

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2005

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2005 calendar year, or tax year beginning July 1, 2005, and ending June 30, 2006

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

C Name of organization
Christian Children's Fund, Inc.
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
2821 Emerywood Parkway
 City or town, state or country, and ZIP + 4
Richmond, VA 23294-3725

D Employer identification number
54 : 0536100

E Telephone number
(804) 756-2700

F Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) ▶

G Website: ▶ **www.christianchildrensfund.org**

J Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? ☐ Yes ☐ No
 (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No
I Group Exemption Number ▶ **N/A**

M Check ▶ ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **209,153,416**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	151,644,900		
	b	Indirect public support	1b	37,598,262		
	c	Government contributions (grants)	1c	12,970,500		
	d	Total (add lines 1a through 1c) (cash \$ 200,671,141 noncash \$ 1,542,522)	1d	202,213,663		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,031,558		
	3	Membership dues and assessments	3	0		
	4	Interest on savings and temporary cash investments	4	155,686		
	5	Dividends and interest from securities	5	374,410		
	6a	Gross rents	6a	401,184		
	b	Less: rental expenses	6b	97,606		
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	303,578		
Revenue	7	Other investment income (describe ▶ G/L on foreign exchange and other)		7	27,949	
	8a	Gross amount from sales of assets other than inventory	(A) Securities	8a	83,853	
	b	Less: cost or other basis and sales expenses	8b	29,447		
	c	Gain or (loss) (attach schedule)	8c	54,406		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	902,571		
	9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
	a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	0		
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	0		
Expenses	11	Other revenue (from Part VII, line 103)	11	1,095,976		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	206,105,391		
	13	Program services (from line 44, column (B))	13	170,227,352		
	14	Management and general (from line 44, column (C))	14	17,224,047		
	15	Fundraising (from line 44, column (D))	15	23,660,885		
	16	Payments to affiliates (attach schedule)	16	0		
	17	Total expenses (add lines 16 and 44, column (A))	17	211,112,284		
	Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-5,006,893	
		19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	47,624,654	
		20	Other changes in net assets or fund balances (attach explanation)	20	2,829,170	
		21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	45,446,931	

Part II **Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>38,304,367</u> noncash \$ <u>1,542,522</u>) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	22 38,304,367	38,304,367		
23	Specific assistance to individuals (attach schedule)	23 98,486,630	98,486,630		
24	Benefits paid to or for members (attach schedule)	24 0	0		
25	Compensation of officers, directors, etc.	25 1,585,090	171,408	1,175,312	238,370
26	Other salaries and wages	26 23,432,105	15,329,389	4,970,719	3,131,997
27	Pension plan contributions	27 352,155	347,017	0	5,138
28	Other employee benefits	28 2,982,313	736,385	2,245,150	778
29	Payroll taxes	29 2,047,454	1,506,862	333,088	207,504
30	Professional fundraising fees	30 344,513	0	0	344,513
31	Accounting fees	31 667,540	122,895	537,099	7,546
32	Legal fees	32 407,282	135,516	192,984	78,782
33	Supplies	33 1,640,237	895,299	401,854	343,084
34	Telephone	34 1,020,734	738,123	138,280	144,331
35	Postage and shipping	35 1,513,967	396,409	984,548	133,010
36	Occupancy	36 1,904,872	1,485,688	410,781	8,403
37	Equipment rental and maintenance	37 422,283	74,333	347,387	563
38	Printing and publications	38 0	0	0	0
39	Travel	39 3,886,956	2,417,892	494,939	974,125
40	Conferences, conventions, and meetings	40 949,390	825,260	15,228	108,902
41	Interest	41 81,928	11,499	70,429	0
42	Depreciation, depletion, etc. (attach schedule)	42 3,378,648	2,187,261	1,151,759	39,628
43	Other expenses not covered above (itemize):				
a	Contract services	43a 7,237,157	3,495,944	1,833,578	1,907,635
b	Advertising & public education	43b 15,662,980	107,417	64	15,555,499
c	Auto & truck expenses	43c 736,209	733,886	215	2,108
d	Staff training	43d 450,998	361,689	60,841	28,468
e	Miscellaneous	43e 2,679,417	707,348	1,695,655	276,414
f	Equipment purchases	43f 937,059	648,835	164,137	124,087
g	43g			
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 211,112,284	170,227,352	17,224,047	23,660,885

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;

(iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <u>global, sustainable assistance for children</u>		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		
a	Basic Education: Programs emphasize non-formal and formal learning environments and focus on the skills and knowledge that students should know and be able to perform. Focus is placed on the vital standards needed to improve education and equity in education. Learning programs also target adult literacy and civic responsibility. Training programs related to community project management and community development are also provided. CCF ensures holistic programs in 33 countries assisting 10.5 million children and families. (Grants and allocations \$ <u>13,346,219</u>) If this amount includes foreign grants, check here ► <input checked="" type="checkbox"/>	59,311,549
b	Health & Sanitation: Health programs focus primarily on basic health care, maternal and child health and survival, prevention and control of infectious diseases such as HIV/AIDS, and health infrastructure development. (Grants and allocations \$ <u>9,157,257</u>) If this amount includes foreign grants, check here ► <input checked="" type="checkbox"/>	40,695,515
c	Emergencies: Programs of emergency interventions are in response to unexpected situations created as a result of conflict, natural disasters or other unpredictable events. Emergency relief in the form of food, shelter and medical supplies is provided. Hundreds of child centered spaces have provided rapid psychosocial support through activities that help restore children's sense of safety, normalcy, connection to caring adults and hope for the future. The centers also promote children's health through education of local community volunteers in diagnosis and prevention. (Grants and allocations \$ <u>4,651,063</u>) If this amount includes foreign grants, check here ► <input checked="" type="checkbox"/>	20,669,651
d	Micro Enterprise Development: Livelihood programs assist families through training in small-scale income generation activities and methods for increasing agricultural productivity. Activities include vocational and work-related training for adults and youth; micro credit activities and micro-enterprise development; and agricultural and livestock production to enhance livelihood. (Grants and allocations \$ <u>4,357,998</u>) If this amount includes foreign grants, check here ► <input checked="" type="checkbox"/>	19,367,262
e	Other program services (attach schedule) (Grants and allocations \$ <u>6,791,830</u>) If this amount includes foreign grants, check here ► <input checked="" type="checkbox"/>	30,183,375
f	Total of Program Service Expenses (should equal line 44, column (B), Program services).	170,227,352

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	2,938,674	45	3,050,185
	46 Savings and temporary cash investments	5,431,220	46	3,007,245
	47a Accounts receivable	2,815,180		
	b Less: allowance for doubtful accounts	0	47c	2,815,180
	48a Pledges receivable	449,466		
	b Less: allowance for doubtful accounts	65,875	48c	383,591
	49 Grants receivable	5,938,904	49	2,907,941
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)	20,000	50	0
	51a Other notes and loans receivable (attach schedule)			
	b Less: allowance for doubtful accounts	0	51c	0
	52 Inventories for sale or use	0	52	0
	53 Prepaid expenses and deferred charges	2,385,488	53	2,749,080
	54 Investments—securities (attach schedule) <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	31,783,779	54	36,969,007
	55a Investments—land, buildings, and equipment: basis	0		
	b Less: accumulated depreciation (attach schedule)	0	55c	0
	56 Investments—other (attach schedule)	0	56	0
	57a Land, buildings, and equipment: basis	31,076,461		
	b Less: accumulated depreciation (attach schedule)	13,831,276	57c	17,245,185
58 Other assets (describe ► Intangible pension asset)	2,218,348	58	0	
59 Total assets (must equal line 74). Add lines 45 through 58.	70,872,057	59	69,127,414	
Liabilities	60 Accounts payable and accrued expenses	15,857,351	60	15,886,181
	61 Grants payable	3,277,555	61	3,078,748
	62 Deferred revenue	0	62	0
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0
	64a Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b Mortgages and other notes payable (attach schedule)	320,456	64b	1,460,000
	65 Other liabilities (describe ► Accrued pension benefit liability)	3,792,041	65	3,255,554
66 Total liabilities. Add lines 60 through 65	23,247,403	66	23,680,483	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	7,571,883	67	6,366,044
	68 Temporarily restricted	34,436,508	68	31,950,348
	69 Permanently restricted	5,616,263	69	7,130,539
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds	N/A	70	N/A
	71 Paid-in or capital surplus, or land, building, and equipment fund	N/A	71	N/A
	72 Retained earnings, endowment, accumulated income, or other funds	N/A	72	N/A
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	47,624,654	73	45,446,931
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73.	70,872,057	74	69,127,414

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements		a	208,642,735
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1	2,350,458	
2	Donated services and use of facilities	b2	89,279	
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	2,439,737
c	Subtract line b from line a		c	206,202,998
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify): <u>Rental expenses reported on Line 6b Part I</u> <u>and \$1 rounding adjustment</u>	d2	-97,607	
	Add lines d1 and d2		d	-97,607
e	Total revenue (Part I, line 12). Add lines c and d ▶		e	206,105,391

Part IV-B		Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
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a	Total expenses and losses per audited financial statements		a	210,820,458
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1	89,279	
2	Prior year adjustments reported on Part I, line 20	b2	0	
3	Losses reported on Part I, line 20	b3	-478,712	
4	Other (specify): -478,712			
	Rental exp. reported Line 6b and \$1 rounding adjustment	b4	97,607	
	Add lines b1 through b4			b -291,826
c	Subtract line b from line a			c 211,112,284
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2			d 0
e	Total expenses (Part I, line 17). Add lines c and d			e 211,112,284

Part V-A **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

[illegible]

Part V-A	Current Officers, Directors, Trustees, and Key Employees <i>(continued)</i>
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Yes	No
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- | | | |
|-----|--|----|
| 75a | Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings | 24 |
|-----|--|----|

- b** Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) .

- c** Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control?

Note. Related organizations include section 509(a)(3) supporting organizations.

If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.

- d** Does the organization have a written conflict of interest policy?

Part V-B		Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)	75d	✓

[illegible]

Part VI	Other Information <i>(See the instructions.)</i>
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Yes	No
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- 76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity

- 77 Were any changes made in the organizing or governing documents but not reported to the IRS?
If "Yes," attach a conformed copy of the changes.

- 78a** Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

- b** If "Yes," has it filed a tax return on **Form 990-T** for this year?

- 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement

- 80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?

- b If "Yes," enter the name of the organization ▶
 _____ and check whether it is ☐ exempt or ☐ nonexempt

- 81a Enter direct and indirect political expenditures. (See line 81 instructions.) . . . **81a** 0

- b Did the organization file **Form 1120-POL** for this year?

Part VI Other Information (continued)

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	✓	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b 89,279	✓	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
84b			
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0; section 4912 ▶ 0; section 4955 ▶ 0		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed ▶ see attached schedule		
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b 125	
91a	The books are in care of ▶ Christopher M. Markwith, CPA, Controller Telephone no. ▶ (804) 756-2755 Located at ▶ 2821 Emerywood Parkway Richmond VA ZIP + 4 ▶ 23261-6484		
b	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)?	91b ✓	
	If "Yes," enter the name of the foreign country ▶ see attached schedule		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c ✓	
	If "Yes," enter the name of the foreign country ▶ see attached schedule		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A		

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93	Program service revenue:					
a	Service fees					1,031,558
b						
c						
d						
e						
f	Medicare/Medicaid payments					0
g	Fees and contracts from government agencies					0
94	Membership dues and assessments					0
95	Interest on savings and temporary cash investments			14	155,686	
96	Dividends and interest from securities			14	374,410	
97	Net rental income or (loss) from real estate:					
a	debt-financed property					
b	not debt-financed property			16	303,578	
98	Net rental income or (loss) from personal property					
99	Other investment income			14	27,949	
100	Gain or (loss) from sales of assets other than inventory			18	902,571	
101	Net income or (loss) from special events					0
102	Gross profit or (loss) from sales of inventory					0
103	Other revenue: a Miscellaneous					494,911
b	Study Tours					601,065
c						
d						
e						
104	Subtotal (add columns (B), (D), and (E))				1,764,194	2,127,534
105	Total (add line 104, columns (B), (D), and (E))					3,891,728

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	Fees charged to autonomous international organizations for processing sponsorships in support of programs.
103a	Includes income not yet assigned at closing, interest on loan to officer, employee cafeteria vending machine income and other activity from global programs.
103b	Contributions from donors visiting project sites.

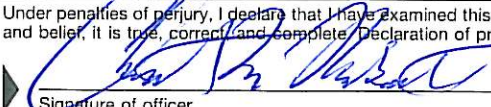
Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		Date 11/19/07	
Paid Preparer's Use Only	Christopher M. Markwith, CPA, Controller			
	Type or print name and title.			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. W)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN	Phone no.	

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
 - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time—Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization Christian Children's Fund, Inc	Employer identification number 54 : 0536100
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 26484	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Richmond, VA, 23261-6484	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► **Christopher M. Markwith**

Telephone No. ► (**804**) **756-2755**

FAX No. ► (**804**) **756-2774**

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

- 1 I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until _____, 20____, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year 20____ or
- ☒ tax year beginning July 1, 2005, and ending June 30, 2006.

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

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

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

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box ☐ **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time—Must File Original and One Copy.

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization		Employer identification number
	Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		

Check type of return to be filed (File a separate application for each return):

- | | | |
|--------------------------------------|---|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 4720 | |

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ☐ Telephone No. ☐ FAX No. ☐
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the **whole group**, check this box ☐. If it is for **part of the group**, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until _____, 20____.
- 5 For calendar year _____, or other tax year beginning _____, 20____, and ending _____, 20____.
- 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension _____

- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____
- b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____
- c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ _____

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☐ Title ☐ Contoller Date ☐ 10/25/06**Notice to Applicant—To Be Completed by the IRS**

- ☐ We have approved this application. Please attach this form to the organization's return.
- ☐ We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- ☐ We have not approved this application. After considering the reasons stated in Item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- ☐ We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
- ☐ Other _____

Director _____ By: _____ Date _____

Alternate Mailing Address — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name
	Number and street (include suite, room, or apt. no.) or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2005

Name of the organization

Christian Children's Fund, Inc.

Employer identification number

54 : 0536100

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
John Watts 2821 Emerywood Parkway Richmond VA	Director, 40	127,332	11,050	0
Benjamin Woodson same	Director, 40	122,998	12,169	0
Laura Henderson same	Director, 40	119,710	12,038	0
Mary Arnold same	Director, 40	119,408	14,426	0
Shep Harder same	Director, 40	117,863	14,358	0
Total number of other employees paid over \$50,000 ►	55			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Protiviti Inc. 12269 Collections Center Drive, Chicago IL 60693	Auditors	340,723
Hunton & Williams 951 E. Byrd St., Accounting Dept., Richmond VA 23219	Legal services	247,772
Ernst & Young Llp PO Box 828135 Philadelphia PA 19182	Auditors	152,010
KPMG Kenya PO Box 40612 00100 GPO, Nairobi, Kenya	Auditors	80,056
Total number of others receiving over \$50,000 for professional services ►	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Corinthian Media 214 West 29th St., New York NY 10001	Media/advertising	5,638,841
Broadcast Buying Services Inc. 901 Manchester St., Toms River NJ 08757	Media/advertising	4,870,288
Cglic-Bloomfield Easc 5082 Collections Center Dr., Chicago IL 60693	Health insurance	1,173,699
Standard Register PO Box 91047, Chicago IL 60693	Printing	1,120,640
Carat Fusion c/o Wachovia National Bank PO Box 18754, Newark NJ 07191	Media/advertising	932,091
Total number of other contractors receiving over \$50,000 for other services ►	100	

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

- 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ 0 (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

- 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a Sale, exchange, or leasing of property? 2a
- b Lending of money or other extension of credit? 2b
- c Furnishing of goods, services, or facilities? 2c
- d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? 2d
- e Transfer of any part of its income or assets? 2e

- 3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) 3a

- b Do you have a section 403(b) annuity plan for your employees? 3b

- c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? 3c

- 4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? 4a

- b Do you provide credit counseling, debt management, credit repair, or debt negotiation services? 4b

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ►
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☒ An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33½% 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). (Also complete the **Support Schedule** in Part IV-A.)

- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ☐ Type 1 ☐ Type 2 ☐ Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.****Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	189,105,435	158,002,945	141,072,410	130,128,777	618,309,566
16 Membership fees received	0	0	0	0	0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	2,333,677	1,418,447	1,234,759	965,563	5,952,445
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	659,603	473,144	283,350	380,240	1,796,338
19 Net income from unrelated business activities not included in line 18.	373,631	0	272,344	264,989	910,964
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	30,142	5,300	33,013	60,940	129,394
23 Total of lines 15 through 22	192,502,487	159,899,836	142,895,876	131,800,509	627,098,708
24 Line 23 minus line 17	190,168,810	158,481,389	141,661,117	130,834,946	621,146,262
25 Enter 1% of line 23	1,925,025	1,598,998	1,428,959	1,318,005	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c
d Add: Amounts from column (e) for lines:					
18 _____ 19 _____					
22 _____ 26b _____					26d
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:					
(2004) _____ (2003) _____ (2002) _____ (2001) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:					
(2004) _____ (2003) _____ (2002) _____ (2001) _____					
c Add: Amounts from column (e) for lines:					
15 <u>618,309,567</u> 16 _____					
17 <u>5,952,446</u> 20 _____ 21 _____					27c 624,262,013
d Add: Line 27a total, _____ and line 27b total, _____					27d 0
e Public support (line 27c total minus line 27d total)					27e 624,262,013
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)	27f 627,098,708				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 100 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 0 %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V**Private School Questionnaire** (See page 7 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	31	
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

 Check ☐ **a** if the organization belongs to an affiliated group. Check ☐ **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is—		
	The lobbying nontaxable amount is—		
	Not over \$500,000 20% of the amount on line 40		
	Over \$500,000 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 \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41).	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

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 instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		✓	
b Paid staff or management (Include compensation in expenses reported on lines c through h.)		✓	
c Media advertisements		✓	
d Mailings to members, legislators, or the public		✓	
e Publications, or published or broadcast statements		✓	
f Grants to other organizations for lobbying purposes		✓	
g Direct contact with legislators, their staffs, government officials, or a legislative body		✓	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		✓	
i Total lobbying expenditures (Add lines c through h.)			0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? _____

- | | | Yes | No |
|---|--|--------|----|
| a | Transfers from the reporting organization to a noncharitable exempt organization of: | | |
| | (i) Cash | 51a(i) | ✓ |
| | (ii) Other assets | a(ii) | ✓ |
| b | Other transactions: | | |
| | (i) Sales or exchanges of assets with a noncharitable exempt organization | b(i) | ✓ |
| | (ii) Purchases of assets from a noncharitable exempt organization | b(ii) | ✓ |
| | (iii) Rental of facilities, equipment, or other assets | b(iii) | ✓ |
| | (iv) Reimbursement arrangements | b(iv) | ✓ |
| | (v) Loans or loan guarantees | b(v) | ✓ |
| | (vi) Performance of services or membership or fundraising solicitations | b(vi) | ✓ |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | c | ✓ |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: | | |

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule:

Schedule A (Form 990 or 990-EZ) 2005

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2005

Name of organization

Christian Children's Fund, Inc.

Employer identification number

54 : 0536100

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** 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

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule—see instructions.)

General Rule—

- ☐ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules—

- ☒ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33⅓% support test under Regulations sections 1.509(a)-3/1.170A-9(e) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
Christian Children's Fund, Inc.

Employer identification number
54 0536100

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ChildFund Australia Level 8, 162 Goulburn Street Sydney, NSW 2000 Australia	\$ 11,749,619	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	CCF Kinderhilfswerk e.v. Postfach 1105 D-72601 Nurtigen Germany	\$ 7,024,698	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	ChildFund New Zealand, Ltd. P.O. Box 105630 Auckland City 1030, New Zealand	\$ 5,550,662	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	Taiwan Fund for Children and Families P.O. Box 65-65 Taichuna 403 Taiwan	\$ 6,045,235	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	US Agency for International Development Ronald Reagan Building Washington, DC 20523-0016	\$ 7,421,148	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization
Christian Children's Fund, Inc.

Employer identification number
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Part II Noncash Property (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Not Applicable		
		\$	/ /
(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
		\$	/ /
(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
		\$	/ /

Name of organization

Christian Children's Fund, Inc.

Employer identification number

54 : 0536100

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (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 information once—see instructions.) ▶ \$ not applicable

(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 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 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 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

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Part 1, Line 8 Gain/loss from sales of assets other than inventory

<u>Noninventory items</u>		<u>Asset Description</u>	<u>Acq Date</u>	<u>Date Sold</u>	<u>Recipient</u>
Disposal @ cost - FA000560	5,494.47	Brazil Xerox Machine	2/3/2003	11/2/2005	unknown
Accum Deprec. On Disposals	3,649.01				
NBV	1,845.46				
Sales Price	0.00				
Gain (loss) on sale	<u>(1,845.46)</u>				
Disposal @ cost - FA000318	28,941.36	Gambia Toyota Land Cruiser	1/31/2000	11/15/2005	unknown
Accum Deprec. On Disposals	28,941.36				
NBV	0.00				
Sales Price	7,092.20				
Gain (loss) on sale	<u>7,092.20</u>				
Disposal @ cost - FA000217	5,263.16	Gambia Photocopier	11/20/1992	11/15/2005	unknown
Accum Deprec. On Disposals	5,263.16				
NBV	0.00				
Sales Price					
Gain (loss) on sale	<u>0.00</u>				
Disposal @ cost - FA00334	18,000.00	Ecuador Jeep Vitara	9/30/1999	11/30/2005	unknown
Accum Deprec. On Disposals	18,000.00				
NBV	0.00				
Sales Price					
Gain (loss) on sale	<u>0.00</u>				
Disposal @ cost - FA000620	2,484.01	Kenya Corel Software	6/30/2003	11/5/2005	unknown
Accum Deprec. On Disposals	1,878.43				
NBV	605.58				
Sales Price	932.45				
Gain (loss) on sale	<u>326.87</u>				
Disposal @ cost --FA001031	1,701.28	South Africa Laptop	11/30/2003	12/5/2005	stolen
Accum Deprec. On Disposals	1,086.97				
NBV	614.31				
Sales Price	0.00				
AR from Insurance Company	614.31				
Gain (loss) on sale	<u>0.00</u>				

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Part 1, Line 8 Gain/loss from sales of assets other than inventory - *continued*

		<u>Asset Description</u>	<u>Acq Date</u>	<u>Date Sold</u>	<u>Recipient</u>
Disposal @ cost - FA000282	5,618.73	Guatemala Switchboard	3/30/1996	1/19/2006	unknown
Accum Deprec. On Disposals	5,618.73				
NBV	0.00				
Sales Price	0.00				
Gain (loss) on sale	0.00				
Disposal @ cost - FA000277	71,000.00	Honduras Radio	10/22/1993	1/15/2006	unknown
Accum Deprec. On Disposals	71,000.00	CommunicationSystem			
NBV	0.00				
Sales Price					
Gain (loss) on sale	0.00				
Disposal @ cost - FA000373	6,067.17	Philippines LCD Projecto	10/31/2000	6/24/2005	Thrown out
Accum Deprec. On Disposals	6,067.17				
NBV	0.00				
Sales Price					
Gain (loss) on sale	0.00				
Disposal @ cost - FA001259	47,772.95	Honduras Isuzu Trooper	12/8/1998	2/15/2006	unknown
Accum Deprec. On Disposals	47,772.95				
NBV	0.00				
Sales Price	4,222.75				
Gain (loss) on sale	4,222.75				
Disposal @ cost - FA000284	10,178.55	IO Building System	12/23/1992	2/15/2006	Thrown out
Accum Deprec. On Disposals	10,178.55	battery			
NBV	0.00				
Proceeds	0.00				
Gain (loss) on sale	0.00				
Disposal @ cost - FA000518	21,828.91	Geneva Toyota Rava	3/31/2002	2/13/2006	*
Accum Deprec. On Disposals	21,828.91				
NBV	0.00				
Sales Price	12,487.04				*Jaussi Automobiles SA in Geneva
Gain (loss) on sale	12,487.04				
Disposal @ cost - FA000354	37,559.02	Guatemala Chevrolet	11/30/2000	4/1/0006	unknown
Accum Deprec. On Disposals	37,559.02	Suburban			
NBV	0.00				
Sales Price	7,864.33				
Gain (loss) on sale	7,864.33				

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Part 1, Line 8 Gain/loss from sales of assets other than inventory - *continued*

		<u>Asset Description</u>	<u>Acq Date</u>	<u>Date Sold</u>	<u>Recipient</u>
Disposal @ cost - FA000358	27,950.36	Mexico Van G-Express	5/31/2000	4/1/2006	unknown
Accum Deprec. On Disposals	<u>27,950.36</u>				
NBV	<u>0.00</u>				
Sales Price	<u>10,869.57</u>				
Gain (loss) on sale	<u>10,869.57</u>				
Disposal @ cost - FA000810	3,965.27	Angola Radio	1/1/2004	6/15/2006	unknown
Accum Deprec. On Disposals	<u>3,194.26</u>				
NBV	<u>771.01</u>				
Sales Price	<u>1,622.52</u>				
Gain (loss) on sale	<u>851.51</u>				
Disposal @ cost - FA000836	19,891.31	Angola Toyota Hilux	1/31/2004	6/15/2006	unknown
Accum Deprec. On Disposals	<u>16,023.57</u>				
NBV	<u>3,867.74</u>				
Sales Price	<u>16,405.44</u>				
Gain (loss) on sale	<u>12,537.70</u>				
Disposal @ cost - FA000831	2,524.58	Angola Motorcycle	11/30/2003	6/15/2006	unknown
Accum Deprec. On Disposals	<u>2,524.58</u>				
NBV	<u>0.00</u>				
Sales Price	<u>0.00</u>				
Gain (loss) on sale	<u>0.00</u>				
Total Fixed Assets Gain	<u><u>\$ 54,406</u></u>				

Publicly traded securities

Realized gain on investments 848,165

FIXED ASSETS	\$ 54,406
SECURITIES	<u>848,165</u>
Line 8d	<u><u>\$902,571</u></u>

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Part 1, Line 20 Other changes in net assets or fund balances

Unrealized gain on investments	2,350,458
Minimum pension liability adjustment	478,712
	<u>2,829,170</u>

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Part II, Line 22 Grants and allocations

BY ACTIVITY CLASS

To CCF's global projects:

Basic Education	13,346,219
Health and Sanitation	9,157,257
Nutrition	2,790,143
Early Childhood Development	4,001,687
Micro Enterprise	4,357,998
Emergencies	4,651,063

Total Grants & Allocations	38,304,367
cash \$38,304,367 noncash \$0	

BY RECIPIENT AND COUNTRY

To CCF's various programs in:

Afghanistan	5,626,981
Albania	359,393
Angola	937,868
Belarus	234,301
Bolivia	76,031
Brazil	158,029
Chad	966,409
Dominica	238,485
Ecuador	299,648
Ethiopia	844,819
The Gambia	483,032
Guatemala	2,695,291
Guinea	93,662
Honduras	500,509
India	608,557
Indonesia	1,914,324
Kenya	2,439,816
Liberia	3,405,234
Mexico	194,482
Philippines	834,748
Senegal	1,173,315
Serbia	109,159
Sierra Leone	1,408,080
Sri Lanka	3,337,104
Thailand	359,025
Timor-Leste	180,814
Uganda	2,834,985
Ukraine	1,356,986
Zambia	1,030,311

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Part II, Line 22 Grants and allocations - *continued*

To CCF's various programs - continued :

USA	486,306
Multi-country	1,571,604
Total CCF programs	36,759,310

To Sub-grantees on CCF projects:

<u>Recipient</u>	<u>Amount</u>	<u>Purpose</u>
Hawaii Pediatric Resource and Education Foundation 1319 Punaker St. #742 Honolulu, Hawaii 86826	100,000.00	Early childhood devt.
Arab Resources Collective PO Box 27380 Nicosia, Cyprus 1644	170,000.00	Early childhood devt.
CINDE CRA 33 No 91-50 Barrio la Castellano Bogota, Colombia	31,725.00	Early childhood devt.
UNESCO Quadra 5 Bloco H Lote 6 70.070.914 Brazilia DF Brazil	60,000.00	Early childhood devt.
Save the Children 54 Wilton Road, PO Box 900 Westport, CT 06880	624,349.00	Emergencies
International Rescue Committee 122 East 42nd St New York, NY 10168	503,487.52	Emergencies
K-Rep Development Agency PO Box 10528-00100 Nairobi, Kenya	26,565.60	Health & microcredit
Pathfinder International 9 Galen St., Ste. 217 Watertown, MA 02472	28,930.00	Health & microcredit
	1,545,057.12	
Total CCF programs	36,759,310	
Total Sub-grantees	1,545,057	
Total Grants & Allocations	38,304,367	

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Part II, Line 23 Specific assistance to individuals
--

SPECIFIC ASSISTANCE TO INDIVIDUALS

Basic Education	34,315,250
Health and Sanitation	23,544,774
Nutrition	7,173,892
Early Childhood Development	10,288,983
Micro Enterprise	11,205,113
Emergencies	<u>11,958,618</u>
Specific Assistance to Individuals	<u><u>98,486,630</u></u>

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Part II, Line 42 Depreciation, depletion, etc.

	<u>Total</u>	<u>Rental Units*</u>	<u>Net</u>
Depreciation expense - buildings	458,532	(429.00)	458,103
Depr. exp. - furniture, equipment and vehicles	2,922,166	(1,621.00)	2,920,545
	<u>3,380,698</u>	<u>(2,050)</u>	<u>3,378,648</u>

* Included in line 6b, Part I

Depreciation is recorded on a straight-line basis over the estimated useful lives of the assets. Buildings

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Part III, Line e Other program services

	Program Service Expense	Grants and Allocations
Nutrition	12,399,581	2,790,143
Early Childhood Development	17,783,794	4,001,687
	<u>30,183,375</u>	<u>6,791,830</u>

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Part IV, Line 50 Receivables from officers, directors, trustees, and key employees

Borrower	Original Amount	Balance Due End of Year	Date of Note	Maturity Date
John F. Schultz President	\$20,000	\$0 (fully repaid)	4-May-05	4-Nov-05
Repayment Terms	Interest Rate	Security Provided	Purpose of Loan	Description and FMV
Lump-sum	3.51%	None	Major Medical	Cash - \$20,000

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Part IV, Line 54 Investments--securities

Market values at year end:

	2006	2005
Cash and cash equivalents	941,477	1,799,177
Real estate investment trust	799,408	473,941
Bonds-other	10,388	10,226
Common stock	9,361,719	8,827,947
U.S. Government obligations	7,547,458	5,746,716
Mutual funds	18,308,557	14,925,772
Total	<u>36,969,007</u>	<u>31,783,779</u>

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Part IV, Line 57 Land, buildings, and equipment
--

	<u>Cost</u>	<u>Accum. Depr.</u>	<u>Book Value</u>
Land	1,180,378		1,180,378
Buildings	14,564,057	(4,921,453)	9,642,604
Furniture, Fixtures and Equipment	15,074,382	(8,909,823)	6,164,559
Construction in Progress	257,644		257,644
Total	<u>31,076,461</u>	<u>(13,831,276)</u>	<u>17,245,185</u>

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Part IV, Line 64 b Mortgages and other notes payable

Lender	Original Amount	Balance Due End of Year	Date of Note	Maturity Date
Wachovia Bank NA	\$6M	\$1,460,000	1/13/2004	28-Feb-07

Repayment Terms	Interest Rate	Security Provided	Purpose of Loan	Description and FMV
Monthly interest Lump-sum principal	LIBOR + 90	Deed of Trust on Richmond office bldg., land, equipt.	Working funds	cash - \$1,460,000

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Part V-A Current Officers, Directors, Trustees and Key Employees

(A) <u>Name and address</u>	(B) <u>Title, hours</u>	(C) <u>Compensation</u>	(D) <u>Benefits</u>	(E) <u>Exp. account</u>
all can be reached at: P.O. Box 26484 Richmond, VA 23261-6484				
John Schultz	President, 40+	274,276	16,523	0
Daniel Wordsworth	VP, 40+	107,994	11,264	0
Dula James	VP, 40+	27,455	2,525	0
Betty Forbes	VP, 40+	164,602	21,294	0
Cheri Dahl	VP, 40+	156,069	15,935	0
Michelle Poulton	VP, 40+	157,793	13,615	0
William Corcoran	VP, 40+	126,100	19,248	0
William Hopkins	Director, 40+	107,994	20,046	0
Charles Tysinger	VP, 40+	216,880	10,113	0
Arthur Abercrombie	Interim CFO, 40	115,364	0	0
Board members participate in four two-day meetings per year:				
Ann C. Crouter	Board Chair	0	0	0
William E. Leahey, Jr.	1st Vice-Chair, Acting CEO	0	0	0
Steven A. Markel	2nd Vice-Chair	0	0	0
Charles M. Caravati, Jr.	Board Secretary	0	0	0
Lewis T. Booker	Board Treasurer	0	0	0
Jesús M. Amadeo	Board Member	0	0	0
A. Scott Andrews	Board Member	0	0	0
Jenny Taylor Bond	*	0	0	0
Lisa Blunt-Bradley	Board Member	0	0	0
Austin Brockenbrough, III	*	0	0	0
Lisa Collis	Board Member	0	0	0
Glenn Davidson	Board Member	0	0	0
Edmund T. DeJarnette, Jr.	Board Member	0	0	0
Maureen Denlea	Board Member	0	0	0
Lynne Vernon-Feagans	Board Member	0	0	0
Roger L. Gregory	Board Member	0	0	0
Karen Hein	Board Member	0	0	0
Stephen F. Keller	Board Member	0	0	0
Andrew A. Lasser	Board Member	0	0	0
Patrick R. Liverpool	Board Member	0	0	0
Velma McBride Murry	Board Member	0	0	0
Robert Fillmore Norfleet, Jr.	Board Member	0	0	0
John C. Purnell, Jr.	Board Member	0	0	0
Masood Z. Rehmani	Board Member	0	0	0
Thomas A. Siegfried	Board Member	0	0	0
Peter J. Tanous	Board Member	0	0	0
Louis B. Weeks	Board Member	0	0	0

*Member-at-Large, Exec. Committee

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Part VI, Line 90a States with which 990 is filed

Alabama	Nebraska
Alaska	New Hampshire
Arizona	New Jersey
Arkansas	New Mexico
California	New York
Colorado	North Carolina
Connecticut	North Dakota
Florida	Ohio
Georgia	Oklahoma
Hawaii	Oregon
Illinois	Pennsylvania
Indiana	Rhode Island
Kansas	South Carolina
Kentucky	South Dakota
Louisiana	Tennessee
Maine	Texas
Maryland	Utah
Massachusetts	Virginia
Michigan	Washington
Minnesota	West Virginia
Mississippi	Wisconsin

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Part VI, Line 91 b Foreign countries in which organization had a financial account

Afghanistan	Kenya
Albania	Liberia
Angola	Mexico
Belarus	Moldova
Bolivia	Mozambique
Brazil	Philippines
Chad	Senegal
Dominica	Serbia
Ecuador	Sierra Leone
England	South Africa
Ethiopia	Sri Lanka
The Gambia	St. Vincent
Guatemala	Thailand
Guinea	Timor-Leste
Honduras	Uganda
India	Ukraine
Indonesia	Zambia
Bolivia	Mozambique
Brazil	Philippines
Chad	Senegal
Dominica/St. Vincent	Sierra Leone
Ecuador	South Africa
Ethiopia	Sri Lanka
The Gambia	Thailand
Guatemala	Timor-Leste
Guinea	Uganda
Honduras	Ukraine
India	Zambia

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Schedule A, Part III, Line 2b

See Part IV, Line 50, of Form 990

Schedule A, Part III, Line 2d

See Part V-A of Form 990