

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2006
 Open to Public Inspection

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: **AIRLINE AMBASSADORS INTERNATIONAL**
 Number and street (or P O box if mail is not delivered to street address) Room/suite: **418 CALIFORNIA AVE**
 City or town, state or country, and ZIP + 4: **MOSS BEACH CA 94019**

D Employer identification number: **75-2679444**

E Telephone number: **650-728-7844**

F Accounting method: Cash Accrual Other (specify) _____

G Website: **WWW.AIRLINEEMB.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: **4,110,423**

H and are not applicable to section 527 organizations. I
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates: _____
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number: _____

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 (See the instructions.)

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	4,106,736		
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 \$ 470,137 noncash \$ 3,636,599)	1e			4,106,736
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2			
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			2,307
5	Dividends and interest from securities	5			
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	
b	Less cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8c			
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8d			
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	1,380		
b	Less direct expenses other than fundraising expenses	9b	39,830		
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c			-38,450
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			
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			4,070,593
13	Program services (from line 44, column (B))	13			3,899,111
14	Management and general (from line 44, column (C))	14			138,095
15	Fundraising (from line 44, column (D))	15			17,172
16	Payments to affiliates (attach schedule)	16			
17	Total expenses. Add lines 16 and 44, column (A)	17			4,054,378
18	Excess or (deficit) for the year. Subtract line 17 from line 12	18			16,215
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19			323,424
20	Other changes in net assets or fund balances (attach explanation)	20			
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21			339,639

REVENUE SCANNED DEC 04 2007

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13

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 (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a				
22b Other grants and allocations (attach schedule) Stmt 1 (cash \$ 79,047 non-cash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	22b	79,047	79,047		
23 Specific assistance to individuals (attach schedule) Stmt 2	23	3,402,048	3,402,048		
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule)	25a				
b Compensation of former officers, directors, key employees, etc listed in Part V-B (attach schedule)	25b				
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) (attach schedule)	25c				
26 Salaries and wages of employees not included on lines 25a, b, and c	26	104,105	52,058	48,429	3,618
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	3,568	1,413	2,059	96
30 Professional fundraising fees	30				
31 Accounting fees	31	8,956		8,956	
32 Legal fees	32				
33 Supplies	33	179,134	172,447	6,611	76
34 Telephone	34	10,613	3,684	6,877	52
35 Postage and shipping	35	23,869	8,384	11,943	3,542
36 Occupancy	36	13,427	1,105	12,322	
37 Equipment rental and maintenance	37	1,978		1,978	
38 Printing and publications	38				
39 Travel	39	36,502	15,605	12,618	8,279
40 Conferences, conventions, and meetings	40	1,854	1,839	15	
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	3,557	3,557		
43 Other expenses not covered above (itemize) a See Statement 3	43a	185,720	157,924	26,287	1,509
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	4,054,378	3,899,111	138,095	17,172

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 \$ _____, (ii) the amount allocated to Program services \$ _____,
 (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose?

▶ **See Statement 4**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses

(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

a See Statement 5

(Grants and allocations \$ **79,047**) If this amount includes foreign grants, check here ▶ **3,899,111**

b

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

c

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

d

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶ **3,899,111**

Part IV Balance Sheets (See the instructions.)

		(A) Beginning of year		(B) End of year
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only				
Assets	45 Cash-non-interest-bearing	13,709	45	20,059
	46 Savings and temporary cash investments	170,241	46	77,307
	47a Accounts receivable	332		
	b Less allowance for doubtful accounts		214	47c 332
	48a Pledges receivable	2,231		
	b Less allowance for doubtful accounts		2,054	48c 2,231
	49 Grants receivable		49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (att schedule)		50b	
	51a Other notes and loans receivable (attach schedule)			
	b Less allowance for doubtful accounts		51c	
	52 Inventories for sale or use		143,865	52 237,057
	53 Prepaid expenses and deferred charges			53
	54a Investments—publicly-traded securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a
	b Investments—other securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b
	55a Investments-land, buildings, and equipment basis			
	b Less accumulated depreciation (attach schedule)			55c
	56 Investments-other (attach schedule)			56
	57a Land, buildings, and equipment basis	46,191		
b Less accumulated depreciation (attach schedule) See Statement 6	36,544	10,821	57c 9,647	
58 Other assets, including program-related investments (describe See Statement 7)		500	58 446	
59 Total assets (must equal line 74) Add lines 45 through 58		341,404	59 347,079	
Liabilities	60 Accounts payable and accrued expenses	17,980	60	7,440
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe See Statement 7)		65	
	66 Total liabilities. Add lines 60 through 65		17,980	66 7,440
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	220,020	67	271,137
	68 Temporarily restricted	103,404	68	68,502
	69 Permanently restricted		69	
	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		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	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)		323,424	73 339,639
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		341,404	74 347,079

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	4,070,593
b	Amounts included on line a but not on Part I, line 12		b	
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	
c	Subtract line b from line a		c	4,070,593
d	Amounts included on Part I, line 12, but not on line a:		d	
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify)	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12) Add lines c and d		e	4,070,593

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

a	Total expenses and losses per audited financial statements		a	4,054,378
b	Amounts included on line a but not Part I, line 17		b	
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	
c	Subtract line b from line a		c	4,054,378
d	Amounts included on Part I, line 17, but not on line a:		d	
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify)	d2		
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17) Add lines c and d		e	4,054,378

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
NANCY RIVARD	0	0	0	0
NANCY JOCHENS	0	0	0	0
STEVE CRANE	0	0	0	0
GLORIA FIRMAGE	0	0	0	0
PETER GREENBERG	0	0	0	0
SAEED YOUSEF	0	0	0	0

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

	Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings		
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	X
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" If "Yes," attach a statement that includes the information described in the instructions	75c	X
d Does the organization have a written conflict of interest policy?	75d	X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
N/A				

Part VI Other Information (See the instructions.)

	Yes	No
76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt	81a	
81a Enter direct and indirect political expenditures (See line 81 instructions)	81a	
b Did the organization file Form 1120-POL for this year?	81b	X

Part VI Other Information (continued)

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)		
	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
83b			
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
84b			
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	N/A	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
85g			
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
85h			
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 0 , section 4912 0 , section 4955 0		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under 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 organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90a	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 (See instructions)	90b	1
91a	The books are in care of NANCY RIVARD 418 CALIFORNIA Located at MOSS BEACH, CA	Telephone no	94038
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	X

Part VI Other Information (continued)

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 ▶

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 |

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) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
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					2,307
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					-38,450
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		0	-36,143
105 Total (add line 104, columns (B), (D), and (E))					-36,143

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)
N/A	

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).

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
		X

	(A) Name, address, of each controlled entity	(B) Employer ID 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
		X

	(A) Name, address, of each controlled entity	(B) Employer ID 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

Please Sign Here

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.

Signature of officer: *Nancy Nancy Rivard* Date: 11-9-07

Type or print name and title: **NANCY RIVARD PRESIDENT**

Paid Preparer's Use Only

Preparer's signature: *[Signature]* Date: **11/01/07** Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: **PARSONS ACCOUNTING
240 MAIN ST., SUITE A
HALF MOON BAY, CA 94019**

Preparer's SSN or PTIN (See Gen Instr X): **P00506865** EIN: **94-3003364** Phone no: **650-726-0640**

**SCHEDULE A
(Form 990 or 990-EZ)**

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2006

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

AIRLINE AMBASSADORS INTERNATIONAL

Employer identification number
75-2679444

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) Comp	(d) Contrib to empl ben plans & deferred comp	(e) Expense account & other allowances
NONE				
Total number of other employees paid over \$50,000 ▶				

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 ▶		

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 ▶		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2006

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

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)		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		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e	Transfer of any part of its income or assets?		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)		X
b	Did the organization have a section 403(b) annuity plan for its employees?		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
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
b	Did the organization make any taxable distributions under section 4966?		
c	Did the organization make a distribution to a donor, donor advisor, or related person?		
d	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 ► _____		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► _____		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► _____		0

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 V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	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)	31		
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768) **N/A**

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
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table-			
If the amount on line 40 is-			
Not over \$500,000	The lobbying nontaxable amount is-		
	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		
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		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50 on page 13 of the instructions)

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

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

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

Yes	No	Amount

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
(ii) Other assets
b Other transactions
(i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Table with 3 columns: Question, Yes, No. Rows include 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c. 'No' column contains 'X' for all rows.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A'.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (X) No

b If "Yes," complete the following schedule

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A'.

Special Events Schedule

Form 990

2006

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

Name AIRLINE AMBASSADORS INTERNATIONAL

Employer Identification Number 75-2679444

Table with 5 columns: (A), (B), (C), Others, Total. Rows include Gross receipts (1,380), Less contributions (0), Gross revenue (1,380), Less direct expenses (39,830), and Net income (loss) (-38,450).

Description (A) BARTENDER FUNDRAISING. A table with multiple rows for description details under categories (A), (B), (C), and Others.

Federal Statements

Statement 1 - Form 990, Part II, Line 22b - Other Grants and Allocations

Name Address	Date of Gift	Description of Property	Relationship to Org	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
ALL PEOPLES AME CHURCH 8611 CEDROS APT 1 PANAORAMA CITY CA 91402				2,000				
JOHN MORETTI 114 BANG MUANG ROAD PHANG NGA PROVINCE TH				2,000				
TESS CACCIATORE 923 N CORDOVA ST BURBANK CA 91505				3,500				
COASTSIDE WOMEN'S CLUB 646 MYRTLE STREET HALF MOON BAY CA 94019						35		
DEGENHARDT FOUNDATION 58 PLEASANT ST HOULTON ME 04730						400		
DOOLEY INTERMED 420 LEXINGTON AVE						100		

E259 AIRLINE AMBASSADORS INTERNATIONAL
 75-2679444
 FYE: 12/31/2006

Federal Statements

11/1/2007 9:03 AM

Statement 1 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name Address	Date of Gift	Description of Property	Relationship to Org	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
NEW YORK NY 10170			\$		\$			
DULA SENTLE FOUNDATION				51,046				
78 LOON PT ROAD								
MANCHESTER ME 04531								
STEVEN ELLIS				4,500				
2027 ALLEN PL NW								
WASHINGTON DC 20009								
MARYANNE HAVRYLUCK								
1935 25TH AVENUE				1,350				
VERO FL 32960								
K BAR B RANCH								
39299 MANZELLA DRIVE								
SLIDELL LA 70461								
KELLY LEE								
3736 SUMMERSVILLE LANE					532			
KELLER TX 76248								
LEISWAD								1,000

Federal Statements

Statement 1 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name Address	Date of Gift	Description of Property	Relationship to Org		Class of Activity		Book Value	BV Explantn	FMV Explantn
			Cash Contrib	NonCash Contrib	Cash Contrib	NonCash Contrib			
SAINT LUKE STREET KAHALEH LE MAKE A WISH FOUNDATION 3550 NORTH CENTRAL AVE PHOENIX AZ 85012-2127			\$	\$	250				
MIRACLES IN ACTION 241 COUNTRYSIDE DRIVE NAPLES FL 34104					100				
ELAINE OSBORN 10823 CROMWELL DRIVE DALLAS TX 75229					323				
PARTNERSHIPS FOR CHANGE 401 AVILA WAY 306 SAN FRANCISCO CA 94123					5,000				
MENA SUR 3235 KINGSBRIDGE DR RIVERSIDE NY 10463					2,936				

Federal Statements

Statement 1 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name Address	Date of Gift	Description of Property	Relationship to Org		Class of Activity			BV Explantn	FMV Explantn
			Cash Contrib	NonCash Contrib	Book Value				
MIMI TIPTON 5771 N PLACITA BACANORA TUCSON AZ 85718 WHEELCHAIR FOUNDATION 3820 BLACKHAWK ROAD DANVILLE CA 94506			\$ 3,600	\$					
			\$ 79,047	\$ 0	\$ 0	\$ 0			
Total									

75-2679444

Federal Statements

FYE: 12/31/2006

Statement 2 - Form 990, Part II, Line 23 - Specific Assistance to Individuals

Description	Amount
HUMANITARIAN AID	\$ 3,402,048
Total	\$ 3,402,048

Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
DUES & SUBSCRIPTIONS	274		274	
INSURANCE	1,806	467	1,339	
MARKETING	1,620		988	632
MISCELLANEOUS	14,267	5,540	7,850	877
PROFESSIONAL FEES	15,740	8,347	7,393	
OFFICE EXPENSES	3,227	370	2,857	
RELOCATION	4,709		4,709	
UTILITIES	1,355	478	877	
TRANSPORTATION OF MISSION SUP	1,362	1,362		
DONATED PROFESSIONAL SERVICES	141,360	141,360		
Total	\$ 185,720	\$ 157,924	\$ 26,287	\$ 1,509

Federal Statements**Statement 4 - Form 990, Part III - Organization's Primary Exempt Purpose**

AIRLINE AMBASSADORS INTERNATIONAL PROVIDES HUMANITARIAN AID TO CHILDREN AND FAMILIES IN NEED AS WELL AS INTERNATIONAL RELIEF AND DEVELOPMENT TO UNDERPRIVILEGED COMMUNITIES THROUGHOUT THE WORLD.

Statement 5 - Form 990, Part III, Line a - Statement of Program Service Accomplishments**Description**

AIRLINE AMBASSADORS INTERNATIONAL PROVIDES HUMANITARIAN AID TO CHILDREN AND FAMILIES IN NEED AS WELL AS INTERNATIONAL RELIEF AND DEVELOPMENT TO UNDERPRIVILEGED COMMUNITIES THROUGHOUT THE WORLD. WE LEVERAGE CONTRACTS WITH COMMERCIAL AIRLINE COMPANIES TO FACILITATE OUR WORK AND ACCOMPLISH OUR MISSION THROUGH THE FOLLOWING PROGRAMS:

- 1) CHILDREN'S ESCORT PROGRAM PROVIDES ESCORTS FOR THE TRANSPORTATION OF CHILDREN TO RECEIVE DONATED MEDICAL CARE NOT AVAILABLE IN THEIR HOME COUNTRIES AND OF ORPHANS TO THEIR NEW ADOPTIVE PARENTS.
- 2) THE HUMANITARIAN MISSIONS PROGRAM PROVIDES NEEDED AID AND SERVICES TO CHILDREN IN ORPHANAGES, CLINICS AND REMOTE COMMUNITIES. MEMBERS HAND DELIVER HUMANITARIAN ASSISTANCE AND HELP FUND INTERNATIONAL DEVELOPMENT PROJECTS FOR THE CHILDREN VISITED.
- 3) SPECIAL EVENTS PROGRAM PROVIDED VOLUNTEERS FOR LOCAL CHARITABLE EVENTS AND INTERNATIONAL CONFERENCES TO HELP BUILD GOODWILL AND INTERNATIONAL UNDERSTANDING.
- 4) YOUTH PROGRAM ENCOURAGES COMMUNICATION BETWEEN CHILDREN IN THE UNITED STATES AND FOREIGN DISADVANTAGED CHILDREN.
- 5) THE CASA CORPS PROGRAM PROVIDES TECHNICAL TRANSFER OF BUILDING CODE TECHNOLOGY TO DEVELOPING COUNTRIES REQUESTING THEIR ASSISTANCE.

Federal Statements**Statement 6 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment**

<u>Description</u>	<u>Beginning of Year</u>	<u>Accum Deprec</u>	<u>End of Year</u>	<u>Accum Deprec</u>
	\$ 43,809	\$ 32,988	\$ 46,191	\$ 36,544
Total	<u>\$ 43,809</u>	<u>\$ 32,988</u>	<u>\$ 46,191</u>	<u>\$ 36,544</u>

Statement 7 - Form 990, Part IV, Line 58 - Other Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
DEPOSITS	\$ 500	\$ 446
Total	<u>\$ 500</u>	<u>\$ 446</u>

Form **4562**
 Department of the Treasury
 Internal Revenue Service

Depreciation and Amortization
 (Including Information on Listed Property)

OMB No 1545-0172

2006

Attachment
 Sequence No **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

AIRLINE AMBASSADORS INTERNATIONAL

Identifying number

75-2679444

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	108,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	430,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2007 Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	3,557

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2006	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B-Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr.	22	3,557
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2006)

75-2679444

Federal Asset Report

FYE: 12/31/2006

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:								
1	COPIER	1/01/99	5,986		5,986	5 MO S/L	5,986	0
2	HP PRINTER	1/01/99	3,000		3,000	5 MO S/L	3,000	0
3	HP LASERJET	1/01/00	620		620	5 MO S/L	620	0
4	HP DESKJET	1/01/00	1,000		1,000	5 MO S/L	1,000	0
5	DELL PDX PRINTER	1/01/00	2,670		2,670	5 MO S/L	2,670	0
6	SONY DESKTOP COMPUTER	1/01/00	2,489		2,489	5 MO S/L	2,489	0
7	SIEMENS PHONE CONSOLE	1/01/00	580		580	5 MO S/L	580	0
8	NETWORK EQUIPMENT	1/01/00	340		340	5 MO S/L	340	0
9	TV VCR	1/01/00	195		195	5 MO S/L	195	0
10	LUCENT PHONE SYSTEM	1/01/01	10,000		10,000	5 MO S/L	10,000	0
11	OFFICE EQUIPMENT	1/01/00	913		913	5 MO S/L	913	0
12	HP COMPUTER	6/01/02	1,802		1,802	5 MO S/L	1,440	361
13	HP PRINTER	12/09/02	175		175	5 MO S/L	141	34
14	HP PRINTER	11/12/02	299		299	5 MO S/L	240	59
15	CARPET	11/03/03	800		800	5 MO S/L	400	160
16	BOOK CASE	11/01/03	80		80	5 MO S/L	40	16
17	FILING CABINETS (10)	11/01/03	500		500	5 MO S/L	250	100
18	DESKS (7)	11/01/03	525		525	5 MO S/L	263	105
19	COMPUTER & MONITOR	12/28/03	2,500		2,500	5 MO S/L	1,250	500
20	COMPUTER EQUIPMENT	1/31/04	25		25	5 MO S/L	10	5
21	COMPUTER EQUIPMENT	2/03/04	125		125	5 MO S/L	48	25
22	TV SHELVING	2/11/04	1,000		1,000	5 MO S/L	383	200
23	TV	3/01/04	25		25	5 MO S/L	9	5
24	DVD PLAYER	4/26/04	60		60	5 MO S/L	20	12
25	PRINTER	6/11/04	300		300	5 MO S/L	95	60
26	COMPUTER	8/03/04	100		100	5 MO S/L	28	20
27	LAPTOP	4/01/05	2,867		2,867	5 MO S/L	430	573
28	MAC COMPUTERS	11/28/05	2,832		2,832	5 MO S/L	47	567
29	VEHICLE	9/28/05	2,000		2,000	5 MO S/L	100	400
30	LAPTOP COMPUTER	3/21/06	1,740		1,740	5 MO S/L	0	312
31	PRINTER	9/03/06	643		643	5 MO S/L	0	43
Total Other Depreciation			<u>46,191</u>		<u>46,191</u>		<u>32,987</u>	<u>3,557</u>
Total ACRS and Other Depreciation			<u>46,191</u>		<u>46,191</u>		<u>32,987</u>	<u>3,557</u>
Grand Totals			46,191		46,191		32,987	3,557
Less: Dispositions			<u>0</u>		<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>46,191</u>		<u>46,191</u>		<u>32,987</u>	<u>3,557</u>

75-2679444

CA Asset Report

FYE: 12/31/2006

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
Other Depreciation:								
1	COPIER	1/01/99	5,986	5,986	5,986	0	0	0
2	HP PRINTER	1/01/99	3,000	3,000	3,000	0	0	0
3	HP LASERJET	1/01/00	620	620	620	0	0	0
4	HP DESKJET	1/01/00	1,000	1,000	1,000	0	0	0
5	DELL PDX PRINTER	1/01/00	2,670	2,670	2,670	0	0	0
6	SONY DESKTOP COMPUTER	1/01/00	2,489	2,489	2,489	0	0	0
7	SIEMENS PHONE CONSOLE	1/01/00	580	580	580	0	0	0
8	NETWORK EQUIPMENT	1/01/00	340	340	340	0	0	0
9	TV VCR	1/01/00	195	195	195	0	0	0
10	LUCENT PHONE SYSTEM	1/01/01	10,000	10,000	10,000	0	0	0
11	OFFICE EQUIPMENT	1/01/00	913	913	913	0	0	0
12	HP COMPUTER	6/01/02	1,802	1,802	1,440	361	361	0
13	HP PRINTER	12/09/02	175	175	141	34	34	0
14	HP PRINTER	11/12/02	299	299	240	59	59	0
15	CARPET	11/03/03	800	800	400	160	160	0
16	BOOK CASE	11/01/03	80	80	40	16	16	0
17	FILING CABINETS (10)	11/01/03	500	500	250	100	100	0
18	DESKS (7)	11/01/03	525	525	263	105	105	0
19	COMPUTER & MONITOR	12/28/03	2,500	2,500	1,250	500	500	0
20	COMPUTER EQUIPMENT	1/31/04	25	25	10	5	5	0
21	COMPUTER EQUIPMENT	2/03/04	125	125	48	25	25	0
22	TV SHELVING	2/11/04	1,000	1,000	383	200	200	0
23	TV	3/01/04	25	25	9	5	5	0
24	DVD PLAYER	4/26/04	60	60	20	12	12	0
25	PRINTER	6/11/04	300	300	95	60	60	0
26	COMPUTER	8/03/04	100	100	28	20	20	0
27	LAPTOP	4/01/05	2,867	2,867	430	573	573	0
28	MAC COMPUTERS	11/28/05	2,832	2,832	47	567	567	0
29	VEHICLE	9/28/05	2,000	2,000	100	400	400	0
30	LAPTOP COMPUTER	3/21/06	1,740	1,740	0	312	312	0
31	PRINTER	9/03/06	643	643	0	43	43	0
Total Other Depreciation			46,191	46,191	32,987	3,557	3,557	0
Total ACRS and Other Depreciation			46,191	46,191	32,987	3,557	3,557	0
Grand Totals			46,191	46,191	32,987	3,557	3,557	0
Less: Dispositions			0	0	0	0	0	0
Net Grand Totals			46,191	46,191	32,987	3,557	3,557	0

75-2679444

AMT Asset Report

FYE: 12/31/2006

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
1	COPIER	1/01/99	0			0 0	HY	0	0
2	HP PRINTER	1/01/99	0			0 0	HY	0	0
3	HP LASERJET	1/01/00	0			0 0	HY	0	0
4	HP DESKJET	1/01/00	0			0 0	HY	0	0
5	DELL PDX PRINTER	1/01/00	0			0 0	HY	0	0
6	SONY DESKTOP COMPUTER	1/01/00	0			0 0	HY	0	0
7	SIEMENS PHONE CONSOLE	1/01/00	0			0 0	HY	0	0
8	NETWORK EQUIPMENT	1/01/00	0			0 0	HY	0	0
9	TV VCR	1/01/00	0			0 0	HY	0	0
10	LUCENT PHONE SYSTEM	1/01/01	0			0 0	HY	0	0
11	OFFICE EQUIPMENT	1/01/00	0			0 0	HY	0	0
12	HP COMPUTER	6/01/02	0			0 0	HY	0	0
13	HP PRINTER	12/09/02	0			0 0	HY	0	0
14	HP PRINTER	11/12/02	0			0 0	HY	0	0
15	CARPET	11/03/03	0			0 0	HY	0	0
16	BOOK CASE	11/01/03	0			0 0	HY	0	0
17	FILING CABINETS (10)	11/01/03	0			0 0	HY	0	0
18	DESKS (7)	11/01/03	0			0 0	HY	0	0
19	COMPUTER & MONITOR	12/28/03	0			0 0	HY	0	0
20	COMPUTER EQUIPMENT	1/31/04	0			0 0	HY	0	0
21	COMPUTER EQUIPMENT	2/03/04	0			0 0	HY	0	0
22	TV SHELVING	2/11/04	0			0 0	HY	0	0
23	TV	3/01/04	0			0 0	HY	0	0
24	DVD PLAYER	4/26/04	0			0 0	HY	0	0
25	PRINTER	6/11/04	0			0 0	HY	0	0
26	COMPUTER	8/03/04	0			0 0	HY	0	0
27	LAPTOP	4/01/05	0			0 0	HY	0	0
28	MAC COMPUTERS	11/28/05	0			0 0	HY	0	0
29	VEHICLE	9/28/05	0			0 0	HY	0	0
30	LAPTOP COMPUTER	3/21/06	0			0 0	HY	0	0
31	PRINTER	9/03/06	0			0 0	HY	0	0
	Total Other Depreciation		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Grand Totals		0			0		0	0
	Less: Dispositions		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>

Depreciation Adjustment Report

All Business Activities

AMT
Adjustments/
Preferences

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>
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There are no assets that meet the criteria of this report

75-2679444

Future Depreciation Report**FYE: 12/31/07**

FYE: 12/31/2006

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
Other Depreciation:					
1	COPIER	1/01/99	5,986	0	0
2	HP PRINTER	1/01/99	3,000	0	0
3	HP LASERJET	1/01/00	620	0	0
4	HP DESKJET	1/01/00	1,000	0	0
5	DELL PDX PRINTER	1/01/00	2,670	0	0
6	SONY DESKTOP COMPUTER	1/01/00	2,489	0	0
7	SIEMENS PHONE CONSOLE	1/01/00	580	0	0
8	NETWORK EQUIPMENT	1/01/00	340	0	0
9	TV VCR	1/01/00	195	0	0
10	LUCENT PHONE SYSTEM	1/01/01	10,000	0	0
11	OFFICE EQUIPMENT	1/01/00	913	0	0
12	HP COMPUTER	6/01/02	1,802	1	0
13	HP PRINTER	12/09/02	175	0	0
14	HP PRINTER	11/12/02	299	0	0
15	CARPET	11/03/03	800	160	0
16	BOOK CASE	11/01/03	80	16	0
17	FILING CABINETS (10)	11/01/03	500	100	0
18	DESKS (7)	11/01/03	525	105	0
19	COMPUTER & MONITOR	12/28/03	2,500	500	0
20	COMPUTER EQUIPMENT	1/31/04	25	5	0
21	COMPUTER EQUIPMENT	2/03/04	125	25	0
22	TV SHELVING	2/11/04	1,000	200	0
23	TV	3/01/04	25	5	0
24	DVD PLAYER	4/26/04	60	12	0
25	PRINTER	6/11/04	300	60	0
26	COMPUTER	8/03/04	100	20	0
27	LAPTOP	4/01/05	2,867	574	0
28	MAC COMPUTERS	11/28/05	2,832	566	0
29	VEHICLE	9/28/05	2,000	400	0
30	LAPTOP COMPUTER	3/21/06	1,740	348	0
31	PRINTER	9/03/06	643	128	0
Total Other Depreciation			<u>46,191</u>	<u>3,225</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>46,191</u>	<u>3,225</u>	<u>0</u>
Grand Totals			<u>46,191</u>	<u>3,225</u>	<u>0</u>

Asset	Description	Date In Service	Cost	CA
Other Depreciation:				
1	COPIER	1/01/99	5,986	0
2	HP PRINTER	1/01/99	3,000	0
3	HP LASERJET	1/01/00	620	0
4	HP DESKJET	1/01/00	1,000	0
5	DELL PDX PRINTER	1/01/00	2,670	0
6	SONY DESKTOP COMPUTER	1/01/00	2,489	0
7	SIEMENS PHONE CONSOLE	1/01/00	580	0
8	NETWORK EQUIPMENT	1/01/00	340	0
9	TV VCR	1/01/00	195	0
10	LUCENT PHONE SYSTEM	1/01/01	10,000	0
11	OFFICE EQUIPMENT	1/01/00	913	0
12	HP COMPUTER	6/01/02	1,802	1
13	HP PRINTER	12/09/02	175	0
14	HP PRINTER	11/12/02	299	0
15	CARPET	11/03/03	800	160
16	BOOK CASE	11/01/03	80	16
17	FILING CABINETS (10)	11/01/03	500	100
18	DESKS (7)	11/01/03	525	105
19	COMPUTER & MONITOR	12/28/03	2,500	500
20	COMPUTER EQUIPMENT	1/31/04	25	5
21	COMPUTER EQUIPMENT	2/03/04	125	25
22	TV SHELVING	2/11/04	1,000	200
23	TV	3/01/04	25	5
24	DVD PLAYER	4/26/04	60	12
25	PRINTER	6/11/04	300	60
26	COMPUTER	8/03/04	100	20
27	LAPTOP	4/01/05	2,867	574
28	MAC COMPUTERS	11/28/05	2,832	566
29	VEHICLE	9/28/05	2,000	400
30	LAPTOP COMPUTER	3/21/06	1,740	348
31	PRINTER	9/03/06	643	128
Total Other Depreciation			<u>46,191</u>	<u>3,225</u>
Total ACRS and Other Depreciation			<u>46,191</u>	<u>3,225</u>
Grand Totals			<u>46,191</u>	<u>3,225</u>