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 2006

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For t	he 2006 calend	lar year, o	r tax year beginning	, 2006,	and e	ending		,				
В	Check	ıf applicable		С				D Emp	D Employer Identification Number				
	Ad	Idress change	Please use IRS label	TOUCHSTONE YOUTH RI	ESOURCE SERVICE	S,	INC.	62	-1316	818			
	Na	ame change	or print or type.	P.O. BOX 159231	- 0001			E Teles	ohone num	iber			
	[] In	itial return	See specific	NASHVILLE, IN 3/21:	NASHVILLE, TN 37215-9231								
	F	nal return	instruc- tions					F Acco	ounting od:	Cash X	Accrual		
	∏ Ar	nended return							Other (spec	cify) ►			
	☐ Ap	plication pending	Section	on 501(c)(3) organizations and	4947(a)(1) nonexempt		H and I are not appli	cable to se	ction 527 c	organizations			
				table trusts must attach a comp i 990 or 990-EZ).	oleted Schedule A		H (a) Is this a grou			? Yes	X No		
G	Wah	site: ► N/A	(1 0111	, 330 C. 330 EE).			H (b) If 'Yes,' enter			-	гп		
<u>u</u>							H (c) Are all affilia (If 'No,' atta			Yes	∐ No		
J		nization type k only one)	▶	X 501(c) 3 ◀ (insert no	4947(a)(1) or	527	H (d) Is this a sep			•			
<u></u>	K Check here ► If the organization is not a 509(a)(3) supporting organization and its						organization				X No		
• •	gross	receipts are	normally r	not more than \$25,000. A return	n is not required, but if		I Group Ex	emption	Number				
	orga	nization choos	es to file a	a return, be sure to file a comp	lete return.					ion is not require	ed		
L	Gross	s receipts. Add	d lines 6b,	8b, 9b, and 10b to line 12 🟲 5	94,819.		to attach Sc	hedule B (Form 990,	990-EZ, or 990-P	F)		
Pa	rt I	Revenue	e, Expei	nses, and Changes in No	et Assets or Fund	Bala	nces (See th	e instr	ruction	s.)			
	1	Contributions	, gifts, gra	ants, and similar amounts recei	ved:	,							
	a	Contributions	to donor	advised funds	•	12							
				not included on line 1a)		11	78	<u>,703.</u>					
		•	• • •	(not included on line 1a)		10	+						
	d			ons (grants) (not included on lin		10	<u> </u>						
				78,703. noncash)			1 e		<u>, 703.</u>		
				ue including government fees a	and contracts (from Pari	t VII,	line 93)		2	15	<u>, 333.</u>		
	3			assessments					3				
	4			Reference to destrict the streets					4				
		5 Dividends and interest from securities						5					
	6a Gross rents 9 JUL 3 0 2007 0 6a 6b												
	0	Not contains	xperises	oss). Subtract-line-6b-from ine	62	01	<u>'l – </u>		6c				
	7	Other investo		OGDEN, UT	va			,	7				
REVENUE	,		1		(A) Securities	T .	(B) Othe	/_ :r					
Ě	8a	Gross amoun than inventor		es of assets other	<u> </u>	88							
ÿ	b		-	is and sales expenses		81							
_		Gain or (loss) (a				80	:						
	d	Net gain or (I	oss). Com	bine line 8c, columns (A) and	(B)				8d				
	9	Special event	ts and act	ivities (attach schedule) If any	amount is from gaming	, che	ck here ►						
	а	Gross revenu		luding \$	of contributions		1						
		reported on li	•			92							
				other than fundraising expense		91	0						
			• /	om special events. Subtract line		ا مو	.1	783.	9c				
				y, less returns and allowances		10 a	 	289.					
		Less cost of	_		rant line 10h from line 10a	101	STATEM		10 c		494.		
	11			les of inventory (attach schedule). Subt art VII, line 103)	ract line 100 from fine 10a		JIRILM	5141 1	11		777.		
	12		-	es 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1	10c and 11				12	94	,530.		
	13			n line 44, column (B))	Too, and Th				13		,558.		
EXPENSES	14	-		ral (from line 44, column (C))					14		,526.		
E	15		•	44, column (D))					15		,550.		
Š	16	• .		(attach schedule)					16				
S	17	Total expense	es. Add lir	nes 16 and 44, column (A)					17	109	,634.		
	18			he year. Subtract line 17 from	line 12				18	-15	,104.		
AS NSE T	19			inces at beginning of year (from					19	31,	,187.		
N S E E T T	20	Other change	s in net a	ssets or fund balances (attach	explanation).				20				
. s	21	Net assets or	fund bala	inces at end of year. Combine	lines 18, 19, and 20		· <u>-</u>		21	16,	,083.		
BA	A Fo	Privacy Act a	nd Paper	work Reduction Act Notice, see	e the separate instruction	ns.	٦	EEA0109L	01/22/07	7 Form 99	0 (2006)		

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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.

	nclude amounts reported on line 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program	(C) Management and general	(D) Fundraising
	s paid from donor advised			services	and general	
	(attach sch)					
(cash	\$					
non-c	ash \$)					
foreig	amount includes n grants, check here ►	22 a				
-	rants and allocations (att sch)					
(cash non-c	· · · · · · · · · · · · · · · · · · ·					
	amount includes n grants, check here	22 b				
	fic assistance to individuals h schedule) ST 2	23	685.	685.		
	its paid to or for members h schedule)	24				,
25 a Comp	ensation of current officers,					
directi Part V	ors, key employees, etc listed in 7-A (attach sch) SEE STMT 3	25 a	61,816.	38,636.	9,272.	13,908.
	ensation of former officers,					
Part \	ors, key employees, etc listed in /-B (attach sch)	25 Ь	0.	0.	0.	0.
c Comper included	nsation and other distributions, not d above, to disqualified persons (as					
defined	under section 4958(f)(1)) and persons ed in section 4958(c)(3)(B)					
(attach	schedule)	25 c	0.	0.	0.	0.
	es and wages of employees not ed on lines 25a, b, and c	26	4,140.		4,140.	
	on plan contributions not ed on lines 25a, b, and c	27				
28 Emple	byee benefits not included on					
lines 2	25a · 27	28	6,750.	4,219.	1,012.	1,519.
_	II taxes	29	6,331.	3,735.	1,266.	1,330.
	ssional fundraising fees	30				
	inting fees	31	1,114.		1,114.	
32 Legal		32				
33 Suppl		33				
34 Telepi		34	952.	562.	190.	200
35 Posta 36 Occur	ge and shipping	35 36	10,513.	6,203.	2,102.	200. 2,208.
	ment rental and maintenance	37	10,313.	0,203.	2,102.	2,200.
	ng and publications	38	1,132.	668.	226.	238.
39 Travel	- ·	39	3,359.	3,359.		
	nces, conventions, and meetings	40				
41 Intere	st	41			·	
42 Depreci	ation, depletion, etc (attach schedule)	42	3,377.	2,841.	261.	275.
	xpenses not covered above (itemize)					
a <u>SEE</u>	STATEMENT 4	43a	9,465.	5,650.	1,943.	1,872.
b		43 Ь				
c		43 c	·			
d		43 d				
e – – –		43e				
<u>-</u>		43 f				
g		43 g				
	unctional expenses Add lines 22a 43g (Organizations completing columns), carry these totals to lines 13 - 15)	44	109,634.	66,558.	21,526.	21,550.
	. Check I If you are following S					. — . —
	at costs from a combined educational			•	=	► Yes X No
If 'Yes,' ente	er (i) the aggregate amount of these		osts \$ <u> </u>		nount allocated to Progr , and (iv) the	
to Fundraisi		ocated			, and (IV) the	amount anocated

Form 990 (2006) TOUCHS	STONE YOUTH RESOURC	CE SERVICES,	INC.	62-13	16818	Page :
Part III Statement of	Program Service Acco	mplishments				
organization. How the public	blic inspection and, for some p perceives an organization in s is complete and accurate and	such cases mav be	determined by the infor	mation presented or	its return. The	erefore,
	tibe their exempt purpose achies ssued, etc. Discuss achieveme exempt charitable trusts must a		TRY/COUNSELING rand concise manner. Seasurable (Section 501) unt of grants and allocations.	State the number of (c)(3) and (4) organons to others.)	Program Service (Required for 50 (4) organizate 4947(a)(1) to optional for	e Expenses O1(c)(3) and lions and lusts, but others)
a SEE STATEMENT	5					
(Grants and allocations	.) If this amour	t includes foreign grants	, check here	6	6,558.
(Grants and allocations	\$) If this amoun	t includes foreign grants	, check here ►		
c	·) If this amoun	t includes foreign grants	, check here		
d			<u></u>			

) If this amount includes foreign grants, check here

) If this amount includes foreign grants, check here

66,558.

Form 990 (2006)

(Grants and allocations

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

e Other program services (Grants and allocations

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ED.	-4 11/	Dolongo Charte (Can the materiations)		- 				
1	rt IV	Balance Sheets (See the instructions.)	. <u> </u>			<u> </u>		
Not		Vhere required, attached schedules and amounts within olumn should be for end-of-year amounts only	the des	cription		(A) Beginning of year		(B) End of year
	45	Cash non-interest-bearing				572.	45	3,269.
	46	Savings and temporary cash investments			46			
	47 a	Accounts receivable	47 a					
	ь	Less. allowance for doubtful accounts	47 Ь				47 c	
	1							
	48a	Pledges receivable	48a					
	Ь	Less. allowance for doubtful accounts	48 ь	. <u></u>			48 c	
	49	Grants receivable					49	
	50 a	Receivables from current and former officers, director employees (attach schedule)	s, truste	es, and k	еу	12,788.	50 a	693.
Δ	ь	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)					50 Ь	
A S E T	51 a	Other notes and loans receivable (attach schedule)	51 a					
Ś	b	Less: allowance for doubtful accounts	51 b		<u> </u>		51 c	
	52	Inventories for sale or use.				5,611.	52	5,322.
	53	Prepaid expenses and deferred charges					53	
		Investments — publicly-traded securities	•	Cost	⊢FMV		54a	
		Investments - other securities (attach sch)	► 	Cost	FMV		54b	
	55 a	Investments — land, buildings, & equipment, basis.	55 a					
	ь	Less. accumulated depreciation (attach schedule)	55 b				55 c	
		Investments - other (attach schedule).					56	
	57a	Land, buildings, and equipment. basis	57 a		19,044.	{		
	ь	Less accumulated depreciation (attach schedule) STATEMENT 6	57 b		17,110.	2,901.	57 c	1,934.
	58						}	
		(describe ► SEE STATEMENT 7)	9,315.	58	7,245.
	59	Total assets (must equal line 74) Add lines 45 through	h 58			31,187.	59	18,463.
	60	Accounts payable and accrued expenses					60	2,380.
	61	Grants payable					61	
Ĭ	62	Deferred revenue					62	
A B I L		Loans from officers, directors, trustees, and key employees (attach schedule)					63	
Ţ	į	Tax-exempt bond liabilities (attach schedule)					64a	
E S	ļ	Mortgages and other notes payable (attach schedule)					64b	·
5	I	Other liabilities (describe			⁾	<u> </u>	65	2 200
	66	Total liabilities. Add lines 60 through 65		1-1-1	<i>C</i> 7	0.	66	2,380.
N F	Urga	nizations that follow SFAS 117, check here ► at through 69 and lines 73 and 74	na comp	lete lines	6/			
	67	Unrestricted					67	
Ş	68	Temporarily restricted					68	
ASSETS	69	Permanently restricted					69	
		nizations that do not follow SFAS 117, check here ►	X ar	nd comple	te lines		"	
R	",	70 through 74.	۳۰ ت					
FUZ0	70	Capital stock, trust principal, or current funds					70	
	71	Paid-in or capital surplus, or land, building, and equip	ment fun	nd			71	·-··
¥	72	Retained earnings, endowment, accumulated income,				31,187.	72	16,083.
日々上々玄いいの	73	Total net assets or fund balances. Add lines 67 through	h 69 or 1	lines 70 H	rough			
Ë		72. (Column (A) must equal line 19 and column (B) m	ust equa	I line 21)	oug.,	31,187.	73	16,083.
	74	Total liabilities and net assets/fund balances. Add line	s 66 and	1 73		31,187.	74	18,463.

Form 990 (2006) TOUCHSTONE YOUTH RESOURCE SERVICES, INC. 62-1316818 Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See the

instructions.)	<u> </u>		
Total revenue, gains, and other support per audited financial statement			N1 / A
Amounts included on line a but not on Part I, line 12	.z	a	N/A
Net unrealized gains on investments	61		
Donated services and use of facilities	b2		
Recoveries of prior year grants	b3		
Other (specify).			
	<u>_b4</u>		
Add lines b1 through b4		b	
Subtract line b from line a		c	
Amounts included on Part I, line 12, but not on line a:	1		
Investment expenses not included on Part I, line 6b	d1		
Other (specify).			
	d2		
Add lines d1 and d2		d	
Total revenue (Part I, line 12) Add lines c and d		<u></u> • e	
			
IV-B Reconciliation of Expenses per Audited Financia	al Statements with Expe	nses per Return	
	al Statements with Expe	nses per Return	
Total expenses and losses per audited financial	al Statements with Expe	nses per Return a	N/A
	al Statements with Expe		N/A
Total expenses and losses per audited financial statements	al Statements with Expe		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17.			N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities	b1		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20.	b1 b2 b3		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20	b1 b2 b3		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20	b1 b2 b3		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20 Other (specify).	b1 b2 b3		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20 Other (specify).	b1 b2 b3		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20 Other (specify). Add lines b1 through b4 Subtract line b from line a	b1 b2 b3		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20 Other (specify). Add lines b1 through b4 Subtract line b from line a Amounts included on Part I, line 17, but not on line a: Investment expenses not included on Part I, line 6b	b1 b2 b3 		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20 Other (specify). Add lines b1 through b4 Subtract line b from line a Amounts included on Part I, line 17, but not on line a: Investment expenses not included on Part I, line 6b	b1 b2 b3 		N/A
Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17. Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20 Other (specify). Add lines b1 through b4 Subtract line b from line a Amounts included on Part I, line 17, but not on line a: Investment expenses not included on Part I, line 6b	b1 b2 b3 b4		N/A

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
JIM WEBER	SECRETARY/TREAS	29,862.	620.	0.
946 BATTLEFIELD	40			
NASHVILLE, TN 37205				
MELONY PUGH-WEBER	PRESIDENT	30,689.	645.	0.
946 BATTLEFIELD	40			
NASHVILLE, TN 37204				
LINDSEY WILLIAMS	DIRECTOR	0.	0.	0.
2916 MCNAIRY LN] o			
NASHVILLE, TN 37204				
GREG & CHERYL SENEFF	DIRECTOR	0.	0.	0.
2905 SELENA DR]			
NASHVILLE, TN 37211				

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Form 990 (2006) TOUCHSTONE YOUTH RESO	URCE SERVICES,	INC.	62-13168	318	F	Page 6
Part V-A Current Officers, Directors, Tru	istees, and Key E	mployees (continu	ed)		Yes	No
75a Enter the total number of officers, directors, and trustees pe	ermitted to vote on organizati	on business as board meeting	s - 4			
b Are any officers, directors, trustees, or key em listed in Schedule A, Part I, or highest comper A, Part II-A or II-B, related to each other throu identifies the individuals and explains the relation	isated professional and gh family or business i	d other independent con	tractors listed in Schedule	es e 75 b		v
•		IGN Part V.A. or highest	t compansated employees		<u>'</u>	X
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 the organization? See the instructions for the definition of 'related organization'						х
If 'Yes,' attach a statement that includes the in	formation described in	the instructions.				
d Does the organization have a written conflict or				75 d	<u> </u>	<u></u> ,
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, directo during the year, list that person below a the instructions)	or, trustee, or key emp	lovee received compens	sation or other benefits (de	escribed b	elow)	
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	account	xpense and of ances	lher
NONE						
	1					
			1			
			!			
		<u> </u>				
Part VI Other Information (See the inst	ructions.)				Yes	No
76 Did the organization make a change in its activ	ities or methods of cor	nducting activities?				1
If 'Yes,' attach a detailed statement of each ch	•	-		76	ļ	X
77 Were any changes made in the organizing or g	_	ut not reported to the IR	IS?	77	ļ	X
If 'Yes,' attach a conformed copy of the change)
78a Did the organization have unrelated business g		or more during the year	r covered by this return?	78a		<u>X</u>
b If 'Yes,' has it filed a tax return on Form 990-T	for this year?			78ь	N/	<u>A</u>
79 Was there a liquidation, dissolution, termination year? If 'Yes,' attach a statement	n, or substantial contra	ction during the		79		х
80a is the organization related (other than by associate membership, governing bodies, trustees, office	ers, etc, to any other ex	xempt or nonexempt org	tion) through common panization?	80 a		х
b If 'Yes,' enter the name of the organization	<u>N/A</u>					
	and cl	neck whether it is 🔲 e		pt.		
81 a Enter direct and indirect political expenditures	(See line 81 instruction	ns.)	81 a	0.		
b Did the organization file Form 1120-POL for this	s year?			81 Ь		X

Form 990 (2006)

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Form 990 (2006) TOUCHSTONE YOUTH RESOURCE SERVICES, INC.	62-1316818		P	age 7	
Part VI Other Information (continued)	· · · · · · · · · · · · · · · · · · ·		Yes	No	
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no chasubstantially less than fair rental value?		32a		Х	
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.)	N/A				
83a Did the organization comply with the public inspection requirements for returns and exemption applicat		33a	x		
b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	8	зъ	Х		
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?					
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	[8	35 a	N/		
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	[8	35 b	N	'A	
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization waiver for proxy tax owed for the prior year	ation received a				
c Dues, assessments, and similar amounts from members 85c	N/A		-		
d Section 162(e) lobbying and political expenditures 85d	N/A	- 1	Ì		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e	N/A		ı		
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f	N/A		ı		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		15 g	N	'A	
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 estimated dues allocable to nondeductible lobbying and political expenditures for the following tax year?	•	5h	N	Ά	
86 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on line 12	N/A				
b Gross receipts, included on line 12, for public use of club facilities 86b	N/A	ł	1		
87 501(c)(12) organizations. Enter a Gross income from members or shareholders.	N/A		1		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b	N/A		Ī		
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and If 'Yes,' complete Part IX	301.7701-3?	8a		Х	
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the section 512(b)(13)? If 'Yes,' complete Part XI	e meaning of	8ь		Х	
89a 501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under:		- 1			
section 4911 ► 0. ; section 4912 ► 0. , section 4955 ►	0.	1	-		
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit the during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attaining each transaction	ch a statement	9 Ь		Х	
c Enter. Amount of tax imposed on the organization managers or disqualified persons during the					
year under sections 4912, 4955, and 4958	0.		- 1		
d Enter Amount of tax on line 89c, above, reimbursed by the organization ▶	0.	t	- 1		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shell		9е		<u>X</u>	
f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance c	ontract?	9f		X	
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the su organization, or a fund maintained by a sponsoring organization, have excess business holdings at any the year?	time during	9 q		Х	
90a List the states with which a copy of this return is filed NONE		9			
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	1	оы		0	
91 a The books are in care of ► JIM WEBER Telephone number ► Located at ► 946 BATTLEFIELD, NASHVILLE TN	ZIP + 4 > 37204				
b At any time during the calendar year, did the organization have an interest in or a signature or other ac	ithority over a —	_[`	Yes	No	
financial account in a foreign country (such as a bank account, securities account, or other financial actif 'Yes,' enter the name of the foreign country	count)?	1 b		<u>X</u>	
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Ba Financial Accounts.	<u> </u>				
BAA		orm 9	990 (2	2006)	

Form 990 (2006) TOUCHSTONE YOUTH I		ERVICES, INC.		62-1316	818 Page 8
Part VI Other Information (continu	ied)			· ·	Yes No
c At any time during the calendar year, did	the organization	n maintain an office	outside of the Un	ited States?	91 c X
If 'Yes,' enter the name of the foreign co	untry ►				
92 Section 4947(a)(1) nonexempt charitable	trusts filing Foi	rm 990 in lieu of Forn	n 1041 - Check h	nere	N/A ►
and enter the amount of tax-exempt inte	rest received or	accrued during the ta	ax year	▶ 92	N/A
Part VII Analysis of Income-Producin	g Activities (S	See the instruction	s)		
	Unrelated	business income	Excluded by se	ection 512, 513, or 514	
Note: Enter gross amounts unless otherwise indicated.	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue.					
a COUNSELING					12,483.
b HONORARIA					2,850.
С					· · · · · · · · · · · · · · · · · · ·
d		·		· · · · · · · · · · · · · · · · · · ·	
e					
Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts					······································
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate		······································			· · · · · · · · · · · · · · · · · · ·
a debt-financed property			†		
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
55 Other investment income			 		
100 Gain or (loss) from sales of assets other than inventory				•	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					494.
103 Other revenue. a			I		
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					15,827.
105 Total (add line 104, columns (B), (D), a				<u> </u>	15,827.
Note: Line 105 plus line 1e, Part I, should equ	al the amount o	n line 12, Part I.			
Part VIII Relationship of Activities	to the Accon	nplishment of Ex	empt Purpos	ses (See the instruc	ctions.)
Line No. Explain how each activity for whic of the organization's exempt purp	h income is reposes (other than	orted in column (E) of by providing funds fo	f Part VII contribu or such purposes	uted importantly to the a	accomplishment
SEE STATEMENT 8					
	 		=		
Part IX Information Regarding Tax	<u>kable Subsic</u>	liaries and Disre	garded Entiti	es (See the instruc	tions.)
(A)	(B)	(0	;)	(D)	(E)
Name, address, and EIN of corporation,	Percentage of	f Nature of	activities	Total	End-of-year
partnership, or disregarded entity	ownership inter	est		ıncome	assets
N/A	<u> </u>	8			
		8			
		8			
		१			
Part X Information Regarding Tra	nsfers Asso	ciated with Pers	onal Benefit	Contracts (See the	
a Did the organization, during the year, receive any fu	nds, directly or indi	ectly, to pay premiums on	a personal benefit cor	ntract?	Yes X No
b Did the organization, during the year, pa	• •		a personal bene	fit contract?	Yes X No
Note: If 'Yes' to (b), file Form 8870 and Fo	rm 4720 (see ın	structions).			

•						
	990 (2006) TOUCHSTONE YOUTH RESOURCE S		62-131		P	age 9
rar	IXI Information Regarding Transfers To a organization is a controlling organization	on as defined in section	n tities. Complete only II t n 512(b)(13).	rie		
					Yes	No
106	Did the reporting organization make any transfers to a 'Yes,' complete the schedule below for each controlled	controlled entity as defined dentity	in section 512(b)(13) of the Cod	e? If		х
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amount	(D) of tran	sfer
а						
b						•
С						
,	Totals					
107	Did the reporting organization receive any transfers fro 'Yes,' complete the schedule below for each controlled	om a controlled entity as defi	ined in section 512(b)(13) of the	Code? If	Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amount	D) of tran	sfer
а						
b						
с						
	Totals					
108	Did the organization have a binding written contract in annuities described in question 107 above?	effect on August 17, 2006, c	overing the interest, rents, roya	lties, and	Yes	No X
Plea	Under penalties of perjury, I declare that I have examined this returne, correct, and complete Declaration of preparer (other than of	urn, including accompanying schedult fficer) is based on all information of w	7-2-6-		belief, it	
Sign Here		Executive Direc	Date for		_	

Preparer's SSN or PTIN (See General Instruction W) P00548652 Check if self employed Preparer's signature Paid CONA Pre-HIGG NBOTHAM CRA GROUP Firm's name (or yours if self employed), address, and ZIP + 4 PLLC parer's Use 5105 MARYLAND WAY EIN - 01-0567329 Only BRENTWOOD, TN 37027 Phone no ► (615) 377-3123 BAA Form 990 (2006)

SCHEDULE A (Form 990 or 990-EZ)

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.)

2006

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

Name of the organization			Employer identification	number
TOUCHSTONE YOUTH RESOURCE SERVICES	S. INC.		62-1316818	
Part I Compensation of the Five Hig		her Than Officer		nd Trustees
(See instructions. List each one	e If there are none ente	r 'None ')	s, Directors, ar	iu iiusiees
		·	480 111	
(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 and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	(
Part II — A Compensation of the Five High (See instructions. List each one	hest Paid Independent C e (whether individuals or	contractors for P firms). If there a	rofessional Se re none, enter	rvices 'None.')
(a) Name and address of each independent contract	ctor paid more than \$50,000	(b) Type (of service	(c) Compensation
NONE				
		_		
			· · · · · · · · · · · · · · · · · · ·	
Total number of others receiving over \$50,000 for professional services	0			
Part II - B Compensation of the Five High	nest Paid Independent C	ontractors for O	ther Services	
(List each contractor who perfo firms. If there are none, enter '	rmed services other than	professional se	rvices, whether	ındıviduals or
(a) Name and address of each independent contract	ctor paid more than \$50,000	(b) Type o	of service	(c) Compensation
NONE				
		1		
		1	·····	
Total number of other contractors receiving pover \$50,000 for other services	0			

Schedule A (Form 990 or 990-EZ) 2006 TOUCHSTONE YOUTH RESOURCE SERVICES, INC. 62-131681	.8	Р	age 2
Part III Statements About Activities (See Instructions.)	Ì	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 \$\ N/A\$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		х
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.)			
SEE STATEMENT 9			
a Sale, exchange, or leasing of property?	2a	Х	
b Lending of money or other extension of credit?	2Ь		<u>X</u>
c Furnishing of goods, services, or facilities?	2c		_X
SEE FORM 990, PART V		.,	
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	Х	
e Transfer of any part of its income or assets?	2e		<u>X</u>
3a Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments)	3a		<u>X</u>
b Did the organization have a section 403(b) annuity plan for its employees?	3b		<u>X</u>
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement.	3c		_X_
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		_X_
4a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4f and 4g.	4a		<u>X</u>
b Did the organization make any taxable distributions under section 4966?	4ь	N/	<u>'A</u>
c Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N/	<u>'A</u>
d Enter the total number of donor advised funds owned at the end of the tax year ▶			N/A
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			N/A
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			0.

Sche	dule A (Form 990 or 990-EZ) 2006 TO	OUCHSTONE YOUTH I	RESOURCE SERVICES		62-1316	818 Page 3
Par	t IV Reason for Non-Private	Foundation Status (See instructions.)			
I ceri	lify that the organization is not a private f	oundation because it is (F	Please check only ONE app	licable box.)		
5	A church, convention of churches, o	r association of churches	Section 170(b)(1)(A)(i).			
6	A school Section 170(b)(1)(A)(ii). (A	Also complete Part V.)				
7	A hospital or a cooperative hospital	service organization. Sect	ion 170(b)(1)(A)(iii)			
8	A federal, state, or local governmen	t or governmental unit. Se	ection 170(b)(1)(A)(v)			
9	A medical research organization operand state	erated in conjunction with)(A)(III) Ent	er the hospita	l's name, city,
10	An organization operated for the ber (Also complete the Support Schedu		sity owned or operated by a	a governmer	ntal unit. Sectio	on 170(b)(1)(A)(ıv).
11 a	An organization that normally receive Section 170(b)(1)(A)(vi) (Also comp	es a substantial part of its lete the Support Schedul i	support from a governmen e in Part IV-A.)	ital unit or fr	om the genera	il public.
11 b	A community trust. Section 170(b)(1)(A)(vi). (Also complete th	e Support Schedule in Part	t IV-A.)		
12	An organization that normally received from activities related to its charitable from gross investment income and corganization after June 30, 1975. See	le, etc, functions — subjec inrelated business taxable	t to certain exceptions, and income (less section 511 t	l (2) no more ax) from bus	e than 33-1/3% sinesses acqui	of its support
13	An organization that is not controlled requirements of section 509(a)(3). C	d by any disqualified perso	ons (other than foundation r	nanagers) a	nd otherwise r	neets the
	Туре IТуре II	Type III-Functio		Type III	-Other	
	(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the su organization the sup organiz gover docum	i) pported on listed in porting sation's ming	(e) Amount of support
Total					>	0.
14	An organization organized and opera	ated to test for public safe	ty. Section 509(a)(4) (See	instructions)	
BAA				Scho	dula A /Farm	990 or 990-EZ) 2006

Page 4

Part IV-A Support Schedule	(Complete only if you	checked a box on line	10, 11, or 12) <i>Use c</i> .	ash method of	accour	nting.
Note: You may use the worksheet in t	he instructions for con-	verting from the accru	al to the cash method	f of accounting.		<u> </u>
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002		(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	62,441.	35,200.	35, 431.	43,	794.	176,866.
16 Membership fees received			· · · · · · · · · · · · · · · · · · ·			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	27,776.	32,741.	34,945.	19,	756.	115,218.
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						0.
19 Net income from unrelated business activities not included in line 18						0.
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						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.
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets						0.
23 Total of lines 15 through 22	90,217.	67,941.	70,376.	63,		292,084.
24 Line 23 minus line 17	62,441.	35,200.	35,431.	43,		176,866.
25 Enter 1% of line 23	902.	679.	704.		536.	
26 Organizations described on line b Prepare a list for your records to show th supported organization) whose total gifts return. Enter the total of all these excess	e name of and amount contri for 2002 through 2005 exceed	er 2% of amount in co buted by each person (other ded the amount shown in lir	than a governmental unit of	or publicly with your	26a 26b	3,537. + 95,989.
c Total support for section 509(a)(· ·	olumn (e)		>	26 c	176,866.
d Add: Amounts from column (e) f	for lines. 18		19 26b 95,9	90	26.4	95,989.
e Public support (line 26c minus li			260 93,9	<u>09.</u> ►	26 d 26 e	80,877.
f Public support percentage (line	•	d by line 26c (denom	inator))	>	261	45.73 %
27 Organizations described on line a For amounts included in lines 15 name of, and total amounts rece such amounts for each year. (2005) b For any amount included in line to show the name of, and amount	12: N/A 5, 16, and 17 that were eved in each year from (2004) 17 that was received fr	received from a 'disq i, each 'disqualified po (2003)	ualified person, prepareson ' Do not file this	list with your (2002)	ur reco return.	rds to show the Enter the sum of t for your records
\$5,000. (Include in the list organ After computing the difference b differences (the excess amounts	izations described in li etween the amount red i) for each year	nes 5 through 11b, as served and the larger	well as individuals.) I amount described in (Do not file this 1) or (2), enter	list wit the sur	h your return. n of these
c Add. Amounts from column (e) f 17 d Add Line 27a total	_ (<004)	(2003) _		_ (<002)		
17	20 20		21		27 c	
d Add Line 27a total	ar	nd line 27b total			27 d	
e Public support (line 27c total mir	nus line 27d total)			•	27 e	
f Total support for section 509(a)(rom line 23, column (e) ► 27f			`
g Public support percentage (line	27e (numerator) divide	d by line 27f (denomi	nator))	>	27 g	
h Investment income percentage (27 h	%
28 Unusual Grants: For an organizatist for your records to show, for nature of the grant Do not file to	each year, the name of	of the contributor, the	date and amount of the	nts during 2002 ne grant, and a	throug brief d	th 2005, prepare a lescription of the

aı	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
			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	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?	31		
	If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement)	- - -		
	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?	32 d		
	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.		;	
i	a Students' rights or privileges?	33a		
ļ	b Admissions policies?	33Ь		
•	c Employment of faculty or administrative staff?	33 c		
•	d Scholarships or other financial assistance?	33 d		
•	e Educational policies?	33 e		
1	f Use of facilities?	33f		
,	g Athletic programs?	33g		
I	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)	_		
		-		
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34a		
ı	b Has the organization's right to such aid ever been revoked or suspended?	34 b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			•••••
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		

Par	t VI-A· Lobi (To be	bying Ex e complete	xpenditures by Ele ed ONLY by an eligible	ecting Public Char organization that filed f	rities (See ın Form 5768)	struct	ions)				N/A	
Chec	ck ► a lift	he organiz	zation belongs to an aff	iliated group. Check	(► b If	you cl	necked	i 'a' and '	limited	contr	ol' provisions ap	ply.
			imits on Lobbying	Expenditures amounts paid or incurre	 ed.)			Affiliate	a) ed grou tals	dτ	(b) To be comple for all elections	ng
36	Total lobbying	expenditu	res to influence public	opinion (grassroots lob	bvina)		36				or garnzatto	113
37	, ,	•	•	lative body (direct lobb	, ,,		37					
38		•	ires (add lines 36 and 3				38					
39							39					
40	•	•	xpenditures (add lines :	38 and 39)			40					
41			•	t from the following tab	le –							
	If the amount	on line 40	is — The	lobbying nontaxable a	mount is —					1		
	Not over \$500	,000	20%	of the amount on line	40	1						
	Over \$500,000 but	not over \$1,	000,000 \$100	,000 plus 15% of the excess o	ver \$500,000				,	1	, ,	
	Over \$1,000,000 b	ut not over \$	1,500,000 \$175	000 plus 10% of the excess of	over \$1,000,000	\vdash \lfloor	41					
	Over \$1,500,000 b	ut not over \$	17,000,000 \$225	000 plus 5% of the excess ov	er \$1,500,000							
	Over \$17,000,	000	\$1,0	000,000						-		
42	Grassroots no	ntaxable a	amount (enter 25% of la	ne 41)			42					
43			e 36. Enter -0- if line 42			_	43					
44			e 38. Enter -0- if line 4			⊢	44				-	
	Caution: If the	ere is an a	mount on either line 43	or line 44, you must fil	le Form 4720.		L					
	(Se	ome orgar	nizations that made a s	Averaging Period ection 501(h) election dee the instructions for li	o not have to	comp	lete al	h) I of the fiv	ve colu	ımns t	pelow.	
				Lobbying Expen	ditures Durin	g 4 -Y	ear Av	eraging F	Period	,		
	Calendar year (or fiscal year beginning in)		(a) 2006	(b) 2005	(c) 2004				d) 003		(e) Total	
45	Lobbying nont amount	axable										
46	Lobbying ceiling a (150% of line 45(-									
47	Total lobbying expenditures											
48	Grassroots no taxable amour											
49	Grassroots ceiling (150% of line 48(
	Grassroots lob	, ,									<u> </u>	
	(For r	eporting o	nly by organizations the	ting Public Chariti	t VI-A) (See ir						N/A	
atten	ng the year, aid npt to influence	public op	iization attempt to influe inion on a legislative m	ence national, state or l atter or referendum, thi	rough the use	ori, incl of:	iuaing	апу	Yes	No	Amount	
а	Volunteers										····	
		nanageme	nt (Include compensate	on in expenses reported	d on lines c th	rough	h.)					
	: Media advertis	•	,	,		- 3.	•			\neg		
			gislators, or the public	•							 	
	_	· ·	ed or broadcast stateme	ents								
f	Grants to othe	r organiza	tions for lobbying purp	oses				į				
g	Direct contact	with legisl	ators, their staffs, gove	rnment officials, or a le	gislative body	/						
h	Rallies, demor	nstrations,	seminars, conventions	, speeches, lectures, o	r any other m	eans				\Box		
i	Total lobbying	expenditu	res (add lines c throug	h h.)								
	If 'Yes' to any	of the abo	ove, also attach a state	ment giving a detailed o	description of	the lo	bbying	activities				
RAA								Sah	adula	A Æ~	m 990 or 990.E2	7 2006

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See Instructions)

							
51 Did to	he reporting organization of e Code (other than section	directly or in 501(c)(3) o	directly engage in any of the following rganizations) or in section 527, relating	g with any other organization described ng to political organizations?	ın sectior	501(:)
a Tran	sfers from the reporting or	ganization t	o a noncharitable exempt organizatio	n of.		Yes	No
(i)	Cash				51 a (i)		X
(ii)	Other assets				a (ii)		X
b Othe	r transactions						
(i)	Sales or exchanges of asse	ets with a no	oncharitable exempt organization	1	b (i)		Х
	Purchases of assets from a		· -	•	b (ii)		Х
• •	Rental of facilities, equipme		· •		b (iii)		X
	Reimbursement arrangeme		2336(3		b (iv)		X
	•	.111.3					X
	Loans or loan guarantees				b (v)		X
			p or fundraising solicitations		b (vi)		$\frac{\hat{x}}{x}$
			is, other assets, or paid employees. complete the following schedule. Colu by the reporting organization. If the o low in column (d) the value of the go	umn (b) should always show the fair ma rganization received less than fair marl ods, other assets, or services received	c irket value ket value i	of n	
(a)	(b)		(c)	(d)			
Line no.	Amount involved	Name of	noncharitable exempt organization	Description of transfers, transactions, and	shari <mark>ng</mark> arrai	ngement	S
N/	A					-	
							
			· · · · · · · · · · · · · · · · · · ·				
			· · · · · · · · · · · · · · · · · · ·				
					•		
desc		he Code (ot	nated with, or related to, one or more than section 501(c)(3)) or in section	tax-exempt organizations on 527?	► ∏ Ye	s X	No
	(a)		(b)	(c)			
	Name of organization		Type of organization	Description of relation	ship		
I/A						-	
_					-		
		-					
			· · · · · · · · · · · · · · · · · · ·	- 			
							<u>_</u>
			-				
·				·- · · · · · · · · · · · · · · · · ·			
				 			
							
			<u> </u>				

2006 ·	FEDE	RAL STATE	EMENTS		PAGE 1
	TOUCHSTONE Y	OUTH RESOUR	CE SERVICES,	INC.	62-1316818
STATEME FORM 990 GROSS PI	NT 1 I, PART I, LINE 10 ROFIT (LOSS) FROM SALES OF I	NVENTORY		\$	783.
NET SALE LESS COS	URNS & ALLOWANCES	XΥ		\$ \$ \$	783. 0. 783. 289. 494.
SPECIFIC	NT 2 I, PART II, LINE 23 ASSISTANCE TO INDIVIDUALS			TOTAL \$	685. 685.
COMPENS	I, PART II, LINE 25A SATION OF OFFICERS, DIRECTOR TION RECEIVED	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
JIM WEBE MELONY P	UGH-WEBER	TOTAL 29,862. 30,689.	SERVICES 18,664. 19,181.	& GENERAL 4,479. 4,603.	FUNDRAISING 6,719. 6,905.
JIM WEBE	TOTAL <u>\$</u> BENEFIT PLAN CONTRIBUTION NAME R UGH-WEBER	60,551.\$ (A) TOTAL 620. 645.	37,845.\$ (B) PROGRAM SERVICES 388. 403.	(C) MANAGEMENT & GENERAL 93. 97.	13,624. (D) FUNDRAISING 139. 145.
	TOTAL \$	1,265.\$	791.\$	190.\$	284.
JIM WEBE	ACCT. & OTHER ALLOWANCES NAME R UGH-WEBER	(A) TOTAL 0. 0.	(B) PROGRAM SERVICES 0. 0.	(C) MANAGEMENT & GENERAL 0. 0.	(D) FUNDRAISING 0. 0.
	TOTAL <u>\$</u>	0.\$	0.\$		0.

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TOUCHSTONE YOUTH RESOURCE SERVICES, INC.

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STATEMENT 4 FORM 990, PART II, LINE 43 OTHER EXPENSES

	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	TOTAL	SERVICES	& GENERAL	FUNDRAISING
ADVERTISING BANK & FINANCE CHARGES	408. 373.		373.	
BOOKS & SUBSCRIPTIONS CAMP SUPPLIES	412 227	412.		
CONTINUING EDUCATION FUNDRAISING COSTS	18. 325.	. 18.		325.
LICENSES & FEES	170.	,	170.	
MEALS & ENTERTAINMENT MUSIC SUPPLIES	1,158. 222.		174.	260.
OFFICE EXPENSE	3,334.		667.	700.
PROFESSIONAL FEES REGISTRATION FEES	2,719. 75.	44.	544. 15.	571. 16.
SEMINAR SUPPLIES	TOTAL \$ 9,465		\$ 1,943.	\$ 1,872.

STATEMENT 5 FORM 990, PART III, LINE A STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS AND ALLOCATIONS	PROGRAM SERVICE EXPENSES
TO PROVIDE PASTORAL COUNSELING AND ONE-ON-ONE SUPPORT TO YOUTH IN NASHVILLE AND AT VARIOUS CHURCH EVENTS.		
45 INDIVIDUALS WERE COUNSELED, PLUS 150 STUDENTS PARTICIPATED IN SMALL GROUPS. INCLUDES FOREIGN GRANTS: NO		33,279.
TO SPEAK, TEACH, AND PERFORM WHOLESOME CONTEMPORARY CHRISTIAN MUSIC IN CHURCH AND NON-CHURCH SETTINGS, WITH THE PURPOSE OF EVANGELISM, ENCOURAGEMENT, & CHALLENGE TO YOUTH		
FOR FURTHER COMMITMENT. PARTICIPATED IN 25 SPEAKING & MUSIC MINISTRY ENGAGEMENTS DURING 2006. INCLUDES FOREIGN GRANTS: NO		33,279.
	\$ 0.	\$ 66,558.

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TOUCHSTONE YOUTH RESOURCE SERVICES, INC.

STATEMENT 6 FORM 990, PART IV, LINE 57 LAND, BUILDINGS, AND EQUIPMENT

	CATEGORY			BASIS		ACCUM. DEPREC.		BOOK VALUE
MISCELLANEOUS		TOTAL	\$ \$	19,044. 19,044.	\$ \$	17,110. 17,110.	<u>\$</u> \$	1,934. 1,934.

STATEMENT 7 FORM 990, PART IV, LINE 58 OTHER ASSETS

NET INTANGIBLE ASSETS

7,245. TOTAL \$ 7,245.

STATEMENT 8 FORM 990, PART VIII RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE #	EXPLANATION OF ACTIVITIES
93A	COUNSELING FEES FOR SERVICES THAT ARE A CRUCIAL PART OF THE MINISTRY'S PROGRAM SERVICES.
102	SALE OF TAPES AND CDS TO YOUTHS WHO ARE PARTICIPATING IN EVENTS REINFORCE THE MESSAGE AND ENCOURAGE YOUTH IN DEALING WITH PROBLEMS DAY-TO-DAY.
93B	HONORARIA FEES FOR CONCERTS/SPEAKING ENGAGEMENTS THAT ARE A CRUCIAL PART OF THE MINISTRY'S PROGRAM SERVICES.

STATEMENT 9
SCHEDULE A, PART III, LINE 2
TRANSACTIONS WITH TRUSTEES, DIRECTORS, ETC.

THE ORGANIZATION RENTS OFFICE SPACE AT FAIR RENTAL VALUE FROM JIM & MELONY WEBER, WHO ARE OFFICERS OF THE ORGANIZATION.

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	TOUCHSTONE YOUTH RESOURCE SERVICES, INC.	62-1316818
COMPUTATION OF	COST OF GOODS SOLD (FORM 990)	
2. PURCHASES 3. COST OF LABOR 4. ADDITIONAL 26 5. OTHER COSTS 6. TOTAL (ADD LI 7. INVENTORY AT	NES 1 THROUGH 5)	5,611. 0. 0. 0. 0. 5,611. 5,322. 289.

EXCESS CONTRIBUTORS SCHEDULE A, PART IV-A, LINE 26B

PROJECTED SUPPORT SCHEDULE FOR 2007

THIS WORKSHEET PROJECTS IF THE ORGANZIATION WILL MEET THE SUPPORT TEST FOR THE TAX YEAR 2007 BASED ON THE DATA ENTERED IN SCREEN 55 FOR THE COLUMN 2006

SUPPORT ITEMS	2006 (A)	2005 (B)	2004 (C)	2003 (D)	TOTAL (E)
15. GIFTS, GRANTS, AND CONTRIBUTIONS	78,703.	62,441.	35,200.	35,431.	211,775.
16. MEMBERSHIP FEES RECEIVED					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 PURPOSE	16,106.	27,776.	32,741.	34,945.	111,568.
18. GROSS INCOME FROM INTEREST, DIVIDENDS, SAMOUNT RECEIVED FROM PAYMENTS ON SECURITIES LOANS, RENTS, ROYALTIES, AND UNRELATED BUSINESS TAXABLE INCOME FROM BUSINESSES ACQUIRED BY THE ORGANIZATION AFTER 6/30/1975					0.
19. NET INCOME FROM UNRELATED BUSINESS ACTIVITIES NOT INCLUDED IN LINE 18					0.
20. TAX REVENUES LEVIED FOR THE ORGANIZATION'S BENEFIT AND EITHER PAID TO IT OR EXPENDED ON ITS BEHALF					0.
21. THE VALUE OF SERVICES OR FACILITIES FURISHED TO THE					0.

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FEDERAL WORKSHEETS

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TOUCHSTONE YOUTH RESOURCE SERVICES, INC.

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PROJECTED SUPPORT SCHEDULE FOR 2007 (CONTINUED)

THIS WORKSHEET PROJECTS IF THE ORGANZIATION WILL MEET THE SUPPORT TEST FOR THE TAX YEAR 2007 BASED ON THE DATA ENTERED IN SCREEN 55 FOR THE COLUMN 2006.

ORGANIZATION BY A GOVERNMENTAL UNIT WITHOUT CHARGE. DO NOT INCLUDE THE VALUE OF SERVICES OR FACILITIES GENERALLY FURNISHED TO THE PUBLIC WITHOUT CHARGE

22. OTHER INCOME. DO NOT INCLUDE GAIN (OR LOSS) FROM SALE OF CAPITAL ASSETS					0.
23. TOTAL OF LINES 15 THROUGH 22	94,809.	90,217.	67,941.	70,376.	323,343.
24. LINE 23 MINUS LINE 17	78,703.	62,441.	35,200.	35,431.	211,775.
25. ENTER 1% OF LINE 23	948.	902.	679.	704.	
ORGANIZATIONS DESCRIBED ON LINE 26A. 2% OF AMOUNT IN COLUMN (E 26B. TOTAL OF ALL INDIVIDUAL OF 26C. TOTAL SUPPORT FOR SECTION 26D. ADD THE AMOUNTS FROM COLU 26E. PUBLIC SUPPORT (LINE 26C 26F. PUBLIC SUPPORT PERCENTAGE	E), LINE 24 CONTRIBUTIONS N 509(A)(1) T JMN (E) FOR I MINUS LINE 2	TEST (LINE 24 LINES 18, 19, 26D)	4, COLUMN (E) 22, AND 26E)	4,236. 110,442. 211,775. 110,442. 101,333. 47.85%

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TOUCHSTONE YOUTH RESOURCE SERVICES, INC.

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DEPRECIATION WORKSHEET FORM 990-PF, PART I ALLOCATED DEPRECIATION

	DATE	COST	PRIOR YEAR					NET INVEST	ADJUSTED
<u>DESCRIPTION</u>	<u>ACQUIRED</u>	BASIS	DEPR	METHOD	RATE	LIFE	YEAR DEPR	INCOME	NET INCOME
SOFA	8/13/99	430	392	S/L		7	38	0	0
MIC MIXER	4/11/00	90	75	S/L		7	13	0	0
MIXER	8/28/00	275	208	S/L		7	39	0	0
MIC STAND	9/02/00	50	37	S/L		7	7	0	0
TUBE MIC	9/07/00	600	459	S/L		7	86	0	0
MIC & COMPRESSOR	11/20/00	367	264	S/L		7	52	0	0 1
YAMAHA E GUITAR	8/01/01	221	144	S/L	0.1428		32	0	0
PEAVY GUITAR AMP	8/03/01	95	63	S/L	0.1428		14	0	0 1
J-STATION	10/03/01	177	113	S/L	0.1428		25	0	0 (
HARD DRIVE	4/29/02	268	222	200DB	0.1152		31	0	0
USB AUDIO INTERFACE	9/25/02	270	223	200DB	0.1152		31	0	0
COMPAQ COMPUTER	9/25/02	864	715	200DB	0.1152		100	0	0
CD DUPLICATOR	5/30/03	1,431	1,019	200DB	0.1152		165	0	0
HP PAVILION 5300 NOT	EBOOK	ŕ	·						
	6/20/03	1,705	1,214	200DB	0.1152		196	0	0
DIGITAL CAMERA & ACC	ESSOR	•	•						- 1
	8/21/03	492	349	200DB	0.1152		57	0	0
GUITAR AMP	7/26/04	303	117	200DB	0.1749		53	0	0
MP3 PLAYER	7/26/04	260	135	200DB	0.1920		50	Ō	o l
ELEC EXPR EQUIP	6/21/05	490	98	200DB	0.3200		157	Ō	o l
COMPUTER	7/29/05	450	90	200DB	0.3200		144	Ö	o l
CIVIL VIDEO	6/30/05	10,350	1,035	S/L		5	2,070	Ö	οl
HARD DRIVES	12/15/06	340	_,	200DB	0.0500		17	Ö	ŏ l
								-	- 1

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TOUCHSTONE YOUTH RESOURCE SERVICES, INC.

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00	DESCRIPTION	DATE <u>ACQUIRED</u>	DATE COST/ SQLD BASIS	BUS PCT.	CUR 179 _BONUS_	SPECIAL DEPR _ALLOW	PRIOR 179/ BONUS/ SP, DEPR.	PRIOR DEC BAL DEPR	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR	_MFTH0D_	LIEE.	_RATE_	CURRENT DEPR
FORM	990/990-PF														
1	DESK	8/01/87		221						221	221	S/L	7		0
2	PHONE	6/06/88		130						130	130	S/L	7		0
3	GUITAR CASE & LUGGAGE	8/01/88		210						210	210	S/L	7		0
4	MISC EQ	7/01/90		749						749	749	S/L	7		0
5	FAX MACHINE	9/30/91		129						429	429	S/L	5		0
6	LUGGAGE	7/01/93		159						159	159	S/L	5		0
7	OFFICE FURNITURE	7/01/94	1,	134						1,434	1,434	S/L	7		0
8	LUGGAGE	7/01/94		162						162	162	S/L	5		0
9	TUNER	7/01/94		125						125	125	S/L	5		0
10	MUSIC EQ	7/01/94		167						167	167	S/L	5		0
15	MISC FURN	6/01/95		57						57	57	S/L	7		0
16	850 MG HD	10/17/95		230						230	230	S/L	5		0
17	SOFTWARE OFFICE PRO	11/20/95		290				•		290	290	S/L	3		0
18	VIDEO MONITOR	1/16/96		240						240	240	S/L	7		0
19	LAPTOP COMPUTER	5/23/96	2,	766						2,766	2,766	S/L	5		0
20	COMPUTER ACCESSORIES	5/24/96		100						100	100	S/L	5		0
21	MISC EQUIP	6/08/96		128						128	128	S/L	5		0
22	MOTHER BOARD	7/24/96		123						123	123	S/L	5		0
23	PRINTER	4/21/97		152						152	152	S/L	5		0
24	SCANNER	7/10/97		189						189	189	S/L	5		0
25	MISC EQUIPMENT	8/25/97		104						104	104	S/L	5		0
26	COMPUTER DRIVE	8/27/97		325						325	325	S/L	5		0
27	COMPUTER EQUIP	9/22/97		143						143	143	S/L	5		0
28	SCANNER	6/19/97		166						166	166	S/L	5		0
29	SOFA	8/13/99		430						430	392	S/L	7		38

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TOUCHSTONE YOUTH RESOURCE SERVICES, INC.

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NO.	DESCRIPTION	DATE ACQUIRED	DATE COST/ SOLD BASIS	BUS PCI.	CUR 179 _BONUS_	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR Basis	PRIOR DEPR.	METHOD	l IFF	RATE	CURRENT DEPR
	COMPUTER/MONITOR	9/14/98	887		_DUNUS_	ALLWIT.	<u> </u>			887	887	S/L			
	CDR DRIVE	3/29/00	180							180	180	S/L			
	MIC MIXER	4/11/00	90							90	75	S/L			
	MIXER	8/28/00	275							275	208	S/L	7		
	MIC STAND	9/02/00	50							50	37	S/L	7		
	TUBE MIC	9/07/00	600	1						600	459	S/L	7		
37	MIC & COMPRESSOR	11/20/00	367							367	264	S/L	7		
38	YAMAHA E GUITAR	8/01/01	221							221	144	S/L HY	7	14280	
39	PEAVY GUITAR AMP	8/03/01	95	i						95	63	S/L HY	7	14280	
40	J-STATION	10/03/01	177							177	113	S/L HY	7	14280	
41	HARD DRIVE	4/29/02	268	}						268	222	200DB HY	5	11520	
42	USB AUDIO INTERFACE	9/25/02	270)						270	223	200DB HY	5	11520	
43	COMPAQ COMPUTER	9/25/02	864					_	- 	864	. 715	200DB HY	5	11520	1
	TOTAL		13,573	1	0	()	0 (0	13,573	12,781				4
AM —	IORTIZATION														
52	CIVIL VIDEO	6/30/05	10,350) -						10,350	1,035	S/L	5		2,0
	TOTAL AMORTIZATION		10,350)	0	()	0 () 0	10,350	1,035				2,0
MA	CHINERY AND EQUIPMENT														
45	CD DUPLICATOR	5/30/03	1,431							1,431	1,019	200DB HY	5	11520	1
46	HP PAVILION 5300 NOTEBOOK	6/20/03	1,705	;						1,705	1,214	200DB HY	5	11520	1
47	DIGITAL CAMERA & ACCESSOR	8/21/03	492	?						492	349	200DB HY	5	11520	
48	GUITAR AMP	7/26/04	303	}						303	117	200DB HY	7	17490	
	MP3 PLAYER	7/26/04	260							260	135	200DB HY	5	19200	

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TOUCHSTONE YOUTH RESOURCE SERVICES, INC.

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_0	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCI.	CUR 179 BONUS	SPECIAL DEPR. _ALLOW	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	_MFTHOD_	LIFE	_RATE	CURRENT DEPR.
50	ELEC EXPR EQUIP	6/21/05		490		ß					490	98	200DB HY	5	32000	157
51	COMPUTER	7/29/05		450							450	90	200DB HY	5	32000	144
53	HARD DRIVES	12/15/06		340							340		200DB MQ	5	05000	1;
	TOTAL MACHINERY AND EQUIPME			5,471		0	0	0	0	0	5,471	3,022				83
	TOTAL DEPRECIATION			19,044		0	0	0	0	0	19,044	15,803				1,30
FORM	/ 990/990-PF, COGS															
AN	ORTIZATION															
11	MASTERS	7/01/89		10,185							10,185	10,185	S/L	5		(
12	MASTERS	7/01/93		3,421							3,421	3,421	S/L	5		(
13	MASTERS	7/01/94		4,900							4,900	4,900	S/L	5		,
14	MASTERS	7/01/94		9,166							9,166	9,166	S/L	5		
31	MASTERS	4/01/98		4,639							4,639	4,639	S/L	5		
44	MANY MOUNTAINS ALBUM MAST	4/29/02		4,355							4,355	4,355	S/L	3	_	i
	TOTAL AMORTIZATION			36,666		0	0	0	0	0	36,666	36,666				(
	TOTAL DEPRECIATION			0		0	0	0	0	0	0	0			-	(
	GRAND TOTAL AMORTIZATION			47,016		0	0	0	0	0	47,016	37,701				2,07
	GRAND TOTAL DEPRECIATION			19,044		0	0	n			19,044	15,803				