of adoption families,
	communicating through national, regional, local, and special-interest
	media. NCFA provides social work CE through webinars and our
	conference, equipping social workers with high-quality,
	adoption-competent material. NCFA's e-publication of topical articles,
	the adoption advocate, offers critical information on relevant topics
	for those connected to adoption.
	22 752
4c	(Code:)(Expenses \$ 22,752. including grants of \$) (Revenue \$
	attorneys, with education, networking, and advocacy resources. We
	participated in meetings with congressional staff, federal government
	personnel, think-tanks, and institutions of higher learning. Most
	notably, we increased our engagement with partner organizations, with
	100+ meetings with other adoption and child welfare-oriented
	Education and communication. NCFA 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.
44	Other program services (Describe on Schedule O.)
TU	(Expenses \$ 332,047 • including grants of \$ ) (Revenue \$ 37,987 •)
4e	Total program service expenses 704,344.
	Form <b>990</b> (2023)

			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	Х	
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 public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	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,		v	
	Part VI	11a	X	
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		X
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	X	
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	X	
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		Х
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		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<sub>v</sub>
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part 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 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	.5		<del></del> -
.5	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

	1990 (2023) National Council for Adoption 75-172	1671	- F	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22	1	1
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?			₩
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			X
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<del>  ^</del>
р	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	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 provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			l
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		x
h	"Yes," complete Schedule L, Part IV  A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?	200		1
·	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M			Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
25.0	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	334	+	<del>  ^</del>
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00.0		
	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?			
_	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		$\perp$
_		1	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1	0		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	-		
С	(gambling) winnings to prize winners?	1c	x	
	Additionally			

(gambling) winnings to prize winners?

National Council for Adoption

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				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 8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	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	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	·			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	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				
_	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
a			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	ا مم ا			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	446			
a	Gross income from members or shareholders  Gross income from other sources. (Do not net amounts due or paid to other sources against	11a			
D	•	116			
100	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	ıza		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
a	Note: See the instructions for additional information the organization must report on Schedule O.		104		
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a		1.00	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
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		х
	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	nt income?	16		Х
	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	ctivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes." complete Form 6069.				

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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year all 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 O.			
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 with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	tion Director (This cooling Disqueste information about periode not required by the internal riorance code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
~	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	17		
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_		15a	Х	
	The organization's CEO, Executive Director, or top management official		21	Х
Ü	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b		
160				
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	160		х
	taxable entity during the year?	16a		21
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	4Ch		
500	exempt status with respect to such arrangements? tion C. Disclosure	16b		
	List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, CA, CO, CT, DC, FL, IL	TNT	кc	κv
17				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only	) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website X Another's website Upon request Other (explain on Schedule O)	-1.6		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finar	ncial	
	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 books and records Mission First Operations - (703)299-6633			
	431 N. Lee Street, Alexandria, VA 22314			
	TOT IN DCC DCTCCC, MICHANIATIA, VII DDSTT			

# 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.
- 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.

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

- 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.

(A)	(B)	l			<b>C)</b>		iout	(D)	(E)	(F)		
Name and title	Average hours per	(do	not c	heck ss pe	more	than	one h an	Reportable compensation	Reportable compensation	Estimated amount of		
	week	$\vdash$			officer and a dire		irecto	rector/trustee)		from	from related	other
	(list any hours for	or director				p		the organization	organizations (W-2/1099-MISC/	compensation from the		
	related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)	organization		
	organizations	al trus	onal tr		oloyee	comp		1099-NEC)		and related		
	below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) Ryan Hanlon	45.00											
President & CEO				Х				161,842.	0.	30,573.		
(2) Andrea T. Vavonese	2.00											
Chair		Х		Х				0.	0.	0.		
(3) Jane Castanias	2.00											
Chair-Elect		Х		Х				0.	0.	0.		
(4) Lisa Sinclair	2.00											
Vice-Chair		Х		Х				0.	0.	0.		
(5) Yekaterina (Kate) Trambitskaya	2.00							_	_	_		
Vice-Chair		Х		Х				0.	0.	0.		
(6) Kyle Clark	2.00							_	_	_		
Treasurer		Х		Х				0.	0.	0.		
(7) Eric Curtis	2.00							_	_	_		
Secretary		Х		Х				0.	0.	0.		
(8) Ashley Wilson	2.00							_	_	_		
Board Member		Х						0.	0.	0.		
(9) Dana Johnson	2.00							_	_	_		
Board Member		Х						0.	0.	0.		
(10) Evamarie Pisani	2.00							_	_	_		
Board Member		Х						0.	0.	0.		
(11) Ginger Cooch	2.00								_			
Board Member		Х						0.	0.	0.		
(12) Joseph Firschein	2.00											
Board Member		Х						0.	0.	0.		
(13) Mark Melson	2.00											
Board Member		Х						0.	0.	0.		
(14) Michele Jackson	2.00											
Board Member		Х						0.	0.	0.		
(15) Pamela Stevenson	2.00											
Board Member	0.00	Х						0.	0.	0.		
(16) Rebecca Spicer	2.00	<u>-</u> _						_		_		
Board Member	0.00	Х						0.	0.	0.		
(17) Renee Alexander	2.00							_		_		
Board Member		Х						0.	0.	0.		

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A) Name and title	(B) Average hours per week	Position (do not check more that box, unless person is b officer and a director/tr				l than is bot	one h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other	
	(list any hours for related organizations below line)	tee or direc		Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)		ompens from the organization and relations organizations	ation he ation ated
(18) Steven Sunday Board Member	2.00	х						0.	0	$\overline{\cdot}$		0.
(19) William Rosen	2.00									1		
Board Member		X						0.	0	<u>-</u>		0.
										_		
1b Subtotal								161,842.	0		30,5	
c Total from continuation sheets to Part V								0.	0		20 -	0.
d Total (add lines 1b and 1c)  Total number of individuals (including but n								161,842. eceived more than \$100	0,000 of reportable	•	30,5	1
compensation from the organization											Yes	
3 Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s								ghest compensated emp		3	3	Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$150										4	ı X	
5 Did any person listed on line 1a receive or a	accrue comper	nsat	ion f	rom	any	unr/						
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch ,	pers	son .				5	5	X
Complete this table for your five highest co	-	-							· · · · · · · · · · · · · · · · · · ·	nsatic	on from	
the organization. Report compensation for (A)	ine calendar y	ear	enui	ng v	VILII	OI W	101111	(B)	year.		(C)	
Name and business	address	NO	ONE	3			_	Description of s	ervices	Com	pensati	on
							_					
Total number of independent contractors (i     \$100,000 of compensation from the organi	-	ot lii	mite	d to		se lis	stec	a above) who received m	nore than	For	m <b>990</b>	(2022)

		Check if Schedule O contains a response	or note to any lin	e in this Part \/III			
		Check il Scheddle O contains a response	Tor flote to arry iii	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	, ,	Revenuè excluded
					function revenue	business revenue	from tax under sections 512 - 514
σωl			1 076				30000013 3 12 3 14
ant		Federated campaigns 1a	1,976.				
등일		Membership dues1b					
Ţ\$,		Fundraising events 1c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations 1d					
ns,		Government grants (contributions) 1e					
e ë	f	All other contributions, gifts, grants, and					
ij		similar amounts not included above 1f	526,563.				
da	g	Noncash contributions included in lines 1a-1f 1g \$	6,565.				
<u>8</u> 8	h	Total. Add lines 1a-1f		528,539.			
			Business Code				
e l		Conference Income	611710	258,405.	169,400.		89,005.
اه چَ	b	Membership Dues	611710	133,136.	133,136.		
Program Service Revenue	С	Federal Sub-award	611710	21,462.	21,462.		
am	d	Training Revenue	611710	19,896.	19,896.		
ogr R	е						
<u>r</u>		All other program service revenue					
		Total. Add lines 2a-2f		432,899.			
	3	Investment income (including dividends, inter		-			
		other similar amounts)		40,429.			40,429.
	4	Income from investment of tax-exempt bond		•			<u> </u>
	5	Royalties	5,00000				
	Ū	(i) Real	(ii) Personal				
	6 2		'				
		Gross rents 6a 6b 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	(ii) Other				
	<i>i</i> a	FO4 F40	` '				
		· <del>                                     </del>	<u>'</u>				
o l	D	Less: cost or other basis					
nu		and sales expenses 76 619,038.  Gain or (loss) 7c - 34,298.	'				
Revenue		. ,		-34,298.			-34,298.
<u>بر</u> ا		Net gain or (loss)		-34,290.			-34,290.
ther	8 a	Gross income from fundraising events (not					
0		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a	+				
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 199a					
		Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances10a	а				
	b	Less: cost of goods sold10l					
	С	Net income or (loss) from sales of inventory					
S			Business Code				
og e	11 a	Other Income	900099	13,573.	13,573.		
ane	b	Cash Back Rewards	900099	2,952.	2,952.		
Miscellaneous Revenue	С						
∄si	d	All other revenue					
_		Total. Add lines 11a-11d		16,525.			
	12	Total revenue See instructions		984.094.	360.419.	0.	95.136.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). X Check if Schedule O contains a response or note to any line in this Part IX (**D**)
Fundraising (C) (A) Total expenses Do not include amounts reported on lines 6b. Program service expenses Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members ..... Compensation of current officers, directors, 158,199. 104,333. 34,216. 19,650. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 76,749. 354,031. 231,123. 46,159. 7 Other salaries and wages Pension plan accruals and contributions (include 9,640. 6,202. 2,155. 1,283. section 401(k) and 403(b) employer contributions) 28,503. 43,120. 9,163. 5,454. 9 Other employee benefits 7,335. 36,178. 24,230. 4,613. Payroll taxes 10 Fees for services (nonemployees): 11 a Management Legal 47,385. 47,385. Accounting Lobbying Professional fundraising services. See Part IV, line 17 2,683. 2,683. Investment management fees ..... Other, (If line 11g amount exceeds 10% of line 25, 131,958. 20,307. 30,511. 81,140. column (A), amount, list line 11g expenses on Sch O.) 28,738. 29,841. 908. 195. Advertising and promotion 12 46,547. 19,332. 19,277. 7,938. 13 Office expenses 48,423. 21,441. 12,302. 14,680. Information technology 14 Royalties 15 2,725. 2,725. 16 Occupancy 17,697. 14,700. 1,488. 1,509. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials ... 135,746. 138,400. 149. 2,505. Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates ..... 21 29,471. 29,471. Depreciation, depletion, and amortization ..... 22 11,045. 11,045. 23 Other expenses. Itemize expenses not covered 24 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 O.) 15,856. 25. 15,831. Fees, licenses, and tax Other Expenses 12,463. 8,829. 1,517. 2,117. Dues and Subscriptions 1,594. 2. 1,562. <u>30.</u> С d All other expenses е 1,137,256. 704,344. 295,555. 137,357. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	ote to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			310,764.	1	86,744.
	2	Savings and temporary cash investments			217,660.	2	1,059,293.
	3	Pledges and grants receivable, net			18,668.	3	25,000.
	4	Accounts receivable, net			2,000.	4	4,778.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul	ostantial c	contributor, or 35%			
		controlled entity or family member of any of the	nese perso	ons		5	
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ	oed in sec	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			47,656.	9	26,456.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,365,999.			
	b	Less: accumulated depreciation	. 10b	250,080.	1,145,348.	10c	1,115,919.
	11	Investments - publicly traded securities			525,398.	11	0.
	12	Investments - other securities. See Part IV, lin			12		
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	0.	15	3,820.		
	16	Total assets. Add lines 1 through 15 (must ed	qual line 3	3)	2,267,494.	16	2,322,010.
	17	Accounts payable and accrued expenses			69,566.	17	48,147.
	18	Grants payable			0.70 0.64	18	
	19	Deferred revenue			279,364.	19	288,668.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	e Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or fo					
Ħ		trustee, key employee, creator or founder, sul					
Liabilities		controlled entity or family member of any of the				22	_
_	23	Secured mortgages and notes payable to unr				23	_
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	ies 17-24)	. Complete Part X	0		2 0 2 0
		of Schedule D		·····	0.		3,820. 340,635.
	26	Total liabilities. Add lines 17 through 25			348,930.	26	340,033.
Se		Organizations that follow FASB ASC 958, c	heck her	e X			
ğ		and complete lines 27, 28, 32, and 33.			1,724,683.	07	1 882 328
3ala	27				193,881.	27 28	1,882,328. 99,047.
βE	28	Net assets with donor restrictions			173,001.	28	JJ,047•
Ξ		Organizations that do not follow FASB ASC	, 958, CNE	eck nere			
ō		and complete lines 29 through 33.	4-			00	
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fund				29	
Ass	30	Paid-in or capital surplus, or land, building, or				30	
et/	31	Retained earnings, endowment, accumulated			1,918,564.	31	1,981,375.
Z	32	Total net assets or fund balances			2,267,494.	32	2,322,010.
	33	Total liabilities and net assets/fund balances			2,201,494.	აპ	2,322,010.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			94.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,13	-	
3	Revenue less expenses. Subtract line 2 from line 1	3	-15		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,91		
5	Net unrealized gains (losses) on investments	5	8	1,1	23.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	13	4,8	50.
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 (B))	10	1,98	1,3	75.
Pa	rt XII Financial Statements and Reporting				
	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				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
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	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	$oxed{oxed}$
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
За	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 requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2023)

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

National Council for Adoption

Employer identification number

75-1721671 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions)) Total

Schedule A (Form 990) 2023 National Council for Adoption 75-17216

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

	(Complete only if you checke				on failed to qualify	under Part	III. If the orgar	nization
	fails to qualify under the tests	isted below, plea	ase complete Parl	: III.)				
	ction A. Public Support	·	1	1				
	endar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 202	23 <b>(f</b>	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								
_	<b>Total.</b> Add lines 1 through 3  The portion of total contributions							
5	•							
	by each person (other than a governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4.							
_	ction B. Total Support				-			
Cale	endar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 202	23 <b>(f</b>	f) Total
7	Amounts from line 4							
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources							
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)							
	<b>Total support.</b> Add lines 7 through 10							
	Gross receipts from related activities,	,	,			12		
13	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third	, fourth, or fifth tax	x year as a section	501(c)(3)		
<u> </u>	organization, check this box and stor					<u></u>		<u></u>
	ction C. Computation of Publ			l (f))		14		
	Public support percentage for 2023 (Public support percentage from 2022					15		<u>%</u>
	a 33 1/3% support test - 2023. If the o						this box and	
106	stop here. The organization qualifies	-						
ı	33 1/3% support test - 2022. If the o		-		d line 15 is 33 1/30			
•	and stop here. The organization qual	-						
17:	10% -facts-and-circumstances tes							
.,,	and if the organization meets the fact							10,
	meets the facts-and-circumstances to				· ·		organization	
ŀ	10% -facts-and-circumstances tes	~		• • •				
•	more, and if the organization meets the							
	organization meets the facts-and-circ		•		•			

Schedule A (Form 990) 2023

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

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

(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.)

Sec	qualify under the tests listed beat ction A. Public Support	elow, please comp	piete Part II.)					
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(a) 2021	(d) 2022	(a) 2022	(f) Total	
	Gifts, grants, contributions, and	(a) 2019	<b>(b)</b> 2020	(c) 2021	(u) 2022	(e) 2023	(I) Total	
'	membership fees received. (Do not							
	include any "unusual grants.")	775,137.	704,447.	762,213.	714,812.	528,539.	3,485,148.	
2	Gross receipts from admissions,	773,1374	701,117.	702,213.	711,012.	320,333.	3,403,140.	
2	merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	321,515.	157,758.	169,389.	241,966.	360,419.	1,251,047.	
3	Gross receipts from activities that						_	
	are not an unrelated trade or business under section 513					89,005.	89,005.	
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5	1,096,652.	862,205.	931,602.	956,778.	977,963.	4,825,200.	
	Amounts included on lines 1, 2, and		-		-	-	<u> </u>	
	3 received from disqualified persons					45,899.	45,899.	
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.	
	: Add lines 7a and 7b					45,899.	45,899.	
	Public support. (Subtract line 7c from line 6.)					·	4,779,301.	
Se	ction B. Total Support						, ,	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
	Amounts from line 6	1,096,652.	(b) 2020 862, 205.	(c) 2021 931, 602.	(d) 2022 956,778.	(e) 2023 977, 963.	4,825,200.	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties,	144,699.	147,787.	40,679.	19,553.	40,429.	393,147.	
	and income from similar sources Unrelated business taxable income	144,000.	147,707.	40,075	15,555.	40,420.	333,1476	
ı.	(less section 511 taxes) from businesses acquired after June 30, 1975							
		144,699.	147,787.	40,679.	19,553.	40,429.	393,147.	
	Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is	144,000	147,707.	40,075	13,333.	40,420	333,147.	
	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.)	2,553.		1,911.			4,464.	
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,243,904.	1,009,992.	1,480,599.	976,331.	1,018,392.	5,729,218.	
	First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) organizati	ion,	
	check this box and <b>stop here</b>							
Se	ction C. Computation of Publ	ic Support Pe	rcentage					
15	Public support percentage for 2023 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	83.42 %	
16	Public support percentage from 2022	Schedule A, Part	III, line 15			16	80.06 %	
Se	ction D. Computation of Inves	stment Incom	e Percentage				_	
17	Investment income percentage for 20	23 (line 10c, colun	nn (f), divided by li	ne 13, column (f))		17	6.86 %	
18	Investment income percentage from 2					18	8.07 %	
19a	33 1/3% support tests - 2023. If the					3 1/3%, and line 1	7 is not	
	more than 33 1/3%, check this box at 33 1/3% support tests - 2022. If the	nd <b>stop here.</b> The	organization qualit	fies as a publicly s	upported organiza	tion	X	
٠								
20	line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization							

## 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.)

1		Yes	No
	1		
	2		
	3a		
	3b		
	- CL		
	3с		
	4a		
	4b		
	4D		
	4c		
	5a		
	อส		
	5b		
	5c		
	e		
	6		
	7		
	8		
	0-		
	9a		
	9b		
	9с		
	10a		
	10b		
dule	A (Forr	n 990)	2023

Р	ar	t IV   Supporting Organizations <sub>(continued)</sub>			
				Yes	No
11	1	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		
	c .	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 <b>Part VI.</b>	11c		
Se	ect	ion B. Type I Supporting Organizations			
				Yes	No
1	ı	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? If "No," describe in Part VI how the supported organization(s)			
		effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		Did the organization operate for the benefit of any supported organization other than the supported			
		organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		supervised, or controlled the supporting organization.	2		
Se		ion C. Type II Supporting Organizations			
		<i>y</i> 11 0 0		Yes	No
1		Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
		or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		or management of the supporting organization was vested in the same persons that controlled or managed			
		the supported organization(s).	1		
Se		ion D. All Type III Supporting Organizations			
_				Yes	No
1		Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
		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		
Se		ion E. Type III Functionally Integrated Supporting Organizations			
		Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea <b>(see instructions</b> )			
	' a	The organization satisfied the Activities Test. Complete line 2 below.	•		
	b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	C	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see in	structio	ns)	
2		Activities Test. Answer lines 2a and 2b below.	Straction	Yes	No
-		Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	140
		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.	2a		
		Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	La		
		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.	2b		
3		Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b>	ZU		
		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 <b>Part VI.</b>	3a		
		Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
		= 5. ga ation one look a capetaintal abgree of all obtain 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.

га	rt v   Type III Non-Functionally Integrated 509(a)(3) Support	ilig Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on N	Nov. 20, 1970 (e <i>xplain in</i> I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ist complete	Sections A through E.	
Sect	ion 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	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	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		
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting org	anization (see

Schedule A (Form 990) 2023

instructions).

	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga		<u>, (od)</u>	J I/ZIO/I Page/
	on D - Distributions	(u)(o) cupper unig cig	CONTINU	ieu)	Current Year
1	Amounts paid to supported organizations to accomplish exe	mnt nurnoses		1	Ourrent real
	Amounts paid to supported organizations to accomplish exemples and to perform activity that directly furthers exemple to the supported organizations to accomplish exemples to accomplish exemples and the supported organizations are supported organizations.				
_	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.	,		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 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) Underdistribution Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
С	Excess from 2021				
d	Excess from 2022				

Schedule A (Form 990) 2023

e Excess from 2023

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

Sched	dule	Α,	Part	III,	Line	12,	Expla	nation	for	Other	Income	•	
Othei	inc	ome	!										
2019	Amou	ınt:	\$	2,55	3.								
2020	Amou	ınt:	\$	0.									
2021	Amou	ınt:	\$	1,91	1.								
2022	Amou	ınt:	\$	0.									
2023	Amou	ınt:	\$	0.									

# Schedule B (Form 990)

## **Schedule of Contributors**

OMB No. 1545-0047

**2023** 

Schedule B (Form 990) (2023)

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

National Council for Adoption

75-1721671

Employer identification number

Organization type (check one):							
Filers of:		Section:					
Form 990	or 990-EZ	$\boxed{\textbf{X}}$ 501(c)( $3$ ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 990	-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Note: Onl General F	y a section 501(c)( Rule For an organization	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.  filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special R	lules						
S	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.					
C li	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
i: <b>,</b>	vear, contributions s checked, enter h ourpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year					
answer "N	lo" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify a requirements of Schedule B (Form 990).					

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

# National Council for Adoption

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1	Name, address, and ZiF + 4	\$ 20,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2		\$ 33,000.  Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3		\$ 30,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
4	rume, address, and En 1 1	\$ 25,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5		\$ 25,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
6		\$ 75,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)

# National Council for Adoption

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4		Person X Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		1	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$	Person X  Payroll   Noncash   Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$	Person X Payroll Noncash Complete Part II for

# National Council for Adoption

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
13		\$ 6,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
14		\$S, 206.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
15		\$ 5,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
16		\$\$ Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
17		\$S,000.  Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
18		\$S,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)

# National Council for Adoption

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$6,000.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

# National Council for Adoption

(a) No.	(6)		
from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
20	event tickets		
		\$6,000.	_06/08/23_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-  -  -		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		*	

# National Council for Adoption 75-1721671

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### SCHEDULE C (Form 990)

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

**Political Campaign and Lobbying Activities** 

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nan	ne of orga		1 Council for Ad	doption	Emp	oloyer identification number 75-1721671
Pa	art I-A	Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527	organization.
2	Political	campaign activity expendit	zation's direct and indirect politi ures gn activities			\$
Pa	art I-B	Complete if the org	ganization is exempt un	der section 501(c)(	(3).	
1	Enter the	e amount of any excise tax	incurred by the organization ur	nder section 4955		\$
2	Enter the	e amount of any excise tax	incurred by organization manage	gers under section 4955		\$
3	If the org	ganization incurred a sectio	n 4955 tax, did it file Form 4720	0 for this year?		Yes No
4a	Was a co	orrection made?				Yes No
		describe in Part IV.		-l		(/-\/0\
			ganization is exempt un			• • • • • • • • • • • • • • • • • • • •
			d by the filing organization for s			\$
2			ization's funds contributed to c			Φ.
2			s. Add lines 1 and 2. Enter here			Φ
3		•		·		\$
4			1120-POL for this year?			
5			mployer identification number (			
			tion listed, enter the amount pa		_	
	contribu	tions received that were pr	omptly and directly delivered to	o a separate political orga	anization, such as a sepa	rate segregated fund or a
	political	action committee (PAC). If	additional space is needed, pro	ovide information in Part	IV.	_
		(a) Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

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

Schedule C (Form 990) 2023

	art II-A		on is exempt under section 501(c)(3) and fil	ed Form 5768 (el	ection under				
•	art II-A	section 501(h)).	on is exempt under section 50 h(c)(b) and in	ed i oiiii 5700 (ei	ection under				
Δ	Check		gs to an affiliated group (and list in Part IV each affiliated	group member's name	e address FIN				
•	expenses, and share of excess lobbying expenditures).								
В	Check		ed box A and "limited control" provisions apply.						
<u> </u>	OHECK	Limits on Lobb	bying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals				
1	a Total lob	bying expenditures to influence pub	lic opinion (grassroots lobbying)	4,300.					
	<b>b</b> Total lob	bying expenditures to influence a lea	gislative body (direct lobbying)	3,232.					
c Total lobbying expenditures (add lines 1a and 1b)				7,532.					
d Other exempt purpose expenditures			1,127,041.						
e Total exempt purpose expenditures (add lines 1c and 1d)			1,134,573.						
			unt from the following table in both columns.	188,457.					
	If the am	ount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:						
	not over	\$500,000,	20% of the amount on line 1e.						
	over \$50	00,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.						
	over \$1,	000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.						
	over \$1,	500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.						
	over \$17	7,000,000,	\$1,000,000.						
	<b>g</b> Grassro	ots nontaxable amount (enter 25% o	f line 1f)	47,114.					
	h Subtrac	t line 1g from line 1a. If zero or less, e	enter -0-	0.					
	i Subtrac	t line 1f from line 1c. If zero or less, e	nter -0-	0.					
	j If there i	s an amount other than zero on eithe	er line 1h or line 1i, did the organization file Form 4720	_					
	reporting	g section 4911 tax for this year?			Yes No				
	4-Year Averaging Period Under Section 501(h)								

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2020	<b>(b)</b> 2021	<b>(c)</b> 2022	(d) 2023	(e) Total			
2a Lobbying nontaxable amount	44,060.	119,771.	166,636.	188,457.	518,924.			
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					778,386.			
c Total lobbying expenditures	2,396.	5,117.	4,303.	7,532.	19,348.			
<b>d</b> Grassroots nontaxable amount	36,866.	29,943.	41,659.	47,114.	155,582.			
e Grassroots ceiling amount (150% of line 2d, column (e))					233,373.			
f Grassroots lobbying expenditures	2,396.	5,117.	4,303.	4,300.	16,116.			

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023 National Council for Adoption 75-172167

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	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(k	<b>)</b>
	e lobbying activity.	Yes	No	Amo	ount
1	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:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		/ <b>C</b> \	- 45	
Pai	TIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).				
_	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."			III-A, lin	e 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 political expenditures (do not include amounts of political expenditures).	cai			
_	expenses for which the section 527(f) tax was paid).		0-		
	Current year				
	Carryover from last year				
C					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the e				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
_	expenditures next year?		4		
5 Dai	Taxable amount of lobbying and political expenditures. See instructions  t IV Supplemental Information		5		
		. ::-4\- D4-!I	A 15		
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	ilst); Part II	-A, lines i	and ∠ (see	
ınstr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

National Council for Adoption

Employer identification number 75-1721671

Pai	Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, line		Is or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds 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	writing that the assets held in donor adv	ised funds
	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 b	e used only
	for charitable purposes and not for the benefit of the donor o		
_	impermissible private benefit?		Yes No
Pai			, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	·	
	Preservation of land for public use (for example, recrea		of a historically important land area
	Protection of natural habitat	Preservation o	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the forn	n of a conservation easement on the last  Held at the End of the Tax Year
	day of the tax year.		
_	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru		2c
a	Number of conservation easements included on line 2c acqu		
•	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by ti	ne organization during the tax
4	year Number of states where property subject to conservation eas	coment is legated	
5	Does the organization have a written policy regarding the per	-	f
3	violations, and enforcement of the conservation easements it	·	
6	Staff and volunteer hours devoted to monitoring, inspecting,		
Ü	ctan and volunteer nours devoted to monitoring, inspecting,	rianding of violations, and emorning co	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	vation easements during the year
	,		and year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170	)(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financial state	ments that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or (	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in	furtherance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these ite	ems.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	d balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	therance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financ	ial gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

Part IV

che	edule D (Form 990) 2023 Natio	nal Council	for Adopti	lon		75-17	21671	Page 2
	art III Organizations Maintainir							
3	Using the organization's acquisition, acc	cession, and other record	ds, check any of the	following that make si	ignificant	use of its		
	collection items (check all that apply).							
а	Public exhibition		Loan or exc	change program				
b	Scholarly research	6	e Other					
С	Preservation for future generation	S						
4	Provide a description of the organization	n's collections and expla	in how they further	the organization's exen	npt purp	ose in Part	XIII.	
5	During the year, did the organization sol	icit or receive donations	of art, historical trea	asures, or other similar	assets			
	to be sold to raise funds rather than to be	e maintained as part of	the organization's c	ollection?			Yes	No_
Paı	art IV Escrow and Custodial Ar	rangements Comple	te if the organizatio	n answered "Yes" on F	orm 990	, Part IV, li	ne 9, or	
	reported an amount on Form 990	), Part X, line 21.						
1a	Is the organization an agent, trustee, cu	stodian, or other interme	diary for contribution	ons or other assets not	included	l	_	
	on Form 990, Part X?					L	Yes	No
b								
	<ul><li>If "Yes," explain the arrangement in Part</li></ul>	XIII and complete the fo	ollowing table:					
	<ul><li>If "Yes," explain the arrangement in Part</li></ul>	XIII and complete the fo	ollowing table:				Amount	
С	If "Yes," explain the arrangement in Part     Beginning balance	·	Ü		1c		Amount	
	, ,	· 					Amount	
d	Beginning balance  Additions during the year				. 1d		Amount	
d e	Beginning balance				. 1d		Amount	
d e f	Beginning balance  Additions during the year  Distributions during the year				1d 1e 1f		Amount	No
d e f 2a b	Beginning balance  Additions during the year  Distributions during the year  Ending balance  Did the organization include an amount  If "Yes," explain the arrangement in Part	on Form 990, Part X, line	e 21, for escrow or c	sustodial account liabili	1d 1e 1f ty?			
d e f 2a b	Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount	on Form 990, Part X, line : XIII. Check here if the e ste if the organization an	e 21, for escrow or c	sustodial account liabili n provided in Part XIII orm 990, Part IV, line 10	1d 1e 1f ty?		Yes	No
d e f 2a b	Beginning balance  Additions during the year  Distributions during the year  Ending balance  Did the organization include an amount  If "Yes," explain the arrangement in Part	on Form 990, Part X, line	e 21, for escrow or c	sustodial account liabili n provided in Part XIII orm 990, Part IV, line 10	1d 1e 1f ty?		Yes	No
d e f 2a b Pai	Beginning balance  Additions during the year  Distributions during the year  Ending balance  Did the organization include an amount  If "Yes," explain the arrangement in Parl  THE TO Endowment Funds Completed  Beginning of year balance	on Form 990, Part X, line  XIII. Check here if the eete if the organization an  (a) Current year	e 21, for escrow or c xplanation has beel swered "Yes" on Fo	sustodial account liabili n provided in Part XIII orm 990, Part IV, line 10	1d 1e 1f ty?		Yes	No
d e f 2a b Pai	Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount Off "Yes," explain the arrangement in Part	on Form 990, Part X, line  XIII. Check here if the eete if the organization an  (a) Current year	e 21, for escrow or c xplanation has beel swered "Yes" on Fo	sustodial account liabili n provided in Part XIII orm 990, Part IV, line 10	1d 1e 1f ty?		Yes	No

1a	Beginning of year balance				
b	Contributions				
	Net investment earnings, gains, and losses				
d	Grants or scholarships				
е	Other expenditures for facilities				
	and programs				
f	Administrative expenses				
g	End of year balance				
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g, column (a	a)) held as:	
а	Board designated or quasi-endowment		_%		
b	Permanent endowment	%			

**c** Term endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the

organization by: (i) Unrelated organizations? (ii) Related organizations? 3a(ii)

**b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds.

#### Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		680,906.		680,906.
<b>b</b> Buildings		453,938.	28,844.	425,094.
c Leasehold improvements				
<b>d</b> Equipment		15,128.	7,140.	7,988.
e Other		216,027.	214,096.	1,931.
Total. Add lines 1a through 1e. (Column (d) must equa	l Form 990, Part X, line 1	10c, column (B))		1,115,919.

Schedule D (Form 990) 2023

Yes

No

Schedule D (Form 990) 2023 National Cou	ncil for Ado	option 75	5-1721671 Page
Part VII Investments - Other Securities	on Form 000 Port IV line	a 11h Con Form 000 Port V line 12	
Complete if the organization answered "Yes" o	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
	(b) book value	(c) Wethod of Valuation. Cost of en	u-or-year market value
(1) Financial derivatives			
(2) Closely held equity interests (3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))  Part IX Other Assets			
Complete if the organization answered "Yes" of	on Form 990 Part IV line	a 11d See Form 990 Part V line 15	
	escription	or ra. dee roini doo, rait X, iiie ro.	(b) Book value
(1)	- COOTIPEIOTT		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		
Part X Other Liabilities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25	5
1. (a) Description of liability			(b) Book value

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)	equipment lease	3,820.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	3,820.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2023

332054 09-28-23 Schedule D (Form 990) 2023

### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

National Council for Adoption

Part I | Questions Regarding Compensation

 $Employer\ identification\ number\\75-1721671$ 

			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
1	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		X
_	If "Yes" on line 5a or 5b, describe in Part III.	- 1-		
3	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а		6a		Х
b	The organization?  Any related organization?	6b		X
.,	If "Yes" on line 6a or 6b, describe in Part III.	30		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
•		7		Х
0	not described on lines 5 and 6? If "Yes," describe in Part III	7		22
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Х
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Λ
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

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.

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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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	benefits	(E) Total of columns (B)(i)-(D)	in column (B) reported as deferred on prior Form 990
		compensation incentive reportable compensation compensation	compensation					
(1) Ryan Hanlon	(i)	151,416.	10,000.	426.	3,028.	27,545.	192,415.	0.
President & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

National Council for Adoption

Employer identification number 75-1721671

Form 990, Part I, Line 1, Description of Organization Mission: belief that every child deserves to thrive in a nurturing, permanent family. National Council for Adoption's mission is to meet the diverse needs of children, expectant parents, birth parents, adopted individuals, adoptive families, and all those touched by adoption through global advocacy, education, research, legislative action, and collaboration. Form 990, Part III, Line 1, Description of Organization Mission: all those touched by adoption through global advocacy, education,

Form 990, Part III, Line 4d, Other Program Services: Various other programs including: Research, Legislative action, Post Adoption Project, and General programs. Expenses \$ 332,047. including grants of \$ 0. Revenue \$ 37,987.

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:

research, legislative action, and collaboration.

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

Name of the organization  National Council for Montion	Employer identification number
National Council for Adoption	75-1721671
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. Deliber	ation and discussion
are documented.	
Form 990, Part VI, Line 17, List of States receiving of	opy of Form 990:
AL, AK, AZ, 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 19:	_
The Organization considers requests for documents which	h are not required by
law to be made public and these documents are available	e upon request.
Form 990, Part IX, Line 11g, Other Fees:	
Independent contractor fees:	
Program service expenses	24,726.
Management and general expenses	2,063.
Fundraising expenses	22,594.
Total expenses	49,383
Other professional fees:	
Program service expenses	55,802
Management and general expenses	16,300.
Fundraising expenses	7,917.
Total expenses	80,019.
Writing and Editing fees:	Schedule () (Form 990) 202

Name of the organization  National Council for Adoption	Employer identification number 75-1721671
Program service expenses	612.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	612.
Payroll Services:	
Program service expenses	0.
Management and general expenses	1,944.
Fundraising expenses	0.
Total expenses	1,944.
Total Other Fees on Form 990, Part IX, line 11g, Col A	131,958.