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SCANNED JAN 0 A 2008

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)



	artment of t nal Revenu	he Treasury e Service The organization may have	to use a copy of this return to	•	state rep	ortina reaure	ements.		Open to Pr Inspect		
		006 calendar year, or tax year beginning		and endi					mapeou	<u> </u>	
	Check if	C Name of organization	D Emp	over ide	entification numb						
D	pplicable	use IRSU.S.A. NATIONAL KARA	ምም-ጉሶ				o cinpi	Uyer lut		61	
Y	Address change						٩·	-16	46543		
	Name	type Number and street (or P.O. box if mail is n	ot dolwared to street address)			Room/suite		bone n			
F	_ichange _initial	Specific 1631 MESA AVE.	or delivered to street address)			A-1			77-6925		
-	return Final	Instruc-	<u>, a</u> a aa a		¥	<u>3-</u> Τ		nting metho		•	
-	_lreturn ∏Amende	City or town, state or country, and ZIP + 4	80906						▶ MODIFIE	Accrual	
-	∐return ∏Applicat			te i	Landl						
		must attach a completed Schedule A (Form 9							on 527 organiza		
						his a group r				X No	
		► WWW • USANKF • ORG ion type (check only one) ► 🗶 501(c) (3) <	t no) 4947(a)(1) or	-	• •	es," enter nu/ all affiliates i			es▶ <u>N/A</u> [/A □ Yes		
					`` (lf'	No," attach a	list.)			No	
	Check her	· · · · · · · · · · · · · · · · · ·		^s ł	H(d) İst	his a separate	e return	filed by	an or-	X No	
		re normally not more than \$25,000. A return is not requ o file a return, be sure to file a complete return.	nreu, but il the organization	-							
						up Exemptio			on is not required	to attach	
	21000 100	eipts: Add lines 6b, 8b, 9b, and 10b to line 12 🕨	524,77	i		n. B (Form 99					
_		Revenue, Expenses, and Changes in					0,000	LZ, 01 5	5011).		
Г				Dalan			r				
		Contributions, gifts, grants, and similar amounts receiv	/eu.	4.							
	-	Contributions to donor advised funds	r		-	22,5	12				
	1	Direct public support (not included on line 1a)	-	<u>1b</u>		<u> </u>	13.				
		Indirect public support (not included on line 1a)	vo 10)								
	d		iment contributions (grants) (not included on line 1a) 1d 22,513, noncash \$)								
	1		dd lines 1a through 1d) (cash \$ 22,513. noncash \$) i service revenue including government fees and contracts (from Part VII, line 93)								
	2										
	3	Membership dues and assessments	•								
	4	Interest on savings and temporary cash investments									
	5	Dividends and interest from securities	5 6a								
		Gross rents									
		Less: rental expenses		6-							
e	1	Net rental income or (loss). Subtract line 6b from line 6	Dd .				, ŀ	6c 7			
Revenue		Other investment income (describe Gross amount from sales of assets other									
Be	oa		(A) Securities	8a		(B)_Other					
	.	than inventory Less; cost or other basis and sales expenses						1			
		Gain or (loss) (attach schedule)		8b 8c				:			
		Net gain or (loss). Combine line 8c, columns (A) and (L I					8d			
	d 9	Special events and activities (attach schedule). If any a		hara 🕨			ł	- 00			
			f contributions reported on line 1b)	9a							
	l a b	Less: direct expenses other than fundraising expenses		9b		<u></u>					
	1	Net income or (loss) from special events. Subtract line		30				9c			
	10 a	Gross sales of inventory, less returns and allowances		10a			F				
	1	Less: cost of goods sold		10b							
	1	Gross profit or (loss) from sales of inventory (attach si	u chedule) Subtract line 10h froi		0a			10c			
	11	Other revenue (from Part VII, line 103)			Ju		ŀ	11			
	12	Total revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1	Oc. and 11				h	12	524	771.	
	13	Program services (from line 44, column (B))						13		623.	
es	14	Management and general (from line 44, column (C))					ļ	14		734.	
Expenses	15	Fundraising (from line 44, column (D))		1En			ŀ	15		<u></u>	
ğ	16	Payments to affiliates (attach schedule)									
ш	17	Total expenses. Add lines 16 and 44, column (A)				1	ł	<u>16</u> 17	508	357.	
	18		ne 12 SI NOV 2	7 200	<u>07 10</u>	1		18		,414.	
t st	19	Not assess as fund halanana at hannanan of upon /from	In 72 I Only NUT B	•	10		ŀ	19		346.	
Net Assets	20	Other changes in net assets or fund balances (attach e	xplanation)	Ad K	Hate	ement	1	20		846.	
<	21	Net assets or fund balances at end of vear. Combine li	nes 18, 19 and 20 OGDE	JV, V			-	21		,914.	
6230 01-1		Other changes in net assets or fund balances at beginning of year (from Net assets or fund balances at end of year. Combine lin LHA For Privacy Act and Paperwork Reduction Act	Notice, see the separate instr	uctions	. 2	<u> </u>	-17			90 (2006)	
- · ·		· · · · · · · · · · · · · · · · · · ·			Ø	U V	/			- ,/	

U.S.A.	NATIONAL	KARATE-DO

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Form 990 (2006) FEDERATIC	DN,	INC.		91-16	46543 Page 2
		itions must complete column anizations and section 4947(
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	4				
If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedule	· ·				
(cash \$0 • noncash \$0					
If this amount includes foreign grants, check here 🕨 🛄	220				
23 Specific assistance to individuals (attach					
schedule)	23				
24 Benefits paid to or for members (attach	0.4				
schedule) 25a Compensation of current officers, directors, key	24				
employees, etc. listed in Part V-A	25a	ο.	0.	0.	0.
b Compensation of former officers, directors, key	2.54			0.	
employees, etc. listed in Part V-B	25b	0.	ο.	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)	25c				
26 Salaries and wages of employees not					
included on lines 25a, b, and c	26	25,200.	12,600.	12,600.	
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	2,000.	1,000.	1,000.	
30 Professional fundraising fees	30				
31 Accounting fees	31	3,945.		3,945.	
32 Legal fees	32	64,340.	32,170.	32,170.	····
33 Supplies	33	37,062.	37,062.		
34 Telephone	34	9,547.	4,774.	4,773.	
35 Postage and shipping	35	19,003.	9,502.	9,501.	
36 Occupancy	36	51,597.	25,799.	25,798.	
37 Equipment rental and maintenance	37				
38 Printing and publications	38				
39 Travel	39				
40 Conferences, conventions, and meetings	40	947.		947.	
41 Interest	41	15,639.	15,639.		<u></u>
42 Depreciation, depletion, etc (attach schedule)43 Other expenses not covered above (itemize):	42	13,035.			
a INSURANCE	43a	108,440.	108,440.		
b TOURNAMENT COSTS	436		144,951.		
BAD CHECKS	43c		4,100.		
BANK CHARGES	43d		13,621.		
e MISCELLANEOUS	43e		7,965.	0.	
f	43f				
9	43g				
44 Total functional expenses. Add lines 22a through					
43g. (Organizations completing columns (B)-(D),					
carry these totals to lines 13-15)	44	508,357.	417,623.	90,734.	0.
Joint Costs. Check 🕨 🥅 If you are following					
Are any joint costs from a combined educational campa					Yes X No
If "Yes," enter (i) the aggregate amount of these joint co			i i) the amount allocated to	-	<u>N/A</u> ;
(iii) the amount allocated to Management and general \$;	N/A ; and (iv) the amount allocated to	Fundraising \$	<u>N/A</u>
01-23-07					Form 990 (2006)

•		U.S.A	. NATIONA	L KARATE	E-DO					
Form 990 (2006)			ATION, IN					91-	1646543	Page 3
Part III Sta	tement of	Program	Service Acco	mplishmen	ts (See the instri	uctions)				
How the public p	perceives an o	organization		be determined	d by the informat	ion presented o	n its returi		particular organiza fore, please make	
What is the orga	nization's pril	mary exempt							Brooram Son	
_			DY FOR KA	RATE-DO	IN THE U	JSA.			Program Sen Expenses	
All organizations clients served, p	must descrit ublications is	be their exem sued, etc. D	npt purpose achiev Iscuss achievemen charitable trusts mu	rements in a cleast	ear and concise r measurable. (Se	manner. State th ction 501(c)(3) a	and (4)		(Required for 50 and (4) orgs., 4947(a)(1) trust optional for oth	and ls; but
a SPONSO	RS NATI	CONAL C	OMPETITIO	NS AND	PARTICIPA	ATES				
IN INT	ERNATIC	DNAL CC	MPETITION	S					_	
(Grants and a	allocations	\$) If this amou	unt includes fore	ign grants, chec	k here			<u>623.</u>
(Grants and C	allocations	\$) If this amou	unt includes fore	ign grants, cheo	k here		 	
(Grants and d	allocations	\$) If this amou	unt includes fore	ign grants, cheo	k here	► [
Grants and		\$) If this amou	unt includes fore	ign grants, chec	k here			
e Other progra	,		ule)					. —		
(Grants and					unt includes fore		k here	▶└		<u></u>
T Total of Pro	gram Servic	e Expenses	(should equal line	44, column (B),	, Program service	es) .	<u>.</u>		<u>417,</u>	

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U.S.A. NATIONAL KARATE-DO FEDERATION, INC.

<u>91-1646543</u>	² age 4
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Pa	rt IV	Balance Sheets (See the instructions)				
Note		ere required, attached schedules and amounts uld be for end-of-year amounts only	within the description column	(A) Beginning of year		(B) End of year
	45	Cash non-interest bearing		31,823	45	72 954
	45 46	Cash - non-interest-bearing Savings and temporary cash investments			45	72,854.
	40	Savings and temporary cash investments			40	
	47 a	Accounts receivable	47a			
	b	Less allowance for doubtful accounts	47b		47c	
	48 a	Pledges receivable Less. allowance for doubtful accounts	48a		40.0	
	49	Grants receivable	48b		48c 49	
		Receivables from current and former officers	directors trustees and		49	
	50 a	key employees			50a	
	h	Receivables from other disqualified persons	(as defined under section	···		
Assets	Ŭ	4958(f)(1)) and persons described in section			50b	
	51 a	Other notes and loans receivable	51a			
As	b	Less: allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use		22,341	52	3,008.
	53	Prepaid expenses and deferred charges			53	
	54 a	Investments - publicly-traded securities	► 🗌 Cost 🔄 FM	IV	54a	
	b	Investments - other securities	► 🛄 Cost 📃 FN	IV	54b	· · · · · · · · · · · · · · · · · · ·
	55 a	Investments - land, buildings, and	1 1			
		equipment. basis	55a			
	.					
		Less: accumulated depreciation	55b		55c	
	56	Investments - other	57a 150,99	າ	56	
		Land, buildings, and equipment basis Less: accumulated depreciation Stmt 2			57c	40,052.
	58	Other assets, including program-related investme		0. 33,430		40,052.
		(describe ►) 2,708	58	
	59	Total assets (must equal line 74) Add lines	110,330		115,914.	
	60	Accounts payable and accrued expenses	······································	2,984		
	61	Grants payable			61	
	62	Deferred revenue			62	
bilities	63	Loans from officers, directors, trustees, and	key employees		63	
ilidi	64 a	a Tax-exempt bond liabilities			64a	
Lial	6	Mortgages and other notes payable			64b	
	65	Other liabilities (describe 🕨		_)	65	
	66	Total liabilities. Add lines 60 through 65		2,984	. 66	0.
		anizations that follow SFAS 117, check here	► X and complete lines			
	0.90	67 through 69 and lines 73 and 74.				
sec	67	Unrestricted		107,346	67	115,914.
lan	68	Temporarily restricted			68	
Ba	69	Permanently restricted		. <u> </u>	69	
pur	Orga	anizations that do not follow SFAS 117, che	eck here 🕨 🛄 and			
ц г	1	complete lines 70 through 74.				
ts o	70	Capital stock, trust principal, or current func		70		
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, a		71		
t A:	72	Retained earnings, endowment, accumulate			72	
Ne	73	Total net assets or fund balances. Add lines 67 t				
	74	(Column (A) must equal line 19 and column (B) m	107,346		<u>115,914.</u>	
	74	Total liabilities and net assets/fund balan	110,330	• 74	115,914.	

Form 990 (2006)

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Form 990 (2006)

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	U.S.A. NATIONAL KARATH	E-DO					_
	n 990 (2006) FEDERATION, INC.			<u>91-</u>	<u>16465</u>	<u>43</u>	Page 5
Pá	art IV-A Reconciliation of Revenue per Audited Finar	ncial Statements W	lith Revenue p	er Ke	turn (Se	e the	
	instructions)			<u> </u>			
а	Total revenue, gains, and other support per audited financial statemer	nts			a	<u>524</u>	<u>.771.</u>
b	Amounts included on line a but not on Part I, line 12	1	1				
1	Net unrealized gains on investments		b1				
2	Donated services and use of facilities		b2				
3	Recoveries of prior year grants	Ļ	b3				
4	Other (specify).		b4				
	Add lines b1 through b4				b		0.
C	Subtract line b from line a				c	524,	<u>,771.</u>
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	524	771.
Pa	art IV-B Reconciliation of Expenses per Audited Fina	Incial Statements V	With Expenses	per F	Return		
a	Total expenses and losses per audited financial statements				a	508	<u>,357.</u>
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				ь		Ο.
c	Subtract line b from line a				с	508	,357.
d	Amounts included on Part I, line 17, but not on line a:						
1	Investment expenses not included on Part I, line 6b		d1				
-	Other (specify):		d2				
-	Add lines d1 and d2				d		Ο.
e	Total expenses (Part I, line 17). Add lines c and d				e	508	,357.
	art V-A Current Officers, Directors, Trustees, and Ke	y Employees (List ea	ach person who wa	is an of	ficer, dıre	ctor, tru	istee,
	or key employee at any time during the year even if they we			T			
	(A) Name and address	(B) Title and average hours per week devoted to	(C) Compensation (If not paid, enter	(D)Cor emplo	ntributions to byee benefit & deferred	E) E acco	Expense ount and
		position	-0)	comper	isation plans	other a	llowances
						Ì	
<u>Se</u>	e Statement 3		0.		0.		0.
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			1	1			
				1			
		1	1	1		1	

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Form 990 (2006)

orm 990 (2006) FEDERATION, INC.			91-1646			age (
Part V-A Current Officers, Directors, Trustees, and Ke	y Employees (continu	ed)			Yes	Ν
5 a Enter the total number of officers, directors, and trustees permitted to	o vote on organization bus	iness at board				
meetings		▶	19			
b Are any officers, directors, trustees, or key employees listed in Form	990, Part V-A, or highest c	ompensated emp	loyees	ĺ		
listed in Schedule A, Part I, or highest compensated professional and						
Part II-A or II-B, related to each other through family or business relat the individuals and explains the relationship(s)	ionships? If "Yes," attach	a statement that I	dentifies	766		
		• •	ŀ	75b		<u>X</u>
c Do any officers, directors, trustees, or key employees listed in Form S						
listed in Schedule A, Part I, or highest compensated professional and Part II-A or II-B, receive compensation from any other organizations, v						
organization? See the instructions for the definition of "related organ				75c		Σ
If "Yes," attach a statement that includes the information described i	n the instructions		F			
d Does the organization have a written conflict of interest policy?				75d	х	i i
Part V-B Former Officers, Directors, Trustees, and Key	y Employees That R	eceived Com	pensation o	r Ot	her	
Benefits (If any former officer, director, trustee, or key em						
the year, list that person below and enter the amount of cor	npensation or other benef		· ·· ·			
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid,	employee benefit	l ào	E) Expe ccount	and
		enter -0-)	compensation plan	s Othe	er allow	anc
RIAN LYNCH						
631 MESA AVE, SUITE A-1	•	•				
OLORADO SPRINGS, CO 80906	0.	0.	0	•		(
COL MERA AVE OUTER A 1						
631 MESA AVE, SUITE A-1 OLORADO SPRINGS, CO 80906	0.	0.	0			(
OLORADO SPRINGS, CO _80908	0.	0.	<u> </u>	•		
						_
				<u> </u>		
		-				
				+		
			-			
Part VI Other Information (See the instructions.)			1		Yes	N
6 Did the organization make a change in its activities or methods of co	nducting activities? If "Ye	" attach a detaile	d			<u> </u>
statement of each change		,		76		:
Were any changes made in the organizing or governing documents t	out not reported to the IRS	?	ľ	77		
If "Yes," attach a conformed copy of the changes.						
8 a Did the organization have unrelated business gross income of \$1,00	0 or more during the year	covered by this re	turn?	78a		2
b If "Yes," has it filed a tax return on Form 990-T for this year?	U U		N/A	78b		
9 Was there a liquidation, dissolution, termination, or substantial contra	action during the year? If '	Yes," attach a sta	· F	79		2
0 a Is the organization related (other than by association with a statewid			Г			
membership, governing bodies, trustees, officers, etc , to any other				80a		2
b If "Yes," enter the name of the organization N/A						
	and check whether it is	exempt or	nonexempt		1	
1 a Enter direct or indirect political expenditures. (See line 81 instruction	-)	81a	0.		1	1

Ь	Did the	organization	file	Form	1120-POL	for this	vear?
 <u>v</u>		organization					

U.S.A. NATIONAL KARATE-DO

Part VI Chiter Information (continue) Yes No 28 Dot the organization received contact services or the use of materials, equipment, or facilities at no charge or at substantially tasts than fair metal value? 324 X 39 Dift Yes, "you may indicate the value of these dams here 'Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III) 328 X 39 D the organization comply with the public inspection requirements for returns and exemption applications? B Dot the organization include with every solicitation an express statement that such contributions or gfts were not tark declustible? 338 X 36 Dot the organization include with every solicitation an express statement that such contributions or gfts were not tark declustible? N/A 84a 50 Dot the organization make on sibb, do not complete 85C through 85h below unless the organization received a waver for proxy tax owel for the prox year. N/A 85b 6 Dot the organization maker anount 5 from members 1 Taxable amount of lobbying and policital expenditures (the 85d less 55h) 2 Dost the organization dick to pay the section 6033(e) (1/A) dues notices were seried. 85c N/A 7 Taxable amount of lobbying and policital expenditures (the 85d less 55h) 3 Diraction 2 pagnization site (to pay the section 6033(e) (1/A) dues notices were form the around on line 85r 5 Dirol(1/2) organizations. Enter	For	m, S	90 (2006) FEDERATION,	INC.				91-164	<u>6543</u>		age 7
less than fair rent availe? B2a X b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part II. B2b N/A 3 Do the organization comply with the public inspection requirements for returns and exemption applications? B3a X 4 Do the organization comply with the duclosure requirements reating to quip or quip contributions? N/A 5 Do the organization comply with the duclosure requirements relating to quip or quip contributions? N/A 6 Do the organization include with every solicitation an express statement that such contributions? N/A 6 Do the organization include with every solicitation an express statement that such contributions or gifts may ever to tax deductible? N/A 6 Do the organization rake on the provide statement that such contributions or gifts may even on tax deductible with every solicitation an express statement that such contributions or gifts may even on the set of the provide statement that such contributions or gifts may even on the set of the provide statement that such contributions or gifts may even on the set of the provide statement to exerce the set of the provide statement to mark and the amount on the 851? N/A 7 Datable amount of bobying and policial expenditures 85 N/A 8 Do the organization exerce do thes allocating to modeluctible lobbying and policial expenditures to the following tax year? So //A 9 Costs receipts, included on the 12, for public use of club facilites 85 N/A 9 So receipts, included on the 12, for public us	Pa	art	VI Other Information (continued)		<u>.</u>					Yes	No
b If Yes, You may indicate the value of these terms here Do not include this amount as revenue in Part III. Image: Section 1 or as an expense in Part III. Image: Section 1	82 a	1 [Did the organization receive donated services of	the use of n	naterials, equipm	ent, or facilities at	no charge or a	at substantially			
amount as revenue in Part I or as an expense in Part II. (See instructions in Part III) (32) N/A 33 a Dd the organization comply with the bublic inspection requirements for returns and exemption applications? (See instructions?) (See instructinstructinstinstructionstructions include on inse Str		I	ess than fair rental value?						<u>82a</u>		X
(See nstructions in Part III) 182b N/A 33 a Dd the organzation comply with the dialosure requirements relating to quid pro quo controbutions? 531 X 43 b Dd the organzation comply with the dialosure requirements relating to quid pro quo controbutions? 531 X 44 Dd the organzation comply with the dialosure requirements relating to quid pro quo controbutions? 83a X 45 Dd the organzation comply with the dialosure requirements relating to quid pro quo controbutions? N/A 84a 45 Dd the organzation nalce difference view solicitation an express statement that such combutions or gifts were not tax deductible? N/A 85a 45 507(cl/(2), (5) or (6) organzations: a Were substantially all dues nondeductible by members? N/A 85a 47 bd the organzation make only in-house lobbying expenditures of \$2,000 or less? N/A 85a 48 de Section 152(6) lobbying and policical expenditures 85c N/A 49 boast no organization express tatement on line 851? N/A 85a N/A 40 boast no organization appet to action express tatement on line 851? N/A 85a N/A 5016(cl/(2) organzations. Enter a linetation fees and capital contributions included on line 12, for public use of club facilities 85a N/A 85a 5016(cl/(2) organzat	b)	f "Yes," you may indicate the value of these iter	ns here Do r	not include this						
83 a Dd the organization comply with the public inspection requirements for returns and exemption applications? 83 a X 9 b dt the organization comply with the disclosure requirements relating to quid pro quid contributions? 83 a X 9 a Dd the organization comply with the disclosure requirements relating to quid pro quid contributions? N/A 9 a Dd the organization actions and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A 8 b Dd the organization actions a Were substantially all dues nondeductible by members? N/A 8 50 fol(/d), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A 8 50 fol(/d), (5), or (6) organization relations from members 856 N/A 9 available onthe provy tax owed for the provy year. 856 N/A 9 Costion 162(e) lobbying and policical expenditures (ine 85d less 85e) 851 N/A 9 Does the organization effect to pay the section 6033(e) (11/A) dues notices were sent, does the organization action to be sold to a seleciable to nondeductible lobbying and policical expenditures for the following tax year? N/A 8 50 fol(/d) organizations. Enter a linitiation fees and capital contributions included on line 12, for public use of club facilites 851 N/A 8 50 fol(/d) organizations. Enter a linitiation elses and capital contributions active the adjust section 4310 P //A 851 N/A 9 Of (c)(0) organi				Part II.							
b Dot the organization comply with the disclosure requirements reliating to quid pro quo contributions? B33 X 84 Dot the organization solicit any contributions or gifts that were not tax deductible? N/A 85 Diff Vies,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A 85 507(c/(A) (S) or (B) organizations. a Were substantially all dues nondeductible by members? N/A 85 507(c/(A) (S) or (B) organizations. a Were substantially all dues nondeductible by members? N/A 85 507(c/(A) (S) or (B) organizations. a Were substantially all dues nondeductible by members? N/A 85 507(c/(A) (A) as answered to their Bia or BSD. N/A 85 Section 1623(c)(1)(A) dues notices the organization agree to add the amount on line 857 N/A 85 507(c/(A) organizations. Enter a Initiation fees and capital contributions included on line 851 N/A 16 Social (1)(A) dues notices were sent, does the organization agree to add the amount on line 851 N/A 85 507(c/(C) organizations. Enter a Initiation fees and capital contributions included on line 12. N/A 17 besites asparate form the organization on agree to add the amount on line 851 N/A 85 507(c/(C) organizat		(See instructions in Part III)				82b	<u>N/A</u>	-		
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b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A 507(c(A), (5), or (6) organizations: a Were substantially all dues nondeductible by members? N/A 850 If 'Yes,' was answered to there 83 or 850, do not complete 85c through 85h below unless the organization received a waver for prox tax owed for the pror year. N/A 2 Dues, assessments, and smilar amounts from members If 'Ass.' was answered to there 83 or 85b, do not complete 85c through 85h below unless the organization received a waver for prox tax owed for the pror year. If axable amount of below pand political expenditures in 85d in M/A 8 Section 162(e) lobbying and political expenditures in 85d less 85e) If axable amount on bine 85r N/A 8 Fores incomparity and political expenditures in end and a manuut on line 85r N/A 85g 9 Does the organization elect to pay the section 6033(e) (1)A dues notices were sent, does the organization are to ad the amount on line 85r N/A 85g 9 S07(c(r) organizations. Enter a linitation fees and capital contributions included on line 12 N/A 85g 9 Gross income from other sources against amounts of use resources. (Do not net amounts due or paid to other sources against amounts due or received from themo 85g X/A 8 A any time during the year, did the organiz	b			•			ions?			X	
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waver for proxy tax owed for the pnor year. 2 c Dues, assessments, and similar amounts from members 35t Section 15(20) lobbying and political expenditures 35t Aggregate nondeductible amount of section 6033(9(1)(A) dues notices 35t Taxable amount of lobbying and political expenditures (ine B5d less 85e) 35t Does the organization elect to pay the section 6033(9(1)(X) dues notices were sent, does the organization agree to add the amount on line 85f N/A 85 Bord (1)(X) dues notices were sent, does the organization agree to add the amount on line 85f N/A 85 Bord (1)(X) dues notices were sent, does the organization agree to add the amount on line 85f N/A 85 Bord (1)(X) dues notices were sent, does the organization agree to add the amount on line 85f N/A 85 Bord (1)(X) dreamations. Enter a limitation fees and capital contributions included on line 12. N/A 86 Gross receipts, included on line 12, for public use of club facilities 85a N/A 87 S01(c)(7) organizations. Enter: a limitation fees mants able organization on partnership, or an entify disregarded as separate from the organization under Regulations sections 301.7701:3 mit "Yes," complete Part Xi 85 85 88 X At any time during the year, did the organization dunge Hegulation sections 301.7701:3 mit "Yes," attach	b							-	850		
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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 following tax year? N/A 86 501(c)(7) organizations. Enter: a linitiation fees and capital contributions included on line 12, for public use of club facilities 86a N/A 87 501(c)(7) organizations. Enter: a Gross income from members or shareholders 87a N/A 88 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? 88a X 89 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 1*es,* complete Part XI 88a X 89 501/c)(2) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911▶				•	•	line 85f?	001	<u>.</u>	850		
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following tax year? N/A 85h 86 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on time 12 86a N/A 87 501(c)(7) organizations. Enter: a Gross income from members or shareholders 87a N/A 87 501(c)(12) organizations. Enter: a Gross income from them on the sources. (Do not net amounts due or paut to other sources against amounts due or received from them) 87a N/A 88 A tary 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? 88a X 81 A tary 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 88a X 83 8501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911> 0.; section 4955> 0. b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 secess benefit transaction during the year or did t become aware of an excess benefit transaction from a prior year? 89b X c Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? 89b X d All o	•			•	+						
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 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 89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911▶				ganization ur	nder Regulations	sections 301.770	1-2 and 301.77	701-3?			
section 512(b)(13)? If "Yes," complete Part XI 88b X 89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: 0.; section 4911 ▶			-						88a		<u> </u>
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: 0.; section 4915 ▶ 0. b 501(c)(3) and 501(c)(4) organizations. 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? 0. 89 b X c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0. 0. 89 b X d Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? 0. 89 c X f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89 c X g For supporting organizations and sponsoring organization, are excess business holdings at any time during the year? N/A 89 d X 90 a List the states with which a copy of this return is filed ▶ None 90 b 1 b 1631 MESA AVE., COLORADO SPRINGS, CO 20 c 10 c 21 c 21 c 48 oga b 1631 MESA AVE., COLORADO SPRINGS, CO Ves No	b		, , , , , ,	, directly or i	ndirectly, own a	controlled entity v	within the mear				
section 4911▶ 0.; section 4912▶ 0.; section 4955▶ 0. b 501(c)(3) and 501(c)(4) organizations. 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? 0. 89b X c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0. 0. 89b X d Enter: Amount of tax on line 89c, above, reimbursed by the organization 0. 0. 89e X f All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 89e X g For supporting organizations and sponsoring organization, have excess business holdings at any time during the year? N/A 891 X 90 a List the states with which a copy of this return is filed ▶None 90b 1 1 b Lost the states with which a copy of this return is filed ▶None 90b 1 b Number of employees employed in the pay period that includes March 12, 2006 90b 1 91 a The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ 304-722-4512 2 Located at ▶ 1631 MESA AVE , COLORADO SPRINGS, CO ZIP + 4 ▶ 80906 2 b At any time during the calendar year. did the organization h	••							₽	880		<u> </u>
b 501(c)(3) and 501(c)(4) organizations. 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? 89b X if "Yes," attach a statement explaining each transaction 0. 89b X c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0. 0. 89b X d Enter: Amount of tax on line 89c, above, reimbursed by the organization 0. 0. 89e X f All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 89f X g For supporting organizations and sponsoring organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A 90 a List the states with which a copy of this return is filed ▶ None 90b 1 b Number of employees employed in the pay period that includes March 12, 2006 90b 1 91 a The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ 304 - 722 - 4512 2 Located at ▶ 1631 MESA AVE., COLJORADO SPRINGS, CO ZIP + 4 ▶ 80906 Yes No b At any time during the calendar year. did the organization have an interest in or a signature or other authority over Yes No <th>89 a</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>0</th> <th></th> <th></th> <th></th>	89 a							0			
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 c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organization, have excess business holdings at any time during the year? N/A. 90 a List the states with which a copy of this return is filed ▶ None b Number of employees employed in the pay period that includes March 12, 2006 90b 11 The books are in care of ▶ THE ORGANIZATION Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO b At any time during the calendar year. did the organization have an interest in or a signature or other authority over Yes No						/	-	<u> </u>			ĺ
If "Yes," attach a statement explaining each transaction 89b X c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0. /ul>	L.										ĺ
 c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization <i>all organizations.</i> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? <i>f All organizations</i> Did the organization acquire a direct or indirect interest in any applicable insurance contract? <i>g For supporting organizations and sponsoring organizations maintaining donor advised funds.</i> Did the supporting organization, nave excess business holdings at any time during the year? N/A. 90 a List the states with which a copy of this return is filed ▶ None b Number of employees employed in the pay period that includes March 12, 2006 90b 1 1631 MESA AVE., COLORADO SPRINGS, CO ZIP + 4 ▶ 80906 At any time during the calendar year. did the organization have an interest in or a signature or other authority over 					cos benefit trans	action non a pho	yean		895		x
sections 4912, 4955, and 4958 0. d Enter: Amount of tax on line 89c, above, reimbursed by the organization 0. e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 89e X f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89f X g For supporting organizations and sponsoring organization, have excess business holdings at any time during the year? N/A 89g 1 90 a List the states with which a copy of this return is filed ▶ None 90b 1 b Number of employees employed in the pay period that includes March 12, 2006 90b 1 91 a The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ 304-722-4512 304-722-4512 Located at ▶ 1631 MESA AVE . , COLORADO SPRINGS , CO ZIP + 4 ▶ 80906 2 b At any time during the calendar year. did the organization have an interest in or a signature or other authority over Yes No	c				or discualified p	ersons during the	vear under		000		
d Enter: Amount of tax on line 89c, above, reimbursed by the organization 0. 0. e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 89e X f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89f X g For supporting organizations and sponsoring organization, nor a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A 89g 89g 90 a List the states with which a copy of this return is filed ▶ None 90b 1 b Number of employees employed in the pay period that includes March 12, 2006 90b 1 91 a The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ 304-722-4512 304-722-4512 Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO ZIP + 4 ▶ 80906 2 b At any time during the calendar year. did the organization have an interest in or a signature or other authority over Yes No	Ŭ				er er quantoa p	and a start of the		0 -			
 e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? 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? N/A. 90 a List the states with which a copy of this return is filed ▶ None b Number of employees employed in the pay period that includes March 12, 2006 90 b 1 91 a The books are in care of ▶ THE ORGANIZATION Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO b At any time during the calendar year. did the organization have an interest in or a signature or other authority over 	Ċ		, .	rsed by the c	organization		•				
 f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? 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? N/A 90 a List the states with which a copy of this return is filed ▶ None b Number of employees employed in the pay period that includes March 12, 2006 90 b 1 91 a The books are in care of ▶ THE ORGANIZATION Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO b At any time during the calendar year. did the organization have an interest in or a signature or other authority over 	e					y to a prohibited ta	x shelter trans		89e		х
or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A 89g 90 a List the states with which a copy of this return is filed ▶None b Number of employees employed in the pay period that includes March 12, 2006 91 a The books are in care of ▶ THE ORGANIZATION Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO b At any time during the calendar year. did the organization have an interest in or a signature or other authority over Yes No	f		-						89f		
90 a List the states with which a copy of this return is filed ▶ None b Number of employees employed in the pay period that includes March 12, 2006 91 a The books are in care of ▶ THE ORGANIZATION Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO 304-722-4512 ZIP+4 ▶ 80906 b At any time during the calendar year. did the organization have an interest in or a signature or other authority over	g	, /	For supporting organizations and sponsoring org	anizations m	aintaining donor	advised funds. Die	the supporting	ig organization,			
b Number of employees employed in the pay period that includes March 12, 2006 90b 1 91 a The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ 304-722-4512 Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO ZIP + 4 ▶ 80906 b At any time during the calendar year. did the organization have an interest in or a signature or other authority over Yes No		¢	or a fund maintained by a sponsoring organizati	on, have exc	ess business ho	dings at any time	during the yea	r? N/A	89g		İ
91 a The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ 304-722-4512 Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO ZIP+4 ▶ 80906 b At any time during the calendar year. did the organization have an interest in or a signature or other authority over Yes No	90 a	a l	ist the states with which a copy of this return is	s filed ▶<u>No</u>:	ne						
Located at ▶ 1631 MESA AVE., COLORADO SPRINGS, CO ZIP+4 ▶ 80906 b At any time during the calendar year. did the organization have an interest in or a signature or other authority over Yes No	b				des March 12, 20	006	l				
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over Yes No	91 a						_ Telephone no				
									8090		N1-
a tinancial account in a foreign country (such as a bank account, securities account, or other financial account)?	b		• • • •			-	-			Tes	<u> </u>
If By an Annual second se						ccount, or other fir	nancial accour	n)?	916		X
If "Yes," enter the name of the foreign country N/A						00 1 Depart of F					
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				anements ic	- FUTTI ID F 90		ordigi i Dallik				

Form **990** (2006)

U.S.A. NATIC		ATE-DO		91-1	1646543 Page 8
Part VI Other Information (continued)					Yes No
 c At any time during the calendar year, did the orgal If "Yes," enter the name of the foreign country ▶ 92 Section 4947(a)(1) nonexempt charitable trusts fill and enter the amount of tax-exempt interest rece 	•N ng Form 990 in	/A lieu of Form 1041-C			910 X N/A
Part VII Analysis of Income-Producing	Activities (S	ee the instructions)			
Note: Enter gross amounts unless otherwise		business income	+	by section 512, 513, or 514	(E)
indicated	(A) Business	(B) Amount	(C) Exclu-	(D) Amount	Related or exempt
93 Program service revenue:	code		sion code	Anoun	function income
a <u>TOURNAMENT FEES</u>				· · · · · · · · · · · · · · · · · · ·	346,097.
b					<u></u>
c					
d					<u> </u>
e					
f Medicare/Medicaid payments g Fees and contracts from government agencies					.
94 Membership dues and assessments			<u> </u>		156,161.
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate				-	
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets					
other than inventory			 		
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
D			+ $+$		
c			+	·····	
d					
104 Subtotal (add columns (B), (D), and (E))		0.	†	0.	502,258.
105 Total (add line 104, columns (B), (D), and (E))	L1.		I		502,258.
Note: Line 105 plus line 1e, Part I, should equal the am	ount on line 12,	Part I.		-	
Part VIII Relationship of Activities to the	Accomplis	hment of Exemp	ot Purpo	ses (See the instruction	ons.)
Line No. Explain how each activity for which income is rep			d important	ly to the accomplishment o	f the organization's
exempt purposes (other than by providing funds)	for such purpose	es).			
See Statement 4					
Part IX Information Regarding Taxable	Subaidiaria	and Disrogard	od Entil	ioo (0 4	
(A) (B)	Subsidiarie			(D)	(E)
Name, address, and EIN of corporation, Percentage o	f	Naturi			
partnership, or disregarded entity ownership inter	%				
N/A	%				
	%				
	%				
Part X Information Regarding Transfe	and the second se	ed w			
(a) Did the organization, during the year, receive any funds.					
(b) Did the organization, during the year, pay premiums, di					

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

•	U.S.A. NATIONAL KARATE-1	00			
Form 990			91-164	16543 F	Page 9
Part X			 Complete only if the organi 	zation is a	
	controlling organization as defined in section 512(b)(13).	N/A	.		
100 5				Yes	No
	I the reporting organization make any transfers to a controlled entity a	as defined in section 5	12(b)(13) of the Code? If "Yes	,"	
cor	nplete the schedule below for each controlled entity.	(D)			L
	(A) Name, address, of each	(B) Employer	(C) Description of	(D) Amount	of
	controlled entity	Identification Number	transfer	transfe	
		Number			<u> </u>
a					
				1	
ь					
°					
	Totals			Yes	No
107 Did	I the reporting organization receive any transfers from a controlled er	ntity as defined in secti	on 512(b)(13) of the Code2 If		
	mplete the schedule below for each controlled entity.			,,	
	(A)	(B)	(C)	(D)	-H
	Name, address, of each	(B) Employer Identification	Description of	Amount	of
	controlled entity	Number	transfer	transfe	r
a					
_					
.					
p					
_					
°					
		· · · · · · · · · · · · · · · · · · ·			
	Totals				
				Yes	No
108 Did	the organization have a binding written contract in effect on August	17, 2006, covering the	interest, rents, royalties, and		
anr	nuities described in question 107 above?			·	
	Under penalties of perufy, declare that I have examined this return, including accompany and complete Declaration of preparer (other than officer) is based on all information of whi	ring schedules and statements ch preparer has any knowledg	s, and to the best of my knowledge and ge	belief, it is true, co	rrect,
Please	Lell Cl O C			547	
Sign	Signature of officer		Date		
Here	Signature of officer ST. DAIGE -	CEO	Date	ista.	7
	Type or print name and title			5707	
	Preparer's			N or PTIN (See Ger	n Inst X)
Paid	signature Steven B. Bass	s s s s s s	elf- mployed		
Preparer's	Firm's name (or Mongon & Bass Inc. P.S.				
Use Only	self-employed), 3500 188th SW. Suite 234				
	address, and ZIP + 4 Lynnwood, WA 98037-4716		Phone no. ► 425	778-523	32
				Form 990	

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SCHEDULI	EA	Organization Ex	rempt	Under Sectio	n 501(c)(3		MB No 1545-0047
(Form 990 or	990-EZ)	(Except Private Fo	- oundation) a	and Section 501(e), 501(f), 5 Nonexempt Charitable Trust	501(k),		2006
Department of the Internal Revenue Se		Supplementary Inf MUST be completed by the ab		on-(See separate ins	-		2000
Name of the org		U.S.A. NATIONAL KARA	-			Employer identifi	
Part I	Comp	FEDERATION, INC. ensation of the Five Highest Pa	aid Emp	loyees Other Than	Officers, Dire	<u>91_16465</u> ctors, and Ti	
	-	e 2 of the instructions. List each one. If there a	-	iter "None.")			
(a) Name ai	id 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
	· – – – –						
Total number of over \$50,000	other emp	loyees paid		0			<u>[</u>
Part II-A	-	ensation of the Five Highest Page 2 of the instructions. List each one (whether		pendent Contracto		ional Service	es
		and address of each independent contractor pa			(b) Type of s	service	(c) Compensation
None							
							
Total number of \$50,000 for pro	fessional s	ervices		0			
Part II-B	(List eac	ensation of the Five Highest Pa h contractor who performed services other tha there are none, enter "None." See page 2 of the	an professio	nal services, whether individi		ervices	
	(a) Name	and address of each independent contractor pa	aid more tha	an \$50,000	(b) Type of	service	(c) Compensation
None							
							
	- -						
	other corr						
\$50,000 for oth		ractors receiving over		0			

U.S.A. NATIONAL KARATE-DO

623111 01-18-07

Schedule A (F	orm 9	990 or 99	90-EZ) 2006	FΕ	DE	RATION,	INC.
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	TTIL 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			ĺ
l	public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the			
	obbying activities 🕨 \$ (Must equal amounts on line 38, Part VI-A, or			
I	ine i of Part VI-B.)	1		X
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.			ĺ
1 	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?	2a		X
bl	ending of money or other extension of credit?	_2b	_	X
c I	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			1
t	the organization determines that recipients qualify to receive payments.)	3a		X
bi	Dd the organization have a section 403(b) annuity plan for its employees?	3b		X
C	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space,			1
t	the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f			
;	and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b		X
C	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		X
di	Enter the total number of donor advised funds owned at the end of the tax year			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			C
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on			
	ine 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			_(
	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

91-1646543 Page 2

U.S.A. NATIONAL KA	ARATE-DO
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Schedule	e A (Fo	orm 990 or 990-EZ) 2006 FEDERATION, I	NC.			91-16	46543	Page 3
Part I	V	Reason for Non-Private Foundation S	status (See pages 4 th	rough 7 of the instructio	ns.)			
5 [6 [7 [8 [9] 10 [11a [11b]		e organization is not a private foundation because it is: (I A church, convention of churches, or association of ch A school. Section $170(b)(1)(A)(i)$. (Also complete Part A hospital or a cooperative hospital service organization A federal, state, or local government or governmental u A medical research organization operated in conjunction and state An organization operated for the benefit of a college or (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial pa Section $170(b)(1)(A)(v_i)$. (Also complete the Support A community trust. Section $170(b)(1)(A)(v_i)$. (Also com An organization that normally receives; (1) more than a receipts from activities related to its charitable, etc., fur	urches. Section 170(b)(1 V.) n. Section 170(b)(1)(A)(ii nit. Section 170(b)(1)(A) n with a hospital. Section university owned or oper university owned or oper schedule in Part IV-A.) nplete the Support Sched 33 1/3% of its support from)(A)(I). (v). 170(b)(1)(A)(iii). Enter t ated by a governmental u overnmental unit or from ule in Part IV-A.) m contributions, membe	unit. Section the general ership fees, a	170(b)(1)(A)(w public. nd gross).	
13 [Its support from gross investment income and unrelate by the organization after June 30, 1975. See section 5 An organization that is not controlled by any disqualifie 509(a)(3). Check the box that describes the type of sup Type I Type II	ed business taxable incom 09(a)(2). (Also complete d persons (other than fou porting organization:	the Support Schedule in	from busines (Part IV-A.)	ses acquired		tion
		Provide the following information at	out the supported organ	izations. (See page 7 of	the instruction	ons.)		
		(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) (e)			
					Yes	No		
 Total								
14 [An organization organized and operated to test for pub	lic safety. Section 509(a)	(4). (See page 7 of the in	structions.)	F		ī

Schedule A (Form 990 or 990-EZ) 2006

U.S.A. NATIONAL KARATE-DO Schedule A (Form 990 or 990-EZ) 2006 FEDERATION, INC.

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91-1646543 Page 4

Pa	rt IV-A	Support Schedule (C	omplete only if you che e worksheet in the insti	ecked a box on line 10	, 11, or 12.) Use cash	method of ac	countin	g.
	ndar year (or							
<u>begi</u> 15	nning in) Gifts grants	s, and contributions	(a) 2005	(b) 2004	(c) 2003	(d) 2002		(e) Totai
15	received. (D grants. See	o not include unusual line 28.)	135,370.	196,570.	197,625.	172,5		702,065.
16		p fees received			4,377.	22,5	<u>500.</u>	26,877.
17	merchandis performed, facilities in a related to th	pts from admissions, e sold or services or furnishing of any activity that is ie organization's etc., purpose	650,932.	534,405.	446,928.	261,6	594.	1,893,959.
18	Gross incor dividends, a payments o tion 512(a)(unrelated bi (less section	ne from interest, amounts received from in securities loans (sec- (5)), rents, royalties, and usiness taxable income n 511 taxes) from acquired by the		554,4051	110/2200	2017		1,055,555.
	organization	n after June 30, 1975	16,000.		14,811.	5,5	500.	36,311.
19	Net income	from unrelated business						
		t included in line 18						
20	organization	es levied for the n's benefit and either expended on its behalf						
21	furnished to governmen Do not inclu or facilities	f services or facilities b the organization by a tal unit without charge. ude the value of services generally furnished to vithout charge						
22	Other incon	ne. Attach a schedule. Ide gain or (loss) from		34,948.	See Stateme 26,924.	nt 5 64,8	803.	126,675.
23		is 15 through 22	802,302.	765,923.	690,665.	526,9		2,785,887.
24	Line 23 min		151,370.	231,518.	243,737.	265,		891,928.
25	Enter 1% of		8,023.	7,659.	6,907.		270.	
26	Organizatio	ons described on lines 1	0 or 11: a Enter 2% of			· · · · · · · · · · · · · · · · · · ·		N/A
b	Prepare a li unit or publ Do not file t	st for your records to she licly supported organizate this list with your return	ow the name of and amou ion) whose total gifts for 2 . Enter the total of all thes	nt contributed by each pe 002 through 2005 excee e excess amounts	erson (other than a gover		26b	<u>N/A</u>
	••		test: Enter line 24, column				26c	<u>N/A</u>
a	Add; Amou	nts from column (e) for l	ines: 18	19 26b		_ ▶	26d	N/A
	Dublic cuor	oort (line 26c minus line :		200		—	26e	N/A
	••	•	e (numerator) divided by	line 26c (denominator))			26f	<u>N/A %</u>
27			: a For amounts included			disqualified perso		
	records to s		ital amounts received in e					
	(2005)	,	. (2004)	0. (2	003)	0. (20)02)	0.
b			hat was received from eac	•				
-	and amoun described ii	t received for each year, n lines 5 through 11b, as	that was more than the la well as individuals.) Do n ir (2), enter the sum of the	rger of (1) the amount o ot file this list with your	n line 25 for the year or (return. After computing t	2) \$5,000. (Incluine difference between the	de ın the	list organizations
	(2005)	• •	• (2004)	0 . (2)02)	0.
c	• •	nts from column (e) for l	· · ·	702,065.		877.	,	•••
•					21	•	27c	2,622,901.
d	Add: Line 2			d line 27b total		0. ►	27d	0.
e	Public supp	port (line 27c total minus	line 27d total)			🕨	27e	2,622,901.
f		•	test: Enter amount on line	23, column (e)	► 27f 2,	785,887	• 7	
g	Public su	pport percentage (lin	e 27e (numerator) div	ided by line 27f (deno	ominator))		27g	94.1496%
			e (line 18, column (e)				27h	1.3034%
	show, for eac	ants: For an organizatio h year, the name of the c t include these grants in	n described in line 10, 11, ontributor, the date and a line 15.	, or 12 that received any L mount of the grant, and a	unusual grants during 200 I brief description of the n	02 through 2005, nature of the gran	, prepare t. Do not	a list for your records to file this list with your
6231	31 01-1 <u>8-07</u>		N	one			Schedu	ile A (Form 990 or 990-EZ) 2006

	U.S.A. NATIONAL KARATE-DO			
		<u>1-16465</u>		Page 5
Pa	rt 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)	<u> </u>		
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,			
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	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		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:	1		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32:	1	<u> </u>
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	_321	<u> </u>	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	32	-	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	320	1	
	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:			1
а	Students' rights or privileges?	33:		-
b	Admissions policies?	331		-
C	Employment of faculty or administrative staff?	330	1	
d	Scholarships or other financial assistance?	33		
e	Educational policies?	33	- T	
f	Use of facilities?	33		
g	Athletic programs?	33		
h		33	h	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
				1
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34		
b	Has the organization's right to such aid ever been revoked or suspended?	34	D	
0 5	If you answered "Yes" to either 34a or b, please explain using an attached statement.			1
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		<u> </u>

Schedule A (Form 990 or 990-EZ) 2006

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Schedule A (Form 990 or 990-EZ) 2006	FEDERATION	, INC.
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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) 91-1646543 Page 6

N/A

			y an engine of gamzation that filed i of th	13/00)					
Che	eck 🕨 a	If the organization belon	gs to an affiliated group. C	heck 🕨	► b[f you che	ecked "a" and "limited contro	ol" provisions apply.
			Lobbying Expenditures	1.)				(a) Affiliated group totals	(b) To be completed for all electing organizations
								N/A	
36	Total lob	bying expenditures to influence	public opinion (grassroots lobbying)				36		
37	Total lob	bying expenditures to influence	a legislative body (direct lobbying)				37		
38	Total lob	Total lobbying expenditures (add lines 36 and 37)					38		
39	Other ex	empt purpose expenditures					39		
40	Total exempt purpose expenditures (add lines 38 and 39)						40		
41	Lobbying	g nontaxable amount. Enter the	amount from the following table -						
	If the arr	nount on line 40 is -	The lobbying nontaxable amoun	nt is -					
	Not over \$	500,000	20% of the amount on line 40			٦			
	Over \$500	0,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$	\$500,000					
	Over \$1,00	00,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$	\$1,000,00	0		41		
	Over \$1,50	00,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$	1,500,000					
	Over \$17,0	000,000	\$1,000,000			J			
42	Grassroo	ots nontaxable amount (enter 2	5% of line 41)				42		
43	Subtract	t line 42 from line 36. Enter -0- i	f line 42 is more than line 36				_43		
44	Subtract	t line 41 from line 38. Enter -0- i	f line 41 is more than line 38				44		
	Caution:	; If there is an amount on ei	ther line 43 or line 44, you must file	Form 4	1 720.				

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 E	penditures During 4-Yea	r Averaging Period		N/A
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003		(e) Total
45 Lobbying nontaxable amount						0.
46 Lobbying ceiling amount (150% of line 45(e))						0.
47 Total lobbying expenditures					<u></u>	0.
48 Grassroots nontaxable amount						0.
49 Grassroots ceiling amount (150% of line 48(e))					-	0.
50 Grassroots lobbying expenditures						0.
	Activity by Nonelectonly by organizations that de			ctions.)		N/A
During the year, did the organizat influence public opinion on a legis			ion, including any attempt	to Yes	No	Amount
 a Volunteers b Paid staff or management (Ir c Media advertisements 	iclude compensation in expe	enses reported on lines c l	hrough h.)			
d Mailings to members, legisla	, ,					
e Publications, or published or f Grants to other organizations	for lobbying purposes		4.			
 g Direct contact with legislators h Rallies, demonstrations, sem 	inars, conventions, speeche					
i Total lobbying expenditures (If "Yes" to any of the above, a		a a detailed description of	the lobbying activities.			0.

	ule A (Form 990 or 990-EZ) 2006]			91-16	5 <u>46543</u>	Page 7
Par				Relationships With Nonchari	table	
		tions (See page 13 of the instru		······································		
51	Did the reporting organization direc			-		
-	501(c) of the Code (other than sect			litical organizations?	Ye	s No
а	Transfers from the reporting organ. (i) Cash	ization to a noncharitable exemption	organization of.		51a(i)	X
	(ii) Other assets				a(ii)	X
b	Other transactions:					
	(i) Sales or exchanges of assets v	with a noncharitable exempt organ	lization		b(i)	x
	(ii) Purchases of assets from a no	ncharitable exempt organization			b(ii)	X
	(iii) Rental of facilities, equipment,				b(iii)	<u> </u>
	(iv) Reimbursement arrangements	;			b(iv)	X
	(v) Loans or loan guarantees				b(v)	
_	(vi) Performance of services or me				b(vi) c	<u>x</u> x
	Sharing of facilities, equipment, ma			lways show the fair market value of the		<u> </u>
u	goods, other assets, or services giv		• •	-		
	transaction or sharing arrangement				N/	А
(a)			•	(d)		
Line		(c) Name of noncharitable exe	empt organization	Description of transfers, transactions, and	sharing arrang	ements
						<u> </u>
			· ·			
			·			
	_					
				· · · · ·		
		<u></u>				
52 2	Is the organization directly or indire	ectly affiliated with or related to o	ne or more tax-exempt org	anizations described in section 501(c) of the		
JZ a	Code (other than section 501(c)(3)		are of more tax exemptions		Yes [X No
b	If "Yes," complete the following sch			F _		
	(a)		(b)	(c)		
	Name of organ	ization	Type of organization	Description of relations	hip	
	·····					
<u> </u>		· · · · · · · · · · · · · · · · · · ·				
				· · · · ·		
	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
				······································		
	· · · · · · · · · · · · · · · · · · ·		· · · · · -			
	······································					

Schedule A (Form 990 or 990-EZ) 2006

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U.S.A. NATIONAL KARATE-DO FEDERATION, I

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Form 990	Other	Changes	in Net	Assets	or Fund	Balances	Statement	1
Description							Amount	
ADJUSTMENTS MA TO ACCRUEI			R BALAN	CES FOR	ADJUSTM	ENTS	-7,84	46.
Total to Form	990, Par	t I, lir	ne 20				-7,84	46.

Form 990 Depreciation of Asse	ts Not Held for	Investment	Statement 2
Description	Cost or Other Basis	Accumulated Depreciation	Book Value
OFFICE EQUIPMENT OFFICE FURNITURE & FIXTURES ATHLETIC EQUIPMENT	67,836. 7,721. 75,435.	42,906. 7,483. 60,551.	24,930. 238. 14,884.
Total to Form 990, Part IV, ln 57	150,992.	110,940.4	0,052.

91-1646543

U.S.A. NATIONAL KARATE-DO FEDERATION, I

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	f Current Officers, Directors, Statemes and Key Employees			ement 3
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense
JULIUS THIRY 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	EXECUTIVE DIRE 10.00	ECTOR 0.	0.	0.
TOM BURKE 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	PRESIDENT 5.00	0.	0.	0.
RODGER JARRETT 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	GENERAL SECRET 5.00	CARY 0.	0.	0.
STEVE BUCKNER 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	VP ATLANTIC RE 5.00	EGION 0.	0.	0.
J. AJARI 1631 MEŞA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	DIRECTOR 5.00	0.	0.	0.
BILL CHAO 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	DIRECTOR 5.00	0 .	0.	0.
CYRUS MADANI 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	VP NORTHERN RI 5.00	EGION 0	0.	0.
M. SHIMABUKURO 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	ATHELETE REP 5.00	0.	0.	0.
DARRYL GOODYEAR 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	VP SOUTHERN RI 5.00	GION 0	. 0.	0.
GENE TIBON 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	EXECUTIVE VP 5.00	0	. 0.	0.
Y. AJARI 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	DIRECTOR 5.00	0	. 0.	0.

91-1646543

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U.S.A. NATIONAL KARATE-DO FE	DERATION, I			91-164654	43
K. YAMAZAKI 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	DIRECTOR 5.00		0.	0.	0.
GARY TSUTSUI 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	TREASURE 5.00		0.	0.	0.
JUNKI YOSHIDA 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	VP PACIF 5.00	IC REGION	0.	0.	0.
K TANAKA 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	DIRECTOR 5.00		0.	0.	Ο.
CHUCK SWEIGART 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	DIRECTOR 5.00		0.	0.	0.
HIDEHERO IGAKI 1631 MESA AVE, SUITE A-1 COLORADO SPRINGS, CO 80906	HEAD COA 5.00		0.	0.	0.
Totals Included on Form 990, Pa	irt V-A		0.	0.	0.
Form 990 Part VIII - Rel Accomplish	lationship of ment of Exemp			tatement	4
Line Explanation of Relations	ship of Activ:	ities			
 93A FEES RELATED TO NATIONAL 93A WITH OUR PURPOSE. 94 MEMBERSHIP DUES COLLECTE 94 OTHERS INTERESTED IN KAR 102 KARATE GLOVES, EVENT T S 102 PRIMARILY AT EVENTS 	ED FROM REFERI RATE	EES, PARTICII	PANTS, COACH	ES AND	
Schedule A	Other Inco	ome	S	tatement	5 5
Description	2005 Amount	2004 Amount	2003 Amount	2002 Amount	
	0.	34,948.	26,924.	64,8	03.
Total to Schedule A, line 22					

Form 8868	<u>(Rgv. 4-2007)</u>		Page
 If you a 	re filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this bo	x	
	complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form	8868.
	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1)		
Part II	Additional (not automatic) 3-Month Extension of Time. You must file original and		
Type or	Name of Exempt Organization	Emp	loyer identification number
print	U.S.A. NATIONAL KARATE-DO		1 1 6 4 6 5 4 5
File by the	FEDERATION, INC.		1-1646543
extended	Number, street, and room or suite no If a P O. box, see instructions	For I	RS use only
niing the	1631 MESA AVE., No. A-1	L	- <u> —</u>
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions COLORADO SPRINGS, CO 80906		
Check ty	be of return to be filed (File a separate application for each return)		
K For	n 990 🔄 Form 990-EZ 🔄 Form 990-T (sec. 401(a) or 408(a) trust) 🔄 Form 1041-A	F	orm 5227 Form 887
E Fori	n 990-BL 🛄 Form 990-PF 🛄 Form 990-T (trust other than above) 🛄 Form 4720 l	F	orm 6069
STOP! Do	not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	ed Form 8868.
 The bo 	oks are in the care of THE ORGANIZATION		
	one No.▶ 304-722-4512 FAX No.▶		
	rganization does not have an office or place of business in the United States, check this box		▶ □
	s for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	is is fo	r the whole group, check th
box 🕨 [. If it is for part of the group, check this box 🕨 🛄 and attach a list with the names and EINs of all	memt	pers the extension is for.
4 Irea	uest an additional 3-month extension of time until November 15, 2007.		
5 For	calendar year 2006 , or other tax year beginning, and ending, and ending,		
6 If th	is tax year is for less than 12 months, check reason 🔲 Initial return 📃 Final return		Change in accounting period
7 Sta	e in detail why you need the extension		
<u>AD</u>	DITIONAL TIME IS REQUESTED TO GATHER THE INFORMATION	1	
TH	AT IS NECESSARY IN ORDER TO PREPARE A COMPLETE AND A	CCU	RATE RETURN.
8a If th	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
non	refundable credits. See instructions	8a	\$
b lf th	is application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated		
tax	payments made. Include any prior year overpayment allowed as a credit and any amount paid		-
	viously with Form 8868	8b	\$
	ance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit		/-
with	FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	<u>8c</u>	\$ <u>N/A</u>
	Signature and Verification		
Under pena it is true ico	Ities of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the irrect, and complete, and that I am authorized to prepare this form.	e best c	of my knowledge and belief,
-		D -4	× 8/11/07
Signature	Notice to Applicant. (To Be Completed by the IRS)	Date	
	have approved this application. Please attach this form to the organization's return.	o dot	about below or the due
	have not approved this application However, we have granted a 10-day grace period from the later of the of the organization's return (including any prior extensions) This grace period is considered to be a value		
	erwise required to be made on a timely return. Please attach this form to the organization's return.		
	have not approved this application. After considering the reasons stated in item 7, we cannot grant you		est for an extension of time t
	We are not granting a 10-day grace period.	reque	STIDE AT EXCENSION OF TIME
	cannot consider this application because it was filed after the extended due date of the return for which	n an ei	tension was requested
		i ali ci	and the second
	Ву:		
Director			Date
	Mailing Address. Enter the address if you want the copy of this application for an additional 3-month ex	densio	on returned to an address
	Name		· · · · · · · · · · · · · · · · · · ·
	Monson & Bass, Inc., P.S.		
Туре от	Number and streat (include suite room, or ant no.) or a D.O. has number		
Type or print	Number and street (include suite, room, or apt no.) or a P.O. box number		
••	Number and street (include suite, room, or apt no.) or a P.O. box number 3500 188th SW, Suite 234 City or town, province or state, and country (including postal or ZIP code)		