	qqn_T	Ex	empt Organization Busiı	ness	Income	Tax Ret	urn	0	MB No. 1545-06	87
Form	330 .		(and proxy tax under	sec	tion 6033((e))			2006	
	ment of the Treasury		or calendar year 2006 or other tax year ending , 20 .	begin		 , 2006, ar	ıd		n to Public Inspe (c)(3) Organizatio	
$\overline{\Delta}$	Check box if		Name of organization (Check box if name	change	ed and see instruc	tions.)	D	_	er identification n	
B Exe	address changed empt under section		_					(Employees on page 9.)	' trust, see instructions	for Block D
		Print	Number, street, and room or suite no. If a P.O	. box, s	see page 9 of instr	ructions.		9/	1	
	408(e) 220(e)	or					Е		d business activit	-
		Туре	City or town, state, and ZIP code					(See instru	uctions for Block E on	ı page 9.)
	529(a)									
	ok value of all assets		oup exemption number (See instructi			page 9.) ►				
			eck organization type 🕨 🗌 501(c) o		ation 🗌 50	01(c) trust	401	1(a) tru:	st 🗌 Othe	r trust
			n's primary unrelated business activity							
			corporation a subsidiary in an affiliated of			sidiary controlle	ed grou	. ?qu	► ☐ Yes	□No
			d identifying number of the parent corpora	ation.				. ,		
	he books are in c					elephone nun)	
Pai			de or Business Income		(A) Income	(B)	Expens	es	(C) Net	
	Gross receipts or									
b			c Balance	1c 2						
2	_		hedule A, line 7)	3						
3	•		ine 2 from line 1c	4a						
4a			e (attach Schedule D)	4a 4b						+
b			97, Part II, line 17) (attach Form 4797)	4c						+
c	Capital loss dedu			5						+
5			hips and S corporations (attach statement)							+
6	Rent income (Sci		•	7						+
7			d income (Schedule E)							
8	organizations (Sc		yalties, and rents from controlled e F)	8						
9	Investment inco	me o	f a section 501(c)(7), (9), or (17)							
	organization (Sc	hedule	e G)	9						
10			ity income (Schedule I)	10						
11	Advertising incom			11						
12	Other income (See	page	11 of the instructions; attach schedule.)	12						
13 Par			through 12	13	instructions	for limitation	s on	doduc	tions)	
rai			tributions, deductions must be dire							
44	· · · · · · · · · · · · · · · · · · ·							T		<u> </u>
14 15	•		ers, directors, and trustees (Schedule							+
16										
17										+
18										
19										
20			s (See page 14 of the instructions for							
21	Depreciation (atta	ach Fo	orm 4562)		21					
22	Less depreciation	n clain	ned on Schedule A and elsewhere or	retur	n 22a			22b		
23	Depletion							23		
24			ed compensation plans							
25	Employee benefit	t progi	rams					25		
26	Excess exempt e	expens	es (Schedule I)					26		
27			ts (Schedule J)					27		
28			ch schedule)					28		
29			lines 14 through 28					29		
30			able income before net operating loss							
31			uction (limited to the amount on line	-						
32			able income before specific deduction							_
33			nerally \$1,000, but see line 33 instruc							
34			Exable income. Subtract line 33 from fract zero or line 32							

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Par	t III	Tax Computation								
35		zations Taxable as Cor _l								
		lled group members (section								
а		our share of the \$50,000, \$				ckets (ir	n that order):			
L	(1) \$	(2)		(-,		<u> </u>				
D		rganization's share of: (1) A litional 3% tax (not more th								
С		tax on the amount on line						35c		
36		Taxable at Trust Rates.					ncome tax on			
		ount on line 34 from: 🗌 1								
37		tax. See page 16 of the ins	structions				•	37		
38										
39 Par	t IV	Add lines 37 and 38 to line Tax and Payments	s 350 or 36, whicheve	er applies	<u> </u>			39		
			och Form 1119: truete	attach Ec	rm 1116)	40a				
40a b	_	tax credit (corporations atta credits (see page 17 of the			'''' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	40b				
		business credit. Check he	·							
Ū		n 3800 Form(s) (specify				40c				
d		for prior year minimum tax			I	40d				
е	Total c	redits. Add lines 40a throu	ugh 40d					40e		
41								41		
42		tes. Check if from: Form 4255] Form 8866	Other (at	tach schedule) .	42		
43		ax. Add lines 41 and 42 .				44a	· · · ₁ . ·	43		
44a		nts: A 2005 overpayment				44b				
b c		stimated tax payments . posited with Form 8868 .				44c				
d		organizations: Tax paid or				44d				
е	_	withholding (see instruction	·		•	44e				
f		for federal telephone excise	,			44f				
g		redits and payments:								
		m 4136			_ Total ► L	44g		45		
45	-	payments. Add lines 44a th						45 46		
46		ted tax penalty (see page 4						47		
47 48		e. If line 45 is less than the ayment. If line 45 is larger					> ernaid >	48		
49		e amount of line 48 you want:					Refunded ►	49		
Par	t V	Statements Regarding	Certain Activities	s and O	ther Informa	ntion (s	see instruction	s on p	age 18)	
1	At any	time during the 2006 calend	dar year, did the orga	ınization l	nave an interes	st in or	a signature or	other a	authority 🖺	res No
		financial account (bank, se								
_		D F 90-22.1. If YES, enter		_	=				I .	
2		he tax year, did the organizati see page 5 of the instruct						a toreigi	n trust?	
3		ne amount of tax-exempt in								
		A—Cost of Goods Sold					•			
1	Invento	ry at beginning of year	1	6	Inventory at e	nd of y	ear	6		
2		ses	2		Cost of good	-				
3	Cost of	flabor	3		6 from line 5					
4a		nal section 263A costs	4-		Part I, line 2			7		
L		schedule)	4a 4b		Do the rules		•			es No
b 5		osts (attach schedule) Add lines 1 through 4b	5		property prod to the organiz					
	Unde	r penalties of perjury, I declare that I ha	ave examined this return, inclu	ding accomp	anying schedules an	d stateme	nts, and to the best			lief, it is true
Sig	n corre	ct, and complete. Declaration of prepa	rer (other than taxpayer) is ba	sed on all info	ormation of which pr	eparer has	s any knowledge.	Marriel	IDC 41: '''	
Her					•			the prepa	IRS discuss this arer shown below	w (see
	Sign	ature of officer	Date		Title	1	L	instruction		∐ No
Paid		Preparer's signature			Date		Check if	Prep	arer's SSN or F	TIN
Prep	arer's	Firm's name (or					self-employed L	1		
Use	Only	yours if self-employed),					Phone no.	()	

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(see instructions on page	•	ai Pr	operty	and Persoi	nai Prope	erty L	eased with Real	ı Pr	operty)	
1 Description of property										
(1)										
(2)										
(3)										
(4)										
(+)	2 Rent receiv	od or a	ccrued							
(a) From personal property (if the for personal property is more than 50%)	percentage of rent an 10% but not	(l	o) From rea	al and personal rent for personal rent is based on	property exce	eeds			ected with the income in o) (attach schedule)	
(1)										
(2)										
(3)										
(4) Total		Total								
Total income. Add totals of co							Total deductions. here and on page 1, line 6, column (B)		t I,	
Schedule E—Unrelated				see instruction	ns on nad	e 20)	inic o, ocianin (b)		<u>, </u>	
Officació E Officiated	Debt i mano	<u> </u>	001110 (Deductions directly con	necte	ed with or allocable to	
1 Description of de	tv		2 Gross income from or allocable to debt-financed			debt-financed		d property		
Description of debt-financed proper				property		(a) S	straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(4)							(attach schedule)		(attach schedule)	
(1)										
(2)										
(3)										
(4)	T									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	allocable to debt-financed debt-financed property		erty	divided by			Gross income reportable column 2 × column 6)		8 Allocable deductions (column 6 \times total of columns 3(a) and 3(b))	
(1)					%					
(2)					%					
(3)					%					
(4)					%					
Totals					•		here and on page 1, l, line 7, column (A).		ter here and on page 1, rt I, line 7, column (B).	
Total dividends-received dedu										
Schedule F—Interest, Ar	nnuities, Roya	alties	, and R	ents From	Controlle	d Or	ganizations (see i	nstr	ructions on page 21)	
			Exempt	t Controlled	Organizatio	ns				
1 Name of Controlled Organization	2 Employer Identification Num	iber	3 Net unr	related income e instructions)	4 Total of sp payments r	ecified	5 Part of column 4 tha included in the controll organization's gross included	ling	6 Deductions directly connected with income in column 5	
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Orga	nizations									
							40.0		44.5 1 11 11 11	
7 Taxable Income	e 8 Net unrelated income (loss) (see instructions)			9 Total of specified payments made			10 Part of column 9 that included in the controll organization's gross incompanization.	11 Deductions directly connected with income in column 10		
(1)										
(2)										
(3)										
(4)										
							Add columns 5 and 10 Enter here and on page Part I, line 8, column (A	e 1,	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).	
Totals						_				
10(a)3										

				Deductions	4 Set-aside	3		otal deductions	
1 Description of income	2 Amount of inco	ome		ctly connected ach schedule)	(attach schedu			set-asides (col. 3 plus col. 4)	
(1)									
(2)									
(3)									
(4)									
	Enter here and on Part I, line 9, colun							re and on page 1 ne 9, column (B).	
Totals ▶									
Schedule I—Exploited Exer (see instructions on page 22)	npt Activity Inc	ome, C	Other T	han Advertisir	ig Income				
						•			
1 Description of exploited activity	2 Gross unrelated business income from trade or business	dire connec produc unre	penses ectly ted with ction of lated s income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	rom activity that is not unrelated		7 Excess exempt expenses (column 6 minus column 5, but no more than column 4).	
(1)									
(2)									
(3)									
(4)									
(1)	Enter here and on page 1, Part I, line 10, col. (A).	page 1	re and on , Part I, col. (B).					Enter here and on page 1, Part II, line 26.	
Totals	.	· ·	,					· ·	
Schedule J—Advertising In	come (see instru	ctions o	n page	23)					
Part I Income From Pe	riodicals Repor	ted on	a Con	solidated Bas	s				
1 Name of periodical	2 Gross advertising income		irect ing costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income			7 Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1)									
(2)									
(3)									
(4)		1							
(4)									
Totals (carry to Part II, line (5)) . I									
	eriodicals Repo			parate Basis	(For each peri	odical	listed i	n Part II, fill i	
Totals (carry to Part II, line (5)) . I Part II Income From Percolumns 2 throug	eriodicals Repo			parate Basis	(For each peri	odical	listed i	n Part II, fill i	
	eriodicals Repo			parate Basis	(For each peri	odical	listed i	n Part II, fill i	
Totals (carry to Part II, line (5))	eriodicals Repo			parate Basis	(For each peri	odical	listed i	n Part II, fill i	
Totals (carry to Part II, line (5)) . I Part II Income From Percolumns 2 throug (1) (2) (3)	eriodicals Repo			parate Basis	(For each peri	odical	listed i	n Part II, fill i	
Totals (carry to Part II, line (5)) . I Part II Income From Percolumns 2 throug (1) (2) (3)	eriodicals Repo			parate Basis	(For each peri	odical	listed i	n Part II, fill i	
Totals (carry to Part II, line (5))	eriodicals Report 7 on a line-by Enter here and on page 1, Part I, line 11, col. (A).	-line ba		parate Basis	(For each peri	odical	listed i	n Part II, fill i Enter here and on page 1, Part II, line 27.	
Totals (carry to Part II, line (5))	eriodicals Repo	Enter her page 1 line 11,	re and on , Part I, col. (B).					Enter here and on page 1,	
Totals (carry to Part II, line (5))	eriodicals Repo	Enter her page 1 line 11,	re and on , Part I, col. (B).		nstructions on p	page 23	3) Compensati	Enter here and on page 1,	
Totals (carry to Part II, line (5))	eriodicals Repo	Enter her page 1 line 11,	re and on , Part I, col. (B).	Trustees (see	nstructions on partial and a second of time devoted to business	page 23	3) Compensati	Enter here and on page 1, Part II, line 27.	
Totals (carry to Part II, line (5))	eriodicals Repo	Enter her page 1 line 11,	re and on , Part I, col. (B).	Trustees (see	nstructions on p 3 Percent of time devoted to business	page 23	3) Compensati	Enter here and on page 1, Part II, line 27.	
Totals (carry to Part II, line (5))	eriodicals Repo	Enter her page 1 line 11,	re and on , Part I, col. (B).	Trustees (see	nstructions on p 3 Percent of time devoted to business 9 9	page 23	3) Compensati	Enter here and on page 1, Part II, line 27.	
Totals (carry to Part II, line (5))	eriodicals Repo	Enter her page 1 line 11,	re and on , Part I, col. (B).	Trustees (see	nstructions on p 3 Percent of time devoted to business	page 23 0 4 0	3) Compensati	Enter here and on page 1, Part II, line 27.	