

**Return of Organization Exempt From Income Tax**

**2005**

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

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 Jul 1, 2005, and ending Jun 30, 2006**

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

**C Name of organization**  
**Marin Advocates for Children**  
 Number and street (or P.O. box if mail is not delivered to street addr) Room/suite  
**30 North San Pedro Road 275**  
 City, town or country State ZIP code + 4  
**San Rafael CA 94903**

**D Employer Identification Number**  
**68-0170143**

**E Telephone number**  
**(415) 507-9016**

**F Accounting method:**  Cash  Accrual  
 Other (specify) ▶

**G Web site:** ▶ **www.marinadvocates.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.**

**L Gross receipts:** Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **731,150.**

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

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See Instructions)

<b>1 Contributions, gifts, grants, and similar amounts received:</b>			
<b>a</b> Direct public support	<b>1 a</b>	<b>315,227.</b>	
<b>b</b> Indirect public support	<b>1 b</b>		
<b>c</b> Government contributions (grants)	<b>1 c</b>	<b>90,745.</b>	
<b>d Total</b> (add lines 1a through 1c) (cash \$ <b>405,972.</b> noncash \$ <b>0.</b> )	<b>1 d</b>		<b>405,972.</b>
<b>2 Program service revenue</b> including government fees and contracts (from Part VII, line 93)	<b>2</b>		
<b>3 Membership dues and assessments</b>	<b>3</b>		
<b>4 Interest on savings and temporary cash investments</b>	<b>4</b>		<b>282.</b>
<b>5 Dividends and interest from securities</b>	<b>5</b>		<b>3,638.</b>
<b>6a Gross rents</b>	<b>6 a</b>		
<b>b Less: rental expenses</b>	<b>6 b</b>		
<b>c Net rental income or (loss)</b> (subtract line 6b from line 6a)	<b>6 c</b>		
<b>7 Other investment income</b> (describe <b>Realized gain</b> )	<b>7</b>		<b>978.</b>
<b>8a Gross amount from sales of assets other than inventory</b>	(A) Securities	(B) Other	
	<b>8 a</b>		
<b>b Less: cost or other basis and sales expenses</b>	<b>8 b</b>		
<b>c Gain or (loss)</b> (attach schedule)	<b>8 c</b>		
<b>d Net gain or (loss)</b> (combine line 8c, columns (A) and (B))	<b>8 d</b>		
<b>9 Special events and activities</b> (attach schedule). If any amount is from <b>gaming</b> , check here <input type="checkbox"/>			
<b>a Gross revenue</b> (not including \$ <b>0.</b> of contributions reported on line 1a)	<b>9 a</b>	<b>314,308.</b>	
<b>b Less: direct expenses other than fundraising expenses</b>	<b>9 b</b>	<b>168,303.</b>	
<b>c Net income or (loss)</b> from special events (subtract line 9b from line 9a)	<b>9 c</b>		<b>146,005.</b>
			<i>See L-9 Stmt</i>
<b>10a Gross sales of inventory, less returns and allowances</b>	<b>10 a</b>		
<b>b Less: cost of goods sold</b>	<b>10 b</b>		
<b>c Gross profit or (loss)</b> from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10 c</b>		
<b>11 Other revenue</b> (from Part VII, line 103)	<b>11</b>		<b>5,972.</b>
<b>12 Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>		<b>562,847.</b>
<b>13 Program services</b> (from line 44, column (B))	<b>13</b>		<b>511,918.</b>
<b>14 Management and general</b> (from line 44, column (C))	<b>14</b>		<b>56,882.</b>
<b>15 Fundraising</b> (from line 44, column (D))	<b>15</b>		<b>0.</b>
<b>16 Payments to affiliates</b> (attach schedule)	<b>16</b>		
<b>17 Total expenses</b> (add lines 16 and 44, column (A))	<b>17</b>		<b>568,800.</b>
<b>18 Excess or (deficit)</b> for the year (subtract line 17 from line 12)	<b>18</b>		<b>-5,953.</b>
<b>19 Net assets or fund balances</b> at beginning of year (from line 73, column (A))	<b>19</b>		<b>174,739.</b>
<b>20 Other changes in net assets or fund balances</b> (attach explanation)	<b>20</b>		
<b>21 Net assets or fund balances</b> at end of year (combine lines 18, 19, and 20)	<b>21</b>		<b>168,786.</b>

**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.

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 (att sch) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/> .....	22				
23 Specific assistance to individuals (att sch) .....	23				
24 Benefits paid to or for members (att sch) .....	24				
25 Compensation of officers, directors, etc .....	25	83,403.	75,063.	8,340.	0.
26 Other salaries and wages .....	26	263,023.	236,720.	26,303.	0.
27 Pension plan contributions .....	27				
28 Other employee benefits .....	28	29,439.	26,495.	2,944.	0.
29 Payroll taxes .....	29	28,549.	25,694.	2,855.	0.
30 Professional fundraising fees .....	30				
31 Accounting fees .....	31				
32 Legal fees .....	32				
33 Supplies .....	33	7,670.	6,903.	767.	0.
34 Telephone .....	34	6,702.	6,032.	670.	0.
35 Postage and shipping .....	35	2,619.	2,357.	262.	0.
36 Occupancy .....	36	77,477.	69,729.	7,748.	0.
37 Equipment rental and maintenance .....	37	3,665.	3,298.	367.	0.
38 Printing and publications .....	38	2,227.	2,004.	223.	0.
39 Travel .....	39				
40 Conferences, conventions, and meetings .....	40	3,904.	3,514.	390.	0.
41 Interest .....	41				
42 Depreciation, depletion, etc (attach schedule) .....	42	3,472.	3,125.	347.	0.
43 Other expenses not covered above (itemize):					
a Board/staff/volunteer training	43a	5,135.	4,621.	514.	0.
b Community/public relations	43b	7,749.	6,974.	775.	0.
c Dues and subscriptions	43c	1,573.	1,416.	157.	0.
d Insurance	43d	11,817.	10,635.	1,182.	0.
e Miscellaneous	43e	22,581.	20,323.	2,258.	0.
f Professional services	43f	7,795.	7,015.	780.	0.
g	43g				
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15) .....	44	568,800.	511,918.	56,882.	0.

**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 \$ \_\_\_\_\_

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Part III Statement of Program Service Accomplishments

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>TO TRAIN ADVOCATES FOR COURT DEPENDENT CHILDREN</u> 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.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a <u>Marin Advocates for Children is the independent voice for victims of child abuse and neglect, and the leading agency for the prevention of child abuse in the community through its programs, the Court Appointed Special Advocates and the Child Abuse Prevention Council.</u> ----- ----- ----- (Grants and allocations \$ 0. ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	511,918.
b ----- ----- ----- (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
c ----- ----- ----- (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
d ----- ----- ----- (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
e Other program services ..... (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) ..... ▶	511,918.

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