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

Supplementary Information—(See separate instructions.)

OMB No. 1545-0047

20 05

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

| Part I | Compensation of the Five High (See page 1 of the instructions. I | | | | nd Trustees |
|-------------------|---|--|-------------------|---|--|
| (a) Name a | ind 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 |
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| Total number | of other employees paid over \$50,000 . | | | | |
| Part II-A | Compensation of the Five High | est Paid Independent C | ontractors for | Professional Se | rvices |
| | (See page 2 of the instructions. Lis | | | | |
| (a) Na | ame and address of each independent contracto | · · · · · · · · · · · · · · · · · · · | | of service | (c) Compensation |
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| | er of others receiving over \$50,000 for services | | | | |
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| Part II-B | Compensation of the Five High (List each contractor who perform firms. If there are none, enter "No | ned services other than p | professional serv | | lividuals or |
| (a) Na | ame and address of each independent contracto | | , | of service | (c) Compensation |
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| Total number | er of other contractors receiving over | | | | |
| | other services | | | | |
| For Daponwork | Reduction Act Notice, see the Instructions for Fo | rm 990 and Form 990 E7 | Cat No. 11225E | Sobodulo A /Farm | 990 or 990 EZ) 000 |
| I UI FAPEIWORK | neuronon Activorice, see the instructions for FC | 111 330 anu futin 330-EZ. | Cat. No. 11285F | Schedule A (FOR | n 990 or 990-EZ) 2005 |

| Pa | t III Statements About Activities (See page 2 of the instructions.) | | Yes | No |
|-----|--|----|-----|----|
| 1 | During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) | 1 | | |
| | Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. | | | |
| 2 | During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) | | | |
| а | Sale, exchange, or leasing of property? | 2a | | |
| b | Lending of money or other extension of credit? | 2b | | |
| С | Furnishing of goods, services, or facilities? | 2c | | |
| d | Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? | 2d | | |
| е | Transfer of any part of its income or assets? | 2e | | |
| 3a | Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) | 3a | | |
| b | Do you have a section 403(b) annuity plan for your employees? | 3b | | |
| С | During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? | 3c | | |
| 4a | Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? | 4a | | |
| b | Do you provide credit counseling, debt management, credit repair, or debt negotiation services? | 4b | | |
| Pa | rt IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.) | | | |
| 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 33¹/₃% 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 33¹/₃% 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.)

| (a) Name(s) of supported organization(s) | (b) Line numbe from above |
|--|------------------------------|
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| | |
| | |

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Page 2

Schedule A (Form 990 or 990-EZ) 2005 Page 3 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. (a) 2004 Calendar year (or fiscal year beginning in) (b) 2003 (c) 2002 (d) 2001 (e) Total 15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.). Membership fees received 16 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 19 Net income from unrelated business activities not included in line 18. 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 23 Total of lines 15 through 22 Line 23 minus line 17 24 Enter 1% of line 23 25 26a Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26 **b** Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the 26b amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts > c Total support for section 509(a)(1) test: Enter line 24, column (e) 26c Add: Amounts from column (e) for lines: 18 _____ 19 ____ d 22 _____ 26b _____ 26d Public support (line 26c minus line 26d total) 26e е Public support percentage (line 26e (numerator) divided by line 26c (denominator)) f 26f % Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified 27 person." prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: For any amount included in line 17 that was received from each person (other than "disgualified persons"), prepare a list for your records to b show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: c Add: Amounts from column (e) for lines: 15 _____ 16 __ 270 20 21 17

| | | - | |
|---|---|-----|---|
| d | Add: Line 27a total. | 27d | |
| е | Public support (line 27c total minus line 27d total) | 27e | |
| | Total support for section 509(a)(2) test: Enter amount from line 23, column (e) | | |
| | Public support percentage (line 27e (numerator) divided by line 27f (denominator)) | 27g | % |
| ĥ | Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). | 27h | % |

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

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|--------------|--|-------------------|-----|--------|
| Pa | rt VPrivate School Questionnaire (See page 7 of the instructions.)(To be completed ONLY by schools that checked the box on line 6 in Part IV) | | I | |
| 29 | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | 29 | Yes | No |
| 30 | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, | 30 | | |
| 31 | programs, and scholarships? | 31 | | |
| | If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) | | | |
| 32 a b | Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory | 32a | | |
| c d | basis?Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | 32b 32c 32d | | |
| | If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) | | | |
| 33 | Does the organization discriminate by race in any way with respect to: | | | |
| а | Students' rights or privileges? | 33a | | |
| b | Admissions policies? | 33b | | |
| с | Employment of faculty or administrative staff? | 33c | | |
| d | Scholarships or other financial assistance? | 33d | | |
| е | Educational policies? | 33e | | |
| f | Use of facilities? | 33f | | |
| g | Athletic programs? | 33g | | |
| h | Other extracurricular activities? | 33h | | |
| | If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) | | | |
| | | | | |
| 34a | Does the organization receive any financial aid or assistance from a governmental agency? | 34a | | |
| b | Has the organization's right to such aid ever been revoked or suspended? | 34b | | |
| 35 | Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation | 35 | | |

Schedule A (Form 990 or 990-EZ) 2005

| Sche | edule A (Form 990 or 990-EZ) 2005 | | | Page 5 |
|------|---|-----------------|--|---|
| Pa | rt VI-A Lobbying Expenditures by Electing Public Charities (See page 9 o (To be completed ONLY by an eligible organization that filed Form 57 | | instructions.) | |
| Che | ck ▶ a | " a " an | d "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— The lobbying nontaxable amount is— | | | |
| | Not over \$500,000 | | | |
| | Over \$500,000 but not over \$1,000,000 . \$100,000 plus 15% of the excess over \$500,000 | | | |
| | Over \$1,000,000 but not over \$1,500,000 . $$175,000$ plus 10% of the excess over \$1,000,000 $\}$ | 41 | | |
| | Over \$1,500,000 but not over \$17,000,000. \$225,000 plus 5% of the excess over \$1,500,000 | | | |
| | Over \$17,000,000 \$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 See the instructions for lines 45 through 50 on page 11 of the instru- | | | elow. |

| | | Lob | Lobbying Expenditures During 4-Year Averaging Period | | | | |
|----|---|------|--|-----------------|---------|-------|------------------|
| | Calendar year (or | (a) | (b) | (c) | (d) | | (e) |
| | fiscal year beginning in) ► | 2005 | 2004 | 2003 | 200 | 2 | Total |
| 45 | Lobbying nontaxable amount | | | | | | |
| 46 | Lobbying ceiling amount (150% of line 45(e)) | | | | | | |
| 47 | Total lobbying expenditures | | | | | | |
| 48 | Grassroots nontaxable amount | | | | | | |
| 49 | Grassroots ceiling amount (150% of line 48(e)) | | | | | | |
| 50 | Grassroots lobbying expenditures | | | | | | |
| Pa | rt VI-B Lobbying Activity by Nonelec (For reporting only by organiza | - | | Part VI-A) (See | page 11 | of th | e instructions.) |
| | During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | | | | Amount |
| | a Volunteers | | | | | | |
| b | b Paid staff or management (Include compensation in expenses reported on lines c through h.) | | | | | | |
| с | Media advertisements. | | | | | | |

| С | Media advertisements | | | | | | |
|---|---|--|--|--|--|--|--|
| | Mailings to members, legislators, or the public | | | | | | |
| | Publications, or published or broadcast statements | | | | | | |
| | Grants to other organizations for lobbying purposes | | | | | | |
| | Direct contact with legislators, their staffs, government officials, or a legislative body. | | | | | | |
| - | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means | | | | | | |
| i | | | | | | | |
| - | If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities. | | | | | | |

Schedule A (Form 990 or 990-EZ) 2005

| Schedule A | A (Form 990 or 990-EZ) | 2005 | | | | | age 6 |
|------------------------|-------------------------------|---------------------|--|---|---------------|---------|--------------|
| Part VI | I Information | n Regarding T | ransfers To and Transace e page 12 of the instruction | ctions and Relationships Winns.) | th Nonc | | |
| | | | | following with any other organization on 527, relating to political organizatio | | d in se | ection |
| a Trar | nsfers from the rep | orting organization | to a noncharitable exempt orga | nization of: | | Yes | No |
| (i) | Cash | | | | 51a(i) | | |
| () | Other assets . | | | | a(ii) | | |
| | er transactions: | | | | h.(1) | | |
| ., | 0 | | noncharitable exempt organizat | | b(i) b(ii) | | |
| | | | itable exempt organization | | b(iii) | | |
| | | | ner assets | | b(iv) | | |
| | | | | | b(v) | | |
| | - | | ship or fundraising solicitations | | b(vi) | | |
| | | | sts, other assets, or paid employ | yees | с | | |
| goo | ds, other assets, o | r services given by | the reporting organization. If the | . Column (b) should always show the f ne organization received less than fai s, other assets, or services received: | | | |
| (a) Line no. | (b) Amount involved | Name of none | (c) charitable exempt organization | (d) Description of transfers, transactions, and | t sharing arr | andeme | ents |
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| des | | 01(c) of the Code (| other than section 501(c)(3)) or in | e or more tax-exempt organizations n section 527? ► | | | No |
| | (a) Name of organiz | ation | (b) Type of organization | (c) Description of relations | ship | | |
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