

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury
Internal Revenue Service

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

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

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization MYWIRELESS.ORG		D Employer identification number 20-2404168
		Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telephone number (202) 785-0081
		City or town, state or country, and ZIP + 4		F Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)
		WASHINGTON, DC 20036		

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates N/A

H(c) Are all affiliates included? 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

G Website: WWW.MYWIRELESS.ORG

J Organization type (check only one) 501(c) (4) (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

I Group Exemption Number N/A

M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 6,914,804.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

SCANNED SEP 10 2007 Revenue

1	Contributions, gifts, grants, and similar amounts received			
a	Contributions to donor advised funds	1a		
b	Direct public support (not included on line 1a)	1b		
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 \$ _____ noncash \$ _____)	1e		
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		
3	Membership dues and assessments	3		6,491,524.
4	Interest on savings and temporary cash investments	4		423,280.
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	8b	
c	Gain or (loss) (attach schedule)	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		
b	Less: direct expenses other than fundraising expenses	9b		
c	Net income or (loss) from special events Subtract line 9b from line 9a	9c		
10a	Gross sales of inventory, less returns and allowances	10a		
b	Less: cost of goods sold	10b		
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c		
11	Other revenue (from Part VII, line 403)	11		
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		6,914,804.
13	Program services (from line 44, column (B))	13		10,273,160.
14	Management and general (from line 44, column (C))	14		159,213.
15	Fundraising (from line 44, column (D))	15		
16	Payments to affiliates (attach schedule)	16		
17	Total expenses. Add lines 16 and 17, column (A)	17		10,432,373.
18	Excess or (deficit) for the year. Subtract line 17 from line 12	18		-3,517,569.
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		11,626,219.
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		8,108,650.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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 \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ 85,000. noncash \$ NONE) If this amount includes foreign grants, check here <input type="checkbox"/>	85,000.	85,000.	SEMT 1	
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule)	NONE			
b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)				
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)				
26 Salaries and wages of employees not included on lines 25a, b, and c				
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27				
29 Payroll taxes				
30 Professional fundraising fees				
31 Accounting fees	24,800.		24,800.	
32 Legal fees	70,789.		70,789.	
33 Supplies	35,353.	19,662.	15,691.	
34 Telephone	126,158.	126,158.		
35 Postage and shipping	5,499.		5,499.	
36 Occupancy				
37 Equipment rental and maintenance				
38 Printing and publications	96,135.	96,135.		
39 Travel	35,352.	19,060.	16,292.	
40 Conferences, conventions, and meetings	69,114.	69,114.		
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)				
43 Other expenses not covered above (itemize)				
a ADVERTISING	7,149,284.	7,149,284.		
b CONSULTANTS	1,938,033.	1,938,033.		
c EMAIL ACQUISITION	581,297.	581,297.		
d INSURANCE	26,142.		26,142.	
e NATIONAL MEMBERSHIPS	42,233.	42,233.		
f SURVEYS	147,184.	147,184.		
g				
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	10,432,373.	10,273,160.	159,213.	

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 IV Balance Sheets (See the instructions.)

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

		(A) Beginning of year		(B) End of year	
Assets	45 Cash - non-interest-bearing		45		
	46 Savings and temporary cash investments	11,954,408.	46	8,149,281.	
	47a Accounts receivable	47a 29,475.			
	b Less allowance for doubtful accounts	47b NONE	38,771.	47c 29,475.	
	48a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b		48c	
	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) (attach schedule)		50b		
	51a Other notes and loans receivable (attach schedule)	51a			
	b Less allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges	STMT. 4	19,606.	53 19,606.	
	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	55a			
	b Less accumulated depreciation (attach schedule)	55b		55c	
	56 Investments - other (attach schedule)		56		
	57a Land, buildings, and equipment basis	57a			
b Less accumulated depreciation (attach schedule)	57b		57c		
58 Other assets, including program-related investments (describe ▶ _____)		58			
59 Total assets (must equal line 74) Add lines 45 through 58		12,012,785.	59	8,198,362.	
Liabilities	60 Accounts payable and accrued expenses	384,886.	60	89,712.	
	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 ▶ _____)	1,680.	65	NONE	
66 Total liabilities. Add lines 60 through 65		386,566.	66	89,712.	
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	11,626,219.	67	8,108,650.	
	68 Temporarily restricted		68		
	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)		11,626,219.	73	8,108,650.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		12,012,785.	74	8,198,362.

Part VI Other Information (continued)

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? 82b 1,154,929. 83a Did the organization comply with the public inspection requirements for returns and exemption applications? 83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 84a Did the organization solicit any contributions or gifts that were not tax deductible? 84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? b Did the organization make only in-house lobbying expenditures of \$2,000 or less? c Dues, assessments, and similar amounts from members d Section 162(e) lobbying and political expenditures e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices f Taxable amount of lobbying and political expenditures (line 85d less 85e) g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? 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? 86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 b Gross receipts, included on line 12, for public use of club facilities 87 501(c)(12) orgs Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 88 b 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 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 N/A; section 4912 N/A, section 4955 N/A 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 N/A d Enter: Amount of tax on line 89c, above, reimbursed by the organization N/A 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 90 a List the states with which a copy of this return is filed DISTRICT OF COLUMBIA b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.) 90b NONE 91 a The books are in care of THE ORGANIZATION Telephone no 202-785-0081 Located at 1400 16TH STREET NW WASHINGTON, DC ZIP + 4 20036 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)? 91b X 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.

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c X

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 N/A

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

Note: Enter gross amounts unless otherwise indicated

Table with 5 columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include Program service revenue, Membership dues and assessments (6,491,524), Interest on savings (423,280), Dividends, Net rental income, and Subtotal (423,280, 6,491,524).

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.)

Table with 2 columns: 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. Row 94: MEMBERSHIP DUES ARE RECEIVED IN RETURN FOR MEMBERSHIP BENEFITS AND ARE ENTIRELY RELATED TO THE ORGANIZATION'S EXEMPT PURPOSE.

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

Table with 5 columns: (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.

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 X No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes X 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

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

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. Yes No

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

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Yes No

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

Please Sign Here

Signature of officer: Steve M. Largent Date: 8/14/07

Type or print name and title: STEVE M. LARGENT, CHAIRMAN

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: AUG 09 2007 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: PRICEWATERHOUSECOOPERS LLP
1301 K STREET NW SUITE 800W
WASHINGTON, DC 20005

Preparer's SSN or PTIN (See Gen Inst X): 13-4008324
EIN: 13-4008324
Phone no: 202-414-1000

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

GRANTS PAID

ASSOCIATION FOR A BETTER NEW YORK
NEW YORK, NY 01017

GENERAL SUPPORT

5,000.

HISPANIC ALLIANCE FOR PROGRESS
WASHINGTON, DC 78642

GENERAL SUPPORT

25,000.

NJ BUSINESS AND INDUSTRY
HACKENSACK, NJ 07601

GENERAL SUPPORT

10,000.

FLORIDA UNITED BUSINESS ASSOCIATION
TALLAHASSEE, FL 32302

GENERAL SUPPORT

10,000.

AMERICANS FOR TAX REFORM
WASHINGTON, DC 20036

GENERAL SUPPORT

15,000.

FREEDOM WORKS
WASHINGTON, DC 20006

GENERAL SUPPORT

10,000.

THE HERITAGE FOUNDATION
WASHINGTON, DC 20002

GENERAL SUPPORT

10,000.

TOTAL CONTRIBUTIONS PAID

85,000.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

MYWIRELESS.ORG IS TAX EXEMPT AS A SOCIAL WELFARE ORGANIZATION UNDER INTERNAL REVENUE CODE SECTION 501(C)(4). THE MEMBERS OF THE ORGANIZATION ARE BUSINESSES, CONSUMER ADVOCACY GROUPS AND TAX EXEMPT TRADE ASSOCIATIONS THAT ARE INTERESTED IN EDUCATING CONSUMERS ABOUT WIRELESS TELECOMMUNICATION ISSUES AND SHARE THE GOALS OF THE ORGANIZATION IN ADVOCATING PRO-SAFETY, PRO-CONSUMER, ANTI-TAX AND PRO-ECONOMIC DEVELOPMENT ISSUES RELATING TO WIRELESS TELECOMMUNICATIONS.

THE ORGANIZATION IS DEVOTED TO GRASSROOTS ADVOCACY EFFORTS TO IDENTIFY, EDUCATE AND PERSUADE MOBILE WIRELESS CONSUMERS TO CONTACT POLICYMAKERS ON WIRELESS TELECOMMUNICATION MATTERS THAT AFFECT THEM AS CONSUMERS. TO ACCOMPLISH THIS THE ORGANIZATION MAINTAINS AN INFORMATIONAL WEBSITE DEDICATED TO WIRELESS TELECOMMUNICATION ISSUES, DEVELOPS A NETWORK OF BUSINESS, CIVIC AND OPINION LEADERS TO ADDRESS ISSUES IN WIRELESS TELECOMMUNICATIONS POLICY, MAINTAINS A BROAD COALITION OF CONSUMER ALLIES ORGANIZED AROUND A COMMON GOALS AND RECRUITS CONSUMER ALLIES TO DISSEMINATE INFORMATION AND MAINTAIN A STRONG CONSUMER ACTIVIST MOVEMENT.

FORM 990, PART III - PROGRAM SERVICE ACCOMPLISHMENTS

PROGRAM SERVICE ACCOMPLISHMENT A

COALITION BUILDING - MYWIRELESS.ORG SIGNED UP OVER 259,000 INDIVIDUAL WIRELESS CONSUMERS IN 2006 AND ENLISTED THE SUPPORT OF OVER 87 ORGANIZATION COALITION PARTNERS. AT THE END OF 2006 MYWIRELESS HAD ALMOST 460,000 CONSUMERS REGISTERED AND HAD 1060 STATE COALITION PARTNERS AND 17 NATIONAL COALITION PARTNERS.

STATE ISSUES - MYWIRLESS.ORG PUBLICIZED THROUGH MULTIPLE MEDIA SOURCES ISSUES AFFECTING WIRELESS CONSUMERS IN VARIOUS STATES REQUESTING THAT THEY CONTACT POLICY MAKERS RESULTING IN OVER 42,000 CONTACTS TO STATE POLICY MAKERS.

FEDERAL ISSUES - MYWIRLESS.ORG PUBLICIZED THROUGH MULTIPLE MEDIA SOURCES ISSUES AFFECTING WIRELESS CONSUMERS ON A NATIONAL LEVEL REQUESTING THAT THEY CONTACT POLICY MAKERS RESULTING IN OVER 254,000 CONTACTS TO FEDERAL POLICY MAKERS.

FORM 990, PART IV - PREPAID EXPENSES AND DEFERRED CHARGES

DESCRIPTION	ENDING BOOK VALUE
PREPAID INSURANCE	19,606.
TOTALS	19,606.

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
STEPHEN M. LARGENT 1400 16TH STREET NW WASHINGTON, DC 20036	BOARD CHAIRMAN 5.00	NONE	NONE	NONE
BRIAN KIDNEY 1400 16TH STREET NW WASHINGTON, DC 20036	DIRECTOR 5.00	NONE	NONE	NONE
BRIAN KIDNEY RESIGNED FROM THE BOARD FEBRUARY 2006				
MICHAEL F. ALTSCHUL 1400 16TH STREET NW WASHINGTON, DC 20036	DIRECTOR/SECRETARY 5.00	NONE	NONE	NONE
MICHAEL F. ALTSCHUL RESIGNED FROM THE BOARD OCTOBER 2006.				
DAVID KEEN 1400 16TH STREET NW WASHINGTON, DC 20036	TREASURER 5.00	NONE	NONE	NONE
DAVID KEEN RESIGNED FROM THE BOARD APRIL 2006.				

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
BOBBY FRANKLIN 1400 16TH STREET NW WASHINGTON, DC 20036	DIRECTOR 5.00	NONE	NONE	NONE
KIM KUO 1400 16TH STREET NW WASHINGTON, DC 20036	EXEC. DIRECTOR/PRESIDENT 40.00	NONE	NONE	NONE
DAVID EISENBERG 1400 16TH STREET NW WASHINGTON, DC 20036	TREASURER 2.00	NONE	NONE	NONE
JOT CARPENTER 1400 16TH STREET NW WASHINGTON, DC 20036	DIRECTOR 5.00	NONE	NONE	NONE
JOHN WALLS 1400 16TH STREET NW WASHINGTON, DC 20036	SECRETARY 5.00	NONE	NONE	NONE
GRAND TOTALS		NONE	NONE	NONE

FORM 990, PART V-A, LINE 75C - COMPENSATION PROVIDED BY RELATED ORGANIZATIONS

All officers can be reached c/o CTIA at the following address:
 1400 16th Street NW, Suite 600
 Washington, DC 20036

RELATED ORGANIZATION: CTIA - THE WIRELESS ASSOCIATION
 RELATED ORGANIZATION EIN: 52-1347628

<u>Name and Address</u>	<u>Compensation</u>	<u>Contributions to Employee Benefit Plans</u>	<u>Expense Acct and Other Allowances</u>
Stephen M. Largent	960,847	62,061	NONE
Brian Kidney	145,227	28,087	NONE
Michael F. Altschul	538,748	47,479	NONE
Bobby Franklin	376,797	43,682	NONE
Kim Kuo	261,171	28,336	NONE
John Walls	366,440	42,455	NONE
David Keen	169,425	34,994	NONE
Jot Carpenter	88,501	2,072	NONE
Totals	<u>\$ 2,907,156</u>	<u>\$ 289,166</u>	<u>NONE</u>

PORTION OF ABOVE CTIA COMPENSATION ALLOCATED TO MYWIRELESS.ORG:

<u>Name and Address</u>	<u>Compensation</u>	<u>Contributions to Employee Benefit Plans</u>	<u>Expense Acct and Other Allowances</u>
Stephen M. Largent	48,042	3,103	NONE
Brian Kidney	7,261	1,404	NONE
Michael F. Altschul	NONE	2,374	NONE
Bobby Franklin	18,840	2,184	NONE
Kim Kuo	261,171	28,336	NONE
John Walls	18,322	2,123	NONE
David Keen	8,471	1,750	NONE
Jot Carpenter	4,425	526	NONE
Totals	<u>\$ 366,532</u>	<u>\$ 41,799</u>	<u>NONE</u>

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶
 - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Type or print	Name of Exempt Organization MYWIRELESS.ORG	Employer identification number 20-2404168
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions 1400 16TH STREET NW	
	City, town or post office, state, and ZIP code For a foreign address, see instructions WASHINGTON, DC 20036	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ THE ASSOCIATION

Telephone No ▶ 202-785-0081 FAX No ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a section 501(c) corporation required to file Form 990-T) extension of time until AUGUST 15, 2007, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ calendar year 2006 or

▶ tax year beginning _____, 20____, and ending _____, 20_____.

2 If this tax year is for less than 12 months, check reason. Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	\$	N/A
3b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	N/A
3c Balance Due. Subtract line 3b from line 3a. 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.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev 4-2007)

ISA