

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
Internal Revenue Service

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

CLIENT'S COPY

A For the 2006 calendar year, or tax year beginning and ending

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

C Name of organization
CLARE BOOTHE LUCE POLICY INSTITUTE
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
112 ELDEN STREET STE P
 City or town, state or country, and ZIP + 4
HERNDON, VA 20170

D Employer identification number
54-1672138

E Telephone number
703-318-0730

F Accounting method: Cash Accrual
 Other (specify) _____

G Website: **WWW.CBLPOLICYINSTITUTE.ORG**

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

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **1,613,773.**

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates **N/A**
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number **N/A**
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue					
1	Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	1,494,543.		
c	Indirect public support (not included on line 1a)	1c			
d	Government contributions (grants) (not included on line 1a)	1d			
e	Total (add lines 1a through 1d) (cash \$ 1,475,290. noncash \$ 19,253.)	1e		1,494,543.	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		90,234.	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			
5	Dividends and interest from securities	5		734.	
6a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss). Subtract line 6b from line 6a	6c			
7	Other investment income (describe _____)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
		11,137.	8a		
b	Less: cost or other basis and sales expenses	8,464.	8b		
c	Gain or (loss) (attach schedule)	2,673.	8c		
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	STMT 1	8d	2,673.	
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c			
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			
11	Other revenue (from Part VII, line 103)	11		17,125.	
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		1,605,309.	
13	Program services (from line 44, column (B))	13		1,058,344.	
14	Management and general (from line 44, column (C))	14		138,469.	
15	Fundraising (from line 44, column (D))	15		247,014.	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses. Add lines 16 and 44, column (A)	17		1,443,827.	
18	Excess or (deficit) for the year. Subtract line 17 from line 12	18		161,482.	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		812,186.	
20	Other changes in net assets or fund balances (attach explanation)	20	SEE STATEMENT 2	<775.>	
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		972,893.	

Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0 • noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ 20,000 • noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	20,000.	20,000.		
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A STMT 4	143,750.	122,187.	7,188.	14,375.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
c 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)				
26 Salaries and wages of employees not included on lines 25a, b, and c	325,264.	206,122.	72,545.	46,597.
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27				
29 Payroll taxes	32,840.	22,988.	5,583.	4,269.
30 Professional fundraising fees				
31 Accounting fees	14,626.		14,626.	
32 Legal fees	1,414.		1,414.	
33 Supplies	11,486.	6,128.	4,226.	1,132.
34 Telephone	10,682.	10,058.	500.	124.
35 Postage and shipping	15,986.	13,857.	1,196.	933.
36 Occupancy	25,158.	17,611.	4,276.	3,271.
37 Equipment rental and maintenance				
38 Printing and publications	11,853.	11,853.		
39 Travel	32,152.	17,813.	2,393.	11,946.
40 Conferences, conventions, and meetings	43,753.	38,062.	5,691.	
41 Interest	16,986.	11,891.	2,887.	2,208.
42 Depreciation, depletion, etc. (attach schedule)	51,023.	35,716.	8,674.	6,633.
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 3	686,854.	524,058.	7,270.	155,526.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	1,443,827.	1,058,344.	138,469.	247,014.

STATEMENT 5

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 499,256.; (ii) the amount allocated to Program services \$ 349,323.;
 (iii) the amount allocated to Management and general \$ 0.; and (iv) the amount allocated to Fundraising \$ 149,933.

Part IV Balance Sheets (See the instructions.)

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

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	224,940.	305,582.
	46 Savings and temporary cash investments		
	47 a Accounts receivable		
	b Less: allowance for doubtful accounts		
	48 a Pledges receivable	79,718.	
	b Less: allowance for doubtful accounts		
	49 Grants receivable		
	50 a Receivables from current and former officers, directors, trustees, and key employees		
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		
	51 a Other notes and loans receivable		
	b Less: allowance for doubtful accounts		
	52 Inventories for sale or use		
	53 Prepaid expenses and deferred charges		
	54 a Investments - publicly-traded securities STMT 9 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	2,535.	53,710.
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		
	55 a Investments - land, buildings, and equipment: basis		
	b Less: accumulated depreciation		
	56 Investments - other		
	57 a Land, buildings, and equipment: basis	1,019,904.	
b Less: accumulated depreciation	249,758.		
58 Other assets, including program-related investments (describe ▶ SEE STATEMENT 7)	11,715.	11,260.	
59 Total assets (must equal line 74). Add lines 45 through 58	1,103,084.	1,220,416.	
Liabilities	60 Accounts payable and accrued expenses	15,801.	4,837.
	61 Grants payable		
	62 Deferred revenue		
	63 Loans from officers, directors, trustees, and key employees		
	64 a Tax-exempt bond liabilities		
	b Mortgages and other notes payable STMT 8	275,097.	222,834.
	65 Other liabilities (describe ▶ GIFT ANNUITY LIABILITY)		19,852.
	66 Total liabilities. Add lines 60 through 65	290,898.	247,523.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	641,843.	808,135.
	68 Temporarily restricted	170,343.	164,758.
	69 Permanently restricted		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		
	71 Paid-in or capital surplus, or land, building, and equipment fund		
	72 Retained earnings, endowment, accumulated income, or other funds		
	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 equal line 21)	812,186.	972,893.
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	1,103,084.	1,220,416.	

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

a	Total revenue, gains, and other support per audited financial statements		a	1,605,309.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	0.
c	Subtract line b from line a		c	1,605,309.
d	Amounts included on Part I, line 12, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	0.
e	Total revenue (Part I, line 12). Add lines c and d		e	1,605,309.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	1,443,827.
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	0.
c	Subtract line b from line a		c	1,443,827.
d	Amounts included on Part I, line 17, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	0.
e	Total expenses (Part I, line 17). Add lines c and d		e	1,443,827.

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

(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 & deferred compensation plans	(E) Expense account and other allowances
MICHELLE EASTON 112 ELDEN STREET, SUITE P HERNDON, VA 20170	PRESIDENT/DIRECTOR 40.00	143,750.	0.	0.
FRANK DONATELLI 1050 CONNECTICUT AVENUE, SUITE 1200 WASHINGTON, DC 20036	SECRETARY/TREASURER 0.50	0.	0.	0.
HELEN RICHARDSON 3160 GRACEFIELD ROAD, ROOM 130 SILVER SPRING, MD 20904	DIRECTOR 0.50	0.	0.	0.
DARLA PARTRIDGE 1201 PINE STREET EL DORADO, IL 62930	DIRECTOR 0.50	0.	0.	0.
RANDALL PHILLIPS 1015 BASIL RD MCLEAN, VA 22101	DIRECTOR 0.50	0.	0.	0.
MARY BETH BROWN 4224 67TH AVENUE COURT WEST UNIVERSITY PLACE, WA 98466	DIRECTOR 0.50	0.	0.	0.
BARBARA WELLS KENNY 16245 SE 31ST STREET BELLEVUE, WA 98008	DIRECTOR 0.50	0.	0.	0.
MARJI ROSS ONE MASSACHUSETTS AVE., N.W. WASHINGTON, DC 20001	DIRECTOR 0.50	0.	0.	0.

Part VI Other Information (continued)

Form with multiple rows (82a-91b) containing questions and answers. Includes fields for 'Yes', 'No', and 'N/A'. Questions cover topics like donated services, lobbying, and foreign accounts.

Part VI Other Information (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c Yes No
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a HONORARIUMS					89,000.
b EDUCATIONAL MATERIALS					1,234.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	734.	
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 personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	2,673.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a LIST RENTAL			13	17,125.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		20,532.	90,234.
105 Total (add line 104, columns (B), (D), and (E))					110,766.

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

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

Line No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).

93A	HONORARIUMS FROM SUPPLYING SPEAKERS AT PROGRAM-RELATED MEETINGS
93B	SALE OF PROGRAM-RELATED EDUCATIONAL MATERIALS

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

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

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

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

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

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

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

Yes	No

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

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

Yes	No

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

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here: *Michelle Easton* Signature of officer, Date: 7/13/07
 Type or print name and title: Michelle Easton, President

Paid Preparer's Use Only: Preparer's signature: *[Signature]*, Date: 7/13/07, Check if self-employed:
 Firm's name (or yours if self-employed), address, and ZIP + 4: FITZGERALD, SNYDER & CO., P.C., 7900 WESTPARK DRIVE, SUITE T600, MCLEAN, VIRGINIA 22102
 Phone no.: (703) 847-4600

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

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

OMB No. 1545-0047

CLIENT'S COPY
2006

Name of the organization **CLARE BOOTHE LUCE POLICY INSTITUTE** Employer identification number **54: 1672138**

Part I 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
JENNIFER JOHNSON 207 LAKEVIEW DRIVE, LOUISBURG, KANSAS	MID-AMERICA DIRECTOR 40.00	62,333.		
JEANNE O'CONNOR 4634 SUTTON OAKS DRIVE, CHANTILLY, VA	OFFICE ADMINISTRATOR 40.00	61,080.		
Total number of other employees paid over \$50,000	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	0	

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

	Yes	No
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 ▶ \$ <u>0</u> . \$ <u>0</u> . (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		X
1		X
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.		
During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
2a		X
b Lending of money or other extension of credit?		X
2b		X
c Furnishing of goods, services, or facilities?		X
2c		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	X	
2d	X	
e Transfer of any part of its income or assets?		X
2e		X
a 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	X	
b Did the organization have a section 403(b) annuity plan for its employees?	X	
3b	X	
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		X
3c		X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
3d		X
a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
4a		X
b Did the organization make any taxable distributions under section 4966?		X
4b		X
c Did the organization make a distribution to a donor, donor advisor, or related person?		X
4c		X
d Enter the total number of donor advised funds owned at the end of the tax year ▶		0
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		0.
f Enter the total number of separate funds or accounts owned at the end of the 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 in all funds or accounts included on line 4f at the end of the tax year ▶		0.

Schedule A (Form 990 or 990-EZ) 2006

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that 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 information about the supported organizations. (See page 7 of the instructions.)

(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)	(d) Is the supported organization listed in the supporting organization's governing documents?		(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.)

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

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,224,014.	664,673.	894,401.	735,005.	3,518,093.
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	56,446.	55,583.	54,485.	16,454.	182,968.
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	7,950.	3,172.	5,045.	9,520.	25,687.
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	14,091.	856.	SEE STATEMENT 11 1,358.	77.	16,382.
23 Total of lines 15 through 22	1,302,501.	724,284.	955,289.	761,056.	3,743,130.
24 Line 23 minus line 17	1,246,055.	668,701.	900,804.	744,602.	3,560,162.
25 Enter 1% of line 23	13,025.	7,243.	9,553.	7,611.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 71,203.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 626,528.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 3,560,162.
d Add: Amounts from column (e) for lines: 18 25,687. 19 626,528. 22 16,382. 26b					26d 668,597.
e Public support (line 26c minus line 26d total)					26e 2,891,565.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 81.2200%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2005) (2004) (2003) (2002)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2005) (2004) (2003) (2002)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

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

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

Schedule A (Form 990 or 990-EZ) 2006

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)

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

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for all electing organizations
	N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	0.
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	0.
38 Total lobbying expenditures (add lines 36 and 37)	38	0.
39 Other exempt purpose expenditures	39	0.
40 Total exempt purpose expenditures (add lines 38 and 39)	40	0.
41 Lobbying nontaxable amount. Enter the amount from the following table -		
If the amount on line 40 is -		
Not over \$500,000	20% of the amount on line 40	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	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	\$1,000,000	
42 Grassroots nontaxable amount (enter 25% of line 41)	42	0.
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	0.
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	0.

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.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	
45 Lobbying nontaxable amount	0.				0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures	0.				0.
48 Grassroots nontaxable amount	0.				0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures	0.				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

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

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS											
8	BUILDING CAPITALIZED REFINANCE	071498SL	40.00	16		119,338.			119,338.	22,373.		3,975.
18	COSTS	112999	120M	43		2,275.			2,275.	1,368.		228.
29	UNITS Q AND R, CONDOS	100301SL	39.00	16		323,218.			323,218.	41,636.		8,288.
62	BUILDING IMPROVEMENTS	110102SL	39.00	16		162,304.			162,304.	13,180.		4,162.
63	BUILDING IMPROVEMENTS	110102SL	39.00	16		1,235.			1,235.	101.		32.
84	BUILDING	010103SL	39.00	16		88,526.			88,526.	8,430.		2,270.
108	HEAT PUMP	020706SL	7.00	16		3,200.			3,200.			419.
	* 990 PAGE 2 TOTAL BUILDINGS					700,096.		0.	700,096.	87,088.	0.	19,374.
	FURNITURE & FIXTURES											
5	FILE CABINET	010194SL	5.00	16		679.			679.	679.		0.
62	FILE CABINETS	060196SL	5.00	16		1,363.			1,363.	1,342.		0.
10	PLAQUE / FRAMING ETC	071798SL	7.00	16		784.			784.	784.		0.
11	FLAG AND POLE	072998SL	7.00	16		175.			175.	175.		0.
12	ART AND FRAMING	072098SL	7.00	16		126.			126.	126.		0.
13	IKEA CONF ROOM FURNITURE	062698SL	7.00	16		3,808.			3,808.	3,808.		0.
19	MEDIUM OAK BOOKCASE	070600SL	7.00	16		370.			370.	291.		53.
21	FRAMING ARTWORK	021900SL	7.00	16		453.			453.	379.		65.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
24	ARTWORK FRAMED	021900SL		5.00	16	423.			423.	423.		0.
3130	CHAIRS	110102SL		7.00	16	19,094.			19,094.	8,639.		2,728.
32	SOFA	110102SL		7.00	16	998.			998.	453.		143.
334	MAGAZINE TABLES	110102SL		7.00	16	1,797.			1,797.	814.		257.
34	SOFA	110102SL		7.00	16	2,508.			2,508.	1,134.		358.
35	CONFERENCE TABLE	110102SL		7.00	16	4,640.			4,640.	2,099.		663.
362	HALF CYLINDER TABLES	110102SL		7.00	16	1,368.			1,368.	618.		195.
377	KEYBOARD TRAYS	110102SL		7.00	16	1,232.			1,232.	557.		176.
38	FREESTANDING PEDESTAL	110102SL		7.00	16	322.			322.	146.		46.
397	CPU HOLDERS	110102SL		7.00	16	658.			658.	298.		94.
402	SURF MOUNT OVERHEAD	110102SL		7.00	16	2,477.			2,477.	1,121.		354.
41	WALL MOUNT OVERHEAD	110102SL		7.00	16	875.			875.	396.		125.
42	CORNER 4 FIXED HIGH TECH	110102SL		7.00	16	4,112.			4,112.	1,859.		587.
436	LATERAL FILES	110102SL		7.00	16	5,408.			5,408.	2,448.		773.
449	TACKBOARDS	110102SL		7.00	16	2,350.			2,350.	1,064.		336.
459	LATERAL FILES	110102SL		7.00	16	5,100.			5,100.	2,308.		729.
46	STAND 9 FREESTANDING PED	110102SL		7.00	16	2,322.			2,322.	1,051.		332.
474	DUPLEX TABLES	110102SL		7.00	16	314.			314.	142.		45.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
487	LAMINATED TOPS	110102SL		7.00	16	2,678.			2,678.	1,213.		383.
49	ROOM DIVIDER	110102SL		7.00	16	1,870.			1,870.	846.		267.
502	MAHARAM FABRCI	110102SL		7.00	16	838.			838.	380.		120.
516	CHORUS STACKERS	110102SL		7.00	16	1,022.			1,022.	462.		146.
524	CENTER DRAWERS	110102SL		7.00	16	540.			540.	244.		77.
53	SURF MOUNT SINGLE HIGH	110102SL		7.00	16	3,870.			3,870.	1,751.		553.
542	CONFERENCE CORE UNIT	110102SL		7.00	16	2,829.			2,829.	1,279.		404.
557	BBF'S	110102SL		7.00	16	5,798.			5,798.	2,622.		828.
566	CORNER NO PIVOT MOD	110102SL		7.00	16	6,650.			6,650.	3,008.		950.
574	TASKLIGHT LAMPS	110102SL		7.00	16	378.			378.	171.		54.
587	LAMINATED TOPS	110102SL		7.00	16	3,093.			3,093.	1,400.		442.
644	LAT FILE	010103SL		7.00	16	1,962.			1,962.	840.		280.
654	PED STAND	010103SL		7.00	16	1,007.			1,007.	432.		144.
664	DUPLEX TABLES	010103SL		7.00	16	314.			314.	135.		45.
671	CORNER DESK	010103SL		7.00	16	863.			863.	369.		123.
684	CORNER DESKS	010103SL		7.00	16	3,474.			3,474.	1,488.		496.
698	DESKS	010103SL		7.00	16	3,754.			3,754.	1,608.		536.
702	DESKS	010103SL		7.00	16	1,170.			1,170.	501.		167.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
711	DESK	010103SL		7.00	16	218.			218.	93.		31.
723	POWER CONNECTIONS	010103SL		7.00	16	148.			148.	63.		21.
7323	SCREENS	010103SL		7.00	16	5,453.			5,453.	2,337.		779.
7410	SCREEN CONNECTORS	010103SL		7.00	16	234.			234.	99.		33.
758	STABILIZERS	010103SL		7.00	16	291.			291.	126.		42.
7613	FLIPPER DOORS	010103SL		7.00	16	3,853.			3,853.	1,650.		550.
7713	TASK LIGHTS	010103SL		7.00	16	913.			913.	390.		130.
781	INNER TONE LIGHT	010103SL		7.00	16	496.			496.	213.		71.
794	FILING CABINETS	010103SL		7.00	16	2,988.			2,988.	1,281.		427.
805	FILING CABINETS	010103SL		7.00	16	789.			789.	339.		113.
81	CHAIRS	010103SL		7.00	16	12,446.			12,446.	5,334.		1,778.
82	DISPLAY CASE	102203SL		7.00	16	1,588.			1,588.	492.		227.
85	TORSO FORMS & PLEXIGLASS BASE	012804SL		7.00	16	1,600.			1,600.			229.
109	CONFERENCE BACKDROP	063006SL		7.00	16	3,347.			3,347.			239.
	* 990 PAGE 2 TOTAL FURNITURE & FIXTURES					140,230.		0.	140,230.	64,320.	0.	18,744.
	MACHINERY & EQUIPMENT											
1	ENVELOPE FEEDER	020195SL		5.00	16	1,074.			1,074.	1,074.		0.
2	COMPUTER	030196SL		5.00	16	2,050.			2,050.	2,016.		0.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
3	ZIP DRIVE	040196SL	5.00 SL	5.00	16	789.			789.	776.		0.
	SCANNER, ZIIP DRIVE											
4	AND CD ROM	100196SL	5.00 SL	5.00	16	1,222.			1,222.	1,200.		0.
7	NOT IDENTIFIED	063097SL	5.00 SL	5.00	16	148.			148.	148.		0.
14	BOSE RADIO	101398SL	7.00 SL	7.00	16	365.			365.	365.		0.
15	PENTIUM 200 W/S	042699SL	7.00 SL	7.00	16	1,362.			1,362.	1,300.		62.
16	TRAVAN 20 GIG B/U	021799SL	7.00 SL	7.00	16	511.			511.	499.		12.
17	XEROX COPIER	041399SL	7.00 SL	7.00	16	7,315.			7,315.	7,054.		261.
20	DELL COMPUTER	020500SL	5.00 SL	5.00	16	1,883.			1,883.	1,883.		0.
22	DELL COMPUTER	041400SL	5.00 SL	5.00	16	2,817.			2,817.	2,817.		0.
23	DELL COMPUTER	052600SL	5.00 SL	5.00	16	2,886.			2,886.	2,886.		0.
25	PRINTER	092701SL	5.00 SL	5.00	16	3,143.			3,143.	2,673.		470.
26	WINDOWS OFFICE 2000	042001SL	5.00 SL	5.00	16	2,190.			2,190.	2,044.		146.
27	DELL COMPUTER	062701SL	5.00 SL	5.00	16	2,465.			2,465.	2,219.		246.
28	INTEGRATED DESK TOP COMPUTER SYS (3)	042001SL	5.00 SL	5.00	16	1,504.			1,504.	1,405.		99.
59	PHONES	110102SL	5.00 SL	5.00	16	1,070.			1,070.	678.		214.
60	ACS COMMUNICATIONS SYSTEM	110102SL	5.00 SL	5.00	16	12,250.			12,250.	7,758.		2,450.
61	CATV CABLE	110102SL	5.00 SL	5.00	16	4,956.			4,956.	3,138.		991.
83	MISC ADDITIONS	070403SL	5.00 SL	5.00	16	769.			769.	385.		154.

528102
07-28-06

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
86	LAPTOP W/PRINTER/SCANNER/FAX	020104SL		5.00	16	1,500.			1,500.			300.
87	COMPUTER #D7250033	060104SL		5.00	16	935.			935.	374.		187.
88	COMPUTER #GTH-070904	070104SL		5.00	16	1,045.			1,045.	418.		209.
89	COMPUTER #GTH-020105	010105SL		5.00	16	1,042.			1,042.	208.		208.
90	HP COLOR LASERJET 3550 PRINTER	040105SL		5.00	16	1,049.			1,049.	157.		210.
91	COMPUTERS (3)	040105SL		5.00	16	1,572.			1,572.	236.		314.
92	STUDENT COMPUTERS (4)											
92	& MONITORS	112805SL		5.00	16	4,662.			4,662.	1,662.		932.
93	TV STAND FOR MICHELLE											
93	OFFICE	112805SL		7.00	16	500.			500.	6.		71.
94	CONFERENCE ROOM TV	120105SL		7.00	16	1,170.			1,170.	14.		167.
95	DVD CAMCORDER	120105SL		7.00	16	1,000.			1,000.	12.		143.
96	HP COLOR LASERJET PRINTER	123105SL		5.00	16	7,899.			7,899.	1,500.		1,580.
97	LAPTOP COMPUTERS HP ZE2000T SERIES	123105SL		5.00	16	3,007.			3,007.	473.		601.
110	DELL COMPUTER	012306SL		5.00	16	2,979.			2,979.			546.
111	DELL COMPUTER	012306SL		5.00	16	999.			999.			183.
112	HP LAPTOP	012306SL		5.00	16	2,202.			2,202.			404.
113	HP PRINTER	021606SL		5.00	16	10,163.			10,163.			1,694.
	* 990 PAGE 2 TOTAL MACHINERY & EQUIPMENT					92,493.		0.	92,493.	47,378.	0.	12,854.
	LAND											

FORM 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES			STATEMENT	1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)	
SECURITIES	11,137.	8,464.	0.	2,673.	
TOTAL TO FORM 990, PART I, LINE 8	11,137.	8,464.	0.	2,673.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES		STATEMENT	2
DESCRIPTION				AMOUNT
CHANGE IN VALUE OF ANNUITIES				<775.>
TOTAL TO FORM 990, PART I, LINE 20				<775.>

FORM 990	OTHER EXPENSES				STATEMENT	3
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING		
ADVERTISING	240.	168.	41.	31.		
AVANCEMENT CHARGES	3,965.	2,776.	674.	515.		
COMPUTER AND WEBSITE SERVICES	48,686.	48,126.	317.	243.		
CONSULTANTS	3,521.	2,315.	594.	612.		
DIRECT MAIL	413,597.	296,590.		117,007.		
DUPLICATES AND SUBSCRIPTIONS	2,023.	2,023.				
EQUIPMENT	5,877.	4,114.	999.	764.		
FINANCIAL FEES	2,459.	1,721.	418.	320.		
FILMS, BOOKS, LITERATURE	12,278.	12,278.				
HONORARIUMS	79,500.	79,500.				
HOUSE FILE MAILINGS	65,067.	35,000.		30,067.		
INSURANCE	3,792.	2,654.	645.	493.		
LIST RENTALS	164.		164.			
NEWSLETTERS	20,592.	17,732.		2,860.		
PHOTOGRAPHY	4,988.	4,988.				
PUBLIC RELATIONS	4,310.	3,017.	733.	560.		
REAL ESTATE TAX	12,897.	9,028.	2,192.	1,677.		
SOFTWARE	2,898.	2,028.	493.	377.		
TOTAL TO FORM 990, LN 43	686,854.	524,058.	7,270.	155,526.		

FORM 990 OFFICER COMPENSATION ALLOCATION STATEMENT 4
PART II, LINE 25A

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
SHELLE EASTON	143,750.			143,750.
PROGRAM SERVICES	122,187.			122,187.
MANAGEMENT AND GENERAL	7,188.			7,188.
FUNDRAISING	14,375.			14,375.
TOTAL PROGRAM SERVICES				122,187.
TOTAL MANAGEMENT AND GENERAL				7,188.
TOTAL FUNDRAISING				14,375.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PART II, LINE 25A				<u>143,750.</u>