Internal Revenue Service

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)

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

2006 Open to Public Inspection

OMB No. 1545-0047

A	For th	ne 2006 ca	alendar	year, or tax year beginning		, 2006, an	d ending	_	, 20
_		applicable:	Please use IRS	C Name of organization				D Employ	yer identification number
	Name c	ss change label or change print or type. See							one number
	Initial re Final ref		Specific Instruc- tions.	City or town, state or country,	and ZIP + 4			F Accountin	
		ed return ion pending		tion 501(c)(3) organizations an				ot applicable	her (specify) ► e to section 527 organizations. n for affiliates?
G	Websit	e: 🕨	trus	sts must attach a completed Sch	ledule A (Form 990 or 95	90-Е Z).	H(b) If "Yes,"	enter numb	per of affiliates
J	Organia	zation type	(check o	only one) ► _ 501(c) () ◀ ((insert no.) 🗌 4947(a)(1)	or 🗌 527	- ` `	attach a list	t. See instructions.)
K	receipts	s are norma	lly not mo	organization is not a 509(a)(3) su ore than \$25,000. A return is not re e a complete return.				separate retur tion covered to Exemption N	by a group ruling? Yes No
L	Gross	s receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► to atta						h Sch. B (F	the organization is not required Form 990, 990-EZ, or 990-PF).
Ρ	art I	Reven	ue, Ex	penses, and Changes i	n Net Assets or F	und Bala	ances (See t	he instru	ctions.)
	1 a b	Contribu Direct p	utions to ublic su	gifts, grants, and similar ar o donor advised funds upport (not included on line	 e 1a)	1a 1b 1c			
	c d	Governr	nent co	support (not included on lin portributions (grants) (not inc	cluded on line 1a)	1d			
				1a through 1d) (cash \$)	. <u>1e</u>	
	2			e revenue including governm				2	
	3			ues and assessments				. 3	
	4			ings and temporary cash ir interest from securities				. 5	
	6a	Gross re			1	 6a ∣			
				penses		6b			
				me or (loss). Subtract line (. 6c	
e	7			nt income (describe 🕨) 7	
Revenue	8a	Gross a	mount	from sales of assets other	(A) Securities		(B) Other		
Rev		than inv	entory			8a			
	b	Less: co	st or oth	er basis and sales expenses.		8b			
			. , .	attach schedule)		8c			
		0	,	s). Combine line 8c, columns	() ()			. 8d	
	9			nd activities (attach schedule).	-	aming, che	eck here 🕨 🗋		
	а				of	9a			
				eported on line 1b)		9b		-	
				penses other than fundrais (loss) from special events.				9c	
				inventory, less returns and		10a			
	b			loods sold		10b			
	c		-	oss) from sales of inventory (at		ct line 10b t	from line 10a	. 10c	
	11	Other re	evenue	(from Part VII, line 103)				. 11	
	12	Total re	venue.	Add lines 1e, 2, 3, 4, 5, 6c,	7, 8d, 9c, 10c, and 1	1		. 12	
	13			es (from line 44, column (E					
Expenses	14			nd general (from line 44, c					
xper	15			om line 44, column (D))					
ш	16 17			ffiliates (attach schedule)					
				s. Add lines 16 and 44, co				40	
sets	18		•	cit) for the year. Subtract li			(•))		
Net Assets	19 20			und balances at beginning in net assets or fund bala				·	
Net	20			and balances at end of year.				·	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Part II Statement of

	Functional Expenses organizations and	section 4	947(a)(1) nonexemp	ot charitable trusts bu	t optional for others. (S	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
22a	Grants paid from donor advised funds (attach schedule) (cash \$ noncash \$) If this amount includes foreign grants, check here ► □	22a				
22b	Other grants and allocations (attach schedule)	LLU			-	
	(cash \$ noncash \$) If this amount includes foreign grants, check here ► □	22b				
23	Specific assistance to individuals (attach	23				
24	schedule)	24				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a				
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b				
С	Compensation and other distributions, not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ (attach schedule)	25c				
26	Salaries and wages of employees not included on lines 25a, b, and c	26				
27	Pension plan contributions not included on lines 25a, b, and c	27				
28	Employee benefits not included on lines 25a - 27	28				
29	Payroll taxes	29				
30	Professional fundraising fees	30				
31	Accounting fees	31				
32	Legal fees	32				
33	Supplies	33				
34	Telephone	34				
35	Postage and shipping	35				
36	Occupancy	36				
37	Equipment rental and maintenance	37				
38	Printing and publications	38				
39	Travel	39				
10	Conferences, conventions, and meetings	40				
11	Interest	41				
12	Depreciation, depletion, etc. (attach schedule)	42				
13 a	Other expenses not covered above (itemize):	43a				
b		43b				
С		43c				
d		43d				
е		43e				
f		43f				
g		43g				
14	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)					
	<u>13–15)</u>	44				

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4)

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? . \blacktriangleright **Yes No**

If "Yes," enter (i) the aggregate amount of these joint costs \$____ (iii) the amount allocated to Management and general \$ ____; (ii) the amount allocated to Program services \$___ ; and (iv) the amount allocated to Fundraising \$

Form **990** (2006)

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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.

	at is the organization's primary exempt purpose? ►	Program Service Expenses
All	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1)
org	anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	trusts; but optional for others.)
а		
	(Grants and allocations \$) If this amount includes foreign grants, check here ►	
b		
	(Grants and allocations \$) If this amount includes foreign grants, check here ► □	
С		
	(Grants and allocations \$) If this amount includes foreign grants, check here ► □	
d		
	(Grants and allocations \$) If this amount includes foreign grants, check here ►	
е	Other program services (attach schedule)	
f	(Grants and allocations \$) If this amount includes foreign grants, check here ► □ Total of Program Service Expenses (should equal line 44, column (B), Program services).	

Form **990** (2006)

Pa	irt IV	Balance Sheets (See the instructions.)			
N		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
	45	Cash—non-interest-bearing		45	
	46	Savings and temporary cash investments		46	
		5 , , ,			
	47a	Accounts receivable			
	b	Less: allowance for doubtful accounts . 47b	4	47c	
	48a	Pledges receivable			
	b	Less: allowance for doubtful accounts . 48b		48c	
	49	Grants receivable		49	
	50a	Receivables from current and former officers, directors, trustees, and			
		key employees (attach schedule)		50a	
	b	Receivables from other disqualified persons (as defined under section		FOR	
		4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
s	51a	Other notes and loans receivable (attach schedule)			
Assets	h	schedule) 51a Less: allowance for doubtful accounts 51b		51c	
Ass				52	
	53	Prepaid expenses and deferred charges		53	
		Investments—publicly-traded securities	4	54a	
		Investments—other securities (attach schedule)	4	54b	
		Investments—land, buildings, and			
		equipment: basis			
	b	Less: accumulated depreciation (attach			
		schedule)		55c	
	56	Investments-other (attach schedule)		56	
		Land, buildings, and equipment: basis . 57a			
	b	Less: accumulated depreciation (attach schedule) 57b		57c	
	50			570	
	58	Other assets, including program-related investments (describe ►)		58	
	59	Total assets (must equal line 74). Add lines 45 through 58		59	
	60	Accounts payable and accrued expenses		60	
	61	Grants payable		61	
	62	Deferred revenue		62	
ies	63	Loans from officers, directors, trustees, and key employees (attach			
Liabilities		schedule)		63	
.iat		Tax-exempt bond liabilities (attach schedule)		64a	
_		Mortgages and other notes payable (attach schedule)		64b 65	
	65	Other liabilities (describe ►)		00	
	66	Total liabilities. Add lines 60 through 65		66	
	Oraz	anizations that follow SFAS 117, check here ► □ and complete lines			
(0	Orga	67 through 69 and lines 73 and 74.			
čě	67			67	
lan	68	Temporarily restricted		68	
Ba	69	Permanently restricted		69	
pu	Orga	nizations that do not follow SFAS 117, check here ► □ and			
ΗĽ		complete lines 70 through 74.			
or	70	Capital stock, trust principal, or current funds		70	
ets	71	Paid-in or capital surplus, or land, building, and equipment fund		71 72	
Ass	72	Retained earnings, endowment, accumulated income, or other funds		12	
Net Assets or Fund Balances	73	Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must			
Z		equal line 21)		73	
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73		74	

Form 990 (2006)

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Form	990 (2006)						Page 5
Pa	rt IV-A	Reconciliation of Revenue per Aud instructions.)	ited Financial Statem	ents With Rev	enue pe	r Return (See the
a b 1 2 3 4	Amounts Net unre Donated Recoveri Other (sp	enue, gains, and other support per audit included on line a but not on Part I, line alized gains on investments services and use of facilities es of prior year grants pecify):	9 12: 	b1 b2 b3 b4	· · ·	a	
c d 1 2	Add lines Subtract Amounts Investme Other (sp	s b1 through b4	ne a: 6b	d1		b c	
	Add lines Total rev rt IV-B	s d1 and d2 venue (Part I, line 12). Add lines c and d Reconciliation of Expenses per Au	dited Financial Stater	nents With Exp	penses p		n
a b 1 2 3 4	Amounts Donated Prior yea Losses re	benses and losses per audited financial s included on line a but not on Part I, line services and use of facilities r adjustments reported on Part I, line 20 eported on Part I, line 20 becify):	9 17: • • • • • • • • • • • • • • • • • •	b1 b2 b3		a	
c d 1 2	Subtract Amounts Investme	s b1 through b4	ne a: 6b	b4		b c	
e Pai	Total ex rt V-A	s d1 and d2 penses (Part I, line 17). Add lines c and Current Officers, Directors, Trustees or key employee at any time during the ye	, and Key Employees	List each person	n who wa		, director, trustee,
		(A) Name and address	(B) Title and average hours per week devoted to position		(D) Contribut benefit pla		(E) Expense account and other allowances
			-				

Form 990 (2006)	F	Page 6
Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)	Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings		
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)	ว	
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.".	2	
If "Yes," attach a statement that includes the information described in the instructions.	4	
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 f	ormer

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.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
	-			
	-			
	-			
	-			
	-			
	-			
Part VI Other Information (See the instruction	()			Yes No

га			162	INO
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a			
	detailed statement of each change	76		
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?	78a		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach			
	a statement	79		
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?	80a		
b	If "Yes," enter the name of the organization			
	and check whether it is \Box exempt or \Box nonexempt			
81a	Enter direct and indirect political expenditures. (See line 81 instructions.)			
b	Did the organization file Form 1120-POL for this year?	81b		

	990 (2006)		P	age 7
Par	rt 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?	82a		
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.			
00-		83a		
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83b		
	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions? Did the organization solicit any contributions or gifts that were not tax deductible?	84a		
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
D	gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	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.			
с	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures	-		
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
	Taxable amount of lobbying and political expenditures (line 85d less 85e)	05		
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	054		
	following tax year?	85h		
86 k	soric)(7) orgs. Enter, a initiation lees and capital contributions included on line 12			
87	Gross receipts, included on line 12, for public use of club facilities			
	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
88a	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	88a		
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶; section 4912 ▶; section 4955 ▶			
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	89b		
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	Enter: Amount of tax on line 89c, above, reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		
90a	List the states with which a copy of this return is filed		I	
	Number of employees employed in the pay period that includes March 12, 2006 (See			
	instructions.)			
σıα	Located at ►			
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		Yes	No
	account)?	91b		
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			

	90 (2006)						Page 8
с	VI Other Information (continued) At any time during the calendar year, did the If "Yes," enter the name of the foreign count	ry 🕨					
92	Section 4947(a)(1) nonexempt charitable trust and enter the amount of tax-exempt interest					• • •	.►∟
Part	VII Analysis of Income-Producing Ac	ctivities (See th	e instructions.)			1	
	Enter gross amounts unless otherwise	Unrelated b	ousiness income	Excluded by sec	tion 512, 513, or 514	(E) Relate	d or
indica	ted.	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	exempt fu	unction
93	Program service revenue:		Amount		Amount	incor	ne
a							
b c							
d							
e							
f	Medicare/Medicaid payments						
g	Fees and contracts from government agencie						
94	Membership dues and assessments						
95 00	Interest on savings and temporary cash investmen	its					
96 97	Dividends and interest from securities Net rental income or (loss) from real estate:						
a	debt-financed property						
b	not debt-financed property						
98	Net rental income or (loss) from personal propert						
99	Other investment income						
100	Gain or (loss) from sales of assets other than invento	ry					
101	Net income or (loss) from special events						
102 103	Gross profit or (loss) from sales of inventory Other revenue: a						
b							
c							
d							
е		_					
104	Subtotal (add columns (B), (D), and (E))						
105 Note:	Total (add line 104, columns (B), (D), and (E Line 105 plus line 1e, Part I, should equal th				▶		
Part				noses (See th	e instructions)		
Line V		me is reported in co	olumn (E) of Part	VII contributed	,	accomplis	shment
Part			isregarded Enti	ties (See the	instructions.)		
	(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of a	activities	(D) Total income	(E) End-of- asse	-year
		%					
		%					
		%					
Part	X Information Regarding Transfers Ass		sonal Benefit Co	ontracts (See 1	he instructions.)	1	
(a) (b)	Did the organization, during the year, receive any funds, Did the organization, during the year, pay pr	directly or indirectly, t	to pay premiums on	a personal benefi	t contract?	□ Yes [□ Yes [□ No □ No
	e: If "Yes" to (b). file Form 8870 and Form 4			a personal be			

Form **990** (2006)

Form	990	(2006)
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Information Regarding Transfers To and From Controlled Entities. Complete only if the organization Part XI is a controlling organization as defined in section 512(b)(13). Yes No

					.63	110
106	Did the reporting organization ma	ke any transfers to a cor	ntrolled entity as defined in section	512(b)(13) of		1
	the Code? If "Yes," complete the	schedule below for each	controlled entity.			\checkmark

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
а				
b				
c				
	Totals			

Did the reporting organization receive any transfers from a controlled entity as defined in section 107 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	Name, address, of each Employer Identification Description of		(D) Amount of transfer	
а					
b					
с					
	Totals				
108	Did the organization have a bindi rents, royalties, and annuities des Under penaties of perjud-1 declare that and belief, it in true, correct, and comple	scribed in question 107 a	bove? ding accompanying schedu	les and statem	ents, and to the best of my knowledge
Pleas Sign Here				Date	5/11/07
Paid	Preparer's signature		sel	eck if f- iployed ► 🔲	Preparer's SSN or PTIN (See Gen. Inst. X)
Prepar Use Or				EIN Phone no	▶ o. ▶ ()

Form 990 (2006)

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Yes No

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 OMB No. 1545-0047

2006

Department of the Treasury Internal Revenue Service

	Supplementary mormation—(See separate instructions.)	
►	MUST be completed by the above organizations and attached to their Form 990 or 99	90-EZ

Name of the organization

Employer identification number

ł

	Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 2 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				
	-							
	-							
	-							
	-							
h	-							
Total number of other employees paid over \$50,000				-				
Part II-A Compensation of the Five High	nest Paid Independent C	Contractors for	Professional Se					
(See page 2 of the instructions. List (a) Name and address of each independent contract	· · · · · · · · · · · · · · · · · · ·							
(a) Name and address of each independent contraction	or paid more than \$50,000	(b) Type	of service	(c) Compensation				
Total number of others receiving over \$50,000 for professional services	•							
Part II-B Compensation of the Five High (List each contractor who perform firms. If there are none, enter "No	med services other than p	professional serv	Other Services vices, whether inc	lividuals or				
(a) Name and address of each independent contractor			of service	(c) Compensation				
Total number of other contractors receiving over \$50,000 for other services	•							
For Paperwork Reduction Act Notice, see the Instructions for F	Form 990 and Form 990-EZ.	Cat. No. 11285F	Schedule A (Forn	1 990 or 990-EZ) 2006				

Sche	lule A (Form 990 or 990-EZ) 2006		P	age 2
Pa	t 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 > \$ (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.)			
а	Sale, exchange, or leasing of property?	2a		
b	Lending of money or other extension of credit?	2b		
с	Furnishing of goods, services, or facilities?	2c		
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		
е	Transfer of any part of its income or assets?	2e		
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		
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		
с	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		
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .	3d		
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		
b	Did the organization make any taxable distributions under section 4966?	4b		
с	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		l
d	Enter the total number of donor advised funds owned at the end of the tax year			
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
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			
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			

Ра	rt I\	Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)
l ce	tify 1	hat 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 33 ^{1/3} % 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 33 ^{1/3} % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
		Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following info	rmation about th	e supported organizat	ions. (See pag	e 7 of the instru	ctions.)
(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	organizationorganiz(described in linesthe5 through 12org		d) apported on listed in porting action's locuments?	(e) Amount of support
			Yes	No	
Total				►	

14 🗌 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

15

Calendar year (or fiscal year beginning in)

Gifts, grants, and contributions received. (Do

	not include unusual grants. See line 28.).						
16	Membership fees received						
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						
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						
19	Net income from unrelated business activities not included in line 18.						
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						
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						
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets						
23	Total of lines 15 through 22						
24	Line 23 minus line 17						
25	Enter 1% of line 23						
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colum	nn (e) line 24	•	26a	
	•						
b	Prepare a list for your records to show the nam governmental unit or publicly supported organiz	zation) whose tota	al gifts for 2002 t	hrough 2005 exce	eded the	26b	
-	amount shown in line 26a. Do not file this list wi	-				26c	
C	Total support for section 509(a)(1) test: Enter lin				P	200	
d						26d	
~				· · ·		26e	
	Public support (line 26c minus line 26d total) Public support percentage (line 26e (numera					26f	%
							,-
27 b	Organizations described on line 12: a Fo person," prepare a list for your records to show to Do not file this list with your return. Enter the (2005)	the name of, and e sum of such an ved from each per year, that was mo 5 through 11b, as	total amounts re- nounts for each y (2003) rson (other than "or re than the larger well as individuals	ceived in each ye year: disqualified persor of (1) the amount .) Do not file this l i	ar from, eac (2002) s"), prepare on line 25 fo st with you	ch "disqualif a list for yo or the year o r return. Afte	fied person." our records to or (2) \$5,000. er computing
	(2005)				. (2002)		
с	Add: Amounts from column (e) for lines: 15 . 17 20 .		16 21			27c	
d				· · · ·		27d	
e	Public support (line 27c total minus line 27d tot					27e	
f	Total support for section 509(a)(2) test: Enter a	mount from line	23, column (e)	▶ 27f			
g	Public support percentage (line 27e (numera				►	27g	%
ĥ	Investment income percentage (line 18, colu		•			27h	%
		umn (e) (numerated ad in line 10, 11, ch year, the nam	or 12 that receive of the contribut	ine 27f (denomin ved any unusual utor, the date and	ator)). ► grants duri d amount o	27h ng 2002 thi f the grant,	

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

(b) 2004

(c) 2003

(d) 2002

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

(a) 2005

(e) Total

Sche	dule A (Form 990 or 990-EZ) 2006		P	age 5
Pa	rt VPrivate School Questionnaire (See page 9 of the instructions.)(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
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	Yes	No
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?	31		
32 a b	Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff?	32a 32b		
c d	basis?	32c 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:			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
с	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	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?	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 10 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
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			
	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	41		
	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			
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 13 of the instructions.)

		Lobbying Expenditures During 4-Year Averaging Period					riod	
	Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2005	(c) 2004	2	(d) 2003		(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							
Pa	rt VI-B Lobbying Activity by Nonelec (For reporting only by organiza			Part VI-A) (See	page	13	of the	e 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:					Amount			
a b c d e f	Paid staff or management (Include compensation Media advertisements . Mailings to members, legislators, or the public Publications, or published or broadcast statem	on in expenses r 	eported on lines	c through h.)	· -			
g h	f Grants to other organizations for lobbying purposes							

Schee	dule A	(Form 990 or 990-EZ)	2006					P	age 7
Par	t VII		n Regarding Transfers To and Transa ganizations (See page 13 of the instruction		Relationships	With	Nonc	harit	able
51			nization directly or indirectly engage in any of the ner than section 501(c)(3) organizations) or in section	-	• •				
а	Tran	sfers from the rep	orting organization to a noncharitable exempt orga	nization of:		Г		Yes	No
	(i)	Cash				.	51a(i)		
	(ii)	Other assets				.	a(ii)		
b	Othe	er transactions:							
	(i)	Sales or exchange	es of assets with a noncharitable exempt organization	tion		.	b(i)		
	(ii)	Purchases of asse	ets from a noncharitable exempt organization			.	b(ii)		
	(iii)	Rental of facilities	, equipment, or other assets			.	b(iii)		
	(iv)	Reimbursement a	rrangements			.	b(iv)		
	(v)	Loans or loan gua	arantees			.	b(v)		
	(vi)	Performance of se	ervices or membership or fundraising solicitations			.	b(vi)		
С	Shai	ring of facilities, eq	uipment, mailing lists, other assets, or paid emplo	yees		. L	С		
d	good	ds, other assets, o	the above is "Yes," complete the following schedule r services given by the reporting organization. If the rrangement, show in column (d) the value of the good	ne organization	received less than	n fair m			
(a	a)	(b)	(c)		(d)				
Line		Amount involved	Name of noncharitable exempt organization	Description of	transfers, transactions	s, and sha	aring arra	ngeme	ents

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:		

(a) Name of organization	(b) Type of organization	(c) Description of relationship						

