

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

**2005**Open to Public  
Inspection**A** For the 2005 calendar year, or tax year beginning **JUL 1, 2005** and ending **JUN 30, 2006****B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type See Specific Instructions

**C** Name of organization**RELIGION NEWSWRITERS FOUNDATION**

Number and street (or P.O. box if mail is not delivered to street address)

**P.O. BOX 2037**

City or town, state or country, and ZIP + 4

**WESTERVILLE, OH 43086-2037****D** Employer identification number**31-1650883****E** Telephone number**614-891-9001****F** Accounting method ☐ Cash ☒ Accrual  
☐ Other (specify) ▶

• 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? **N/A** ☐ Yes ☐ No  
(If "No," attach a list.)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶ **N/A****G** Website: ▶ **WWW.RELIGIONWRITERS.COM****J** Organization type (check only one) ▶ ☒ 501(c) ( 3 ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.****L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1005274.****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**

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:		
	<b>a</b> Direct public support	<b>1a</b>	<b>1000.</b>
	<b>b</b> Indirect public support	<b>1b</b>	<b>979438.</b>
	<b>c</b> Government contributions (grants)	<b>1c</b>	
	<b>d</b> Total (add lines 1a through 1c) (cash \$ <b>980438.</b> noncash \$ )	<b>1d</b>	<b>980438.</b>
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>	
	<b>3</b> Membership dues and assessments	<b>3</b>	
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>	<b>19836.</b>
	<b>5</b> Dividends and interest from securities	<b>5</b>	
	<b>6 a</b> Gross rents	<b>6a</b>	
	<b>b</b> Less: rental expenses	<b>6b</b>	
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>	
<b>7</b> Other investment income (describe ▶ )	<b>7</b>		
Revenue	<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other
	<b>b</b> Less: cost or other basis and sales expenses	<b>8a</b>	
	<b>c</b> Gain or (loss) (attach schedule)	<b>8b</b>	
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8c</b>	
	<b>8d</b>		
	<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		
	<b>a</b> Gross revenue (not including \$ <b>0.</b> of contributions reported on line 1a)	<b>9a</b>	<b>5000.</b>
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>	
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>	<b>5000.</b>
	<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>	
<b>b</b> Less: cost of goods sold	<b>10b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>		
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>		
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>	<b>1005274.</b>	
Expenses	<b>13</b> Program services (from line 44, column (B))	<b>13</b>	<b>783773.</b>
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>	<b>70266.</b>
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>	<b>41154.</b>
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>	
	<b>17</b> Total expenses (add lines 13 and 14, column (A))	<b>17</b>	<b>895193.</b>
Net Assets	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>	<b>110081.</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>	<b>96297.</b>
	<b>20</b> Other changes in net assets or fund balances (attach explanation) <b>SEE STATEMENT 2</b>	<b>20</b>	<b>-792.</b>
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>	<b>205586.</b>

523001  
02-03-06

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

Form 990 (2005)

**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.

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
22 Grants and allocations (attach schedule) (cash \$ <u>70264.</u> noncash \$ <u>0.</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	22	70264.	70264.	STATEMENT 5	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc **	25	71600.	61254.	6802.	3544.
26 Other salaries and wages	26	178379.	132810.	30500.	15069.
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29	58741.	45818.	8811.	4112.
30 Professional fundraising fees	30				
31 Accounting fees	31	7100.		7100.	
32 Legal fees	32	6040.		6040.	
33 Supplies	33	21607.	19816.	1221.	570.
34 Telephone	34	11259.	8782.	1689.	788.
35 Postage and shipping	35	13992.	13502.		490.
36 Occupancy	36	9996.	7797.	1499.	700.
37 Equipment rental and maintenance	37				
38 Printing and publications	38	39810.	35940.		3870.
39 Travel	39	97891.	95440.		2451.
40 Conferences, conventions, and meetings	40	12140.	12140.		
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	8209.	6403.	1231.	575.
43 Other expenses not covered above (itemize):					
a	43a				
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g SEE STATEMENT 3	43g	288165.	273807.	5373.	8985.
44 Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	895193.	783773.	70266.	41154.

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 \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;(iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

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\*\* SEE STATEMENT 4



**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? ▶	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others )
<b>TO ADVANCE PUBLIC UNDERSTANDING OF RELIGION IN THE MEDIA.</b>	
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.)	
<b>a</b> SEE STATEMENT 6	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	783773.
<b>b</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>c</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>d</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule)	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>f</b> Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	783773.

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**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
<b>Assets</b>	45 Cash - non-interest-bearing	219467.	45	41119.
	46 Savings and temporary cash investments	644023.	46	514575.
	47 a Accounts receivable	47a 23775.		
	b Less allowance for doubtful accounts	47b	47c	23775.
	48 a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments - land, buildings, and equipment: basis	55a		
	b Less accumulated depreciation	55b	55c	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	57a 76695.			
b Less accumulated depreciation <b>STMT 7</b>	57b 51313.	31314.	57c	25382.
58 Other assets (describe <b>SEE STATEMENT 8</b> )	29981.	58	59222.	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58	924785.	59	664073.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	7649.	60	2500.
	61 Grants payable		61	
	62 Deferred revenue	820839.	62	455735.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <b>MISCELLANEOUS</b> )		65	252.
66 <b>Total liabilities.</b> Add lines 60 through 65)	828488.	66	458487.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds	0.	70	0.
	71 Paid-in or capital surplus, or land, building, and equipment fund	0.	71	0.
	72 Retained earnings, endowment, accumulated income, or other funds	96297.	72	205586.
	73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	96297.	73	205586.
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	924785.	74	664073.	

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Part VI Other Information (continued)		Yes	No
82 a	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?	82a	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	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85b	N/A
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			
c Dues, assessments, and similar amounts from members		85c	N/A
d Section 162(e) lobbying and political expenditures		85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)		85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g	N/A
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?		85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities		86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? 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.
90 a	List the states with which a copy of this return is filed <u>OH</u>		
b Number of employees employed in the pay period that includes March 12, 2005		90b	6
91 a	The books are in care of <u>MS. DEBRA MASON</u> Telephone no. <u>614-891-9001</u> Located at <u>P.O. BOX 2037, WESTERVILLE, OH</u> ZIP + 4 <u>43086-2037</u>		
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 <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		91b	X
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country <u>N/A</u>		91c	X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

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**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) Exclu- sion 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			14	19836.	
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			01	5000.	
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.		24836.	0.
105 Total (add line 104, columns (B), (D), and (E))					24836.



**Note:** Line 105 plus line 1d, 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).

**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).

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 	Date 10/28/06	Type or print name and title. Debra C. Mason Executive Director	
Paid Preparer's Use Only	Preparer's signature 	Date 10/26/06	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP + 4 COTTERMAN-WILSON CPAS, INC. 951 HIGH STREET WORTHINGTON, OHIO 43085	EIN Phone no. 614-781-6174		



SCHEDULE A  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

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.)

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

OMB No 1545-0047

2005

Name of the organization

RELIGION NEWSWRITERS FOUNDATION

Employer identification number

31 1650883

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 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) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

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	0	

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	0	

**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.)	1		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?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3 a	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		X
b	Do you have a section 403(b) annuity plan for your employees?	3b		X
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		X
4 a	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		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X

**Part 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	<input type="checkbox"/> A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
6	<input type="checkbox"/> A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
7	<input type="checkbox"/> A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
8	<input type="checkbox"/> A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
9	<input type="checkbox"/> 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	<input type="checkbox"/> 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 <b>Support Schedule</b> in Part IV-A.)
11a	<input type="checkbox"/> 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 <b>Support Schedule</b> in Part IV-A.)
11b	<input type="checkbox"/> A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)
12	<input type="checkbox"/> 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 <b>Support Schedule</b> in Part IV-A.)
13	<input checked="" type="checkbox"/> An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ► <input checked="" type="checkbox"/> Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above
RELIGION NEWSWRITERS ASSOCIATION A 501(C)(6) ORGANIZATION	12

14	<input type="checkbox"/> An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)
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**Part IV-A** **Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. **N/A**  
Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)					
16 Membership fees received					
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 public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	0.	0.	0.	0.	0.
24 Line 23 minus line 17					
25 Enter 1% of line 23					

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶	26a	N/A
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 amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶	26b	N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶	26c	N/A
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____ ▶	26d	N/A
e Public support (line 26c minus line 26d total) ▶	26e	N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶	26f	N/A %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified 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: (2004) (2003) (2002) (2001)				
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to 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: (2004) (2003) (2002) (2001)				
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶	27c	N/A		
d Add: Line 27a total _____ and line 27b total _____ ▶	27d	N/A		
e Public support (line 27c total minus line 27d total) ▶	27e	N/A		
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶	27f	N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	N/A %		
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	27h	N/A %		

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.

**Part V Private School Questionnaire** (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	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?		
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?		
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.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions? 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?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34 a Does the organization receive any financial aid or assistance from a governmental agency?		
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.		
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		

Schedule A (Form 990 or 990-EZ) 2005



**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

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		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
		N/A	
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		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 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 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
		0.

**Exempt Organizations** (See page 12 of the instructions.)

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)	X	
b(iv)	X	
b(v)		X
b(vi)		X
c		X



Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	PROGRAM SERVICES							
1	FURNITURE AND EQUIPMENT							
	070100	200DB	5.00	17	8054.		7822.	232.
2	FURNITURE AND EQUIPMENT							
	070100	200DB	7.00	17	2555.		2099.	182.
3	FURNITURE AND EQUIPMENT							
	100101	200DB	7.00	17	13003.		9087.	1119.
4	FURNITURE							
	070102	200DB	7.00	17	1813.	544.	794.	136.
5	EQUIPMENT							
	070102	200DB	5.00	17	19717.	5915.	10622.	1272.
6	EQUIPMENT							
	070103	200DB	5.00	17	157.	79.	49.	12.
7	OFFICE EQUIPMENT							
	011304	SL	7.00	16	3298.		870.	471.
8	OFFICE EQUIPMENT							
	020104	SL	7.00	16	1942.		393.	277.
9	OFFICE EQUIPMENT							
	010604	SL	5.00	16	793.		239.	159.
10	RICOH COPIER							
	011304	SL	7.00	16	4740.		1016.	677.
11	APPLE COMPUTER							
	020104	SL	5.00	16	4689.		1329.	938.
12	APPLE FIRELITE							
	020104	SL	5.00	16	2102.		595.	420.
13	HP PRINTER							
	020904	SL	5.00	16	242.		68.	48.
14	FIRELITE BACKUPS AND COMPUTER EQUIPEMENT							
	020904	SL	5.00	16	751.		213.	150.
15	APPLE MONITOR							
	020904	SL	5.00	16	629.		178.	126.
16	G-5 APPLE							
	020904	SL	5.00	16	2383.		676.	477.
17	APPLE PART 1 OF \$364							
	052604	SL	5.00	16	353.		77.	71.
18	PEARCE - NEW COMPUTER							
	061504	SL	5.00	16	2564.		556.	513.
19	PARTLOW DESK/FILES/SHELVES							
	080304	SL	7.00	16	880.		115.	126.
20	POWERBOOK 12" 1.5 GHZ SUPERDRIVE							
	032405	SL	5.00	16	1721.			344.
21	LATERAL FILES							
	061405	SL	7.00	16	1240.			177.
22	EQUA 2 WORK CHAIR W/ PHEUMATIC							
	091505	SL	7.00	16	721.			86.
23	IMAC G5 COMPUTER							
	020206	SL	5.00	16	1149.			96.
24	IMAC G4 COMPUTER							
	020206	SL	5.00	16	1199.			100.
	* 990 PAGE 2 TOTAL PROGRAM SERVICES							
					76695.	6538.	36798.	8209.
	* GRAND TOTAL 990 PAGE 2 DEPR							
					76695.	6538.	36798.	8209.

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FORM 990	SPECIAL EVENTS AND ACTIVITIES	STATEMENT	1
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DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SILENT AUCTION	5000.		5000.		5000.
TO FM 990, PART I, LINE 9	5000.		5000.		5000.

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FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	2
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DESCRIPTION	AMOUNT
BOOK TAX DEPRECIATION DIFFERENCE	-792.
TOTAL TO FORM 990, PART I, LINE 20	-792.

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FORM 990	OTHER EXPENSES	STATEMENT	3
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
GENERAL INSURANCE	1390.	1084.	209.	97.
ADVERTISING	28305.	28305.		
DUES AND SUBSCRIPTIONS	4932.	4932.		
MISCELLANEOUS	76041.	63414.	3866.	8761.
HONARARIUMS	24328.	24328.		
CORRESPONDENTS	74170.	74170.		
PRIZED	6858.	6858.		
COMPUTER				
SUPPORT/MAINTENANCE	14072.	14072.		
TRAINING COORDINATOR	0.			
WEBSITE DEVELOPMENT	62855.	62855.		
EQUIPMENT	1747.	1348.	272.	127.
PAYROLL SERVICES	1026.		1026.	
SCHOLARSHIP REFUNDS	-7559.	-7559.		
TOTAL TO FM 990, LN 43	288165.	273807.	5373.	8985.

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FORM 990	OFFICER COMPENSATION ALLOCATION PART II, LINE 25	STATEMENT 4
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NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
DEBRA MASON	66296.	5304.		71600.
A. PROGRAM SERVICES	56716.	4538.		61254.
B. MANAGEMENT AND GENERAL	6298.	504.		6802.
C. FUNDRAISING	3282.	262.		3544.

TOTAL PROGRAM SERVICES	61254.
TOTAL MANAGEMENT AND GENERAL	6802.
TOTAL FUNDRAISING	3544.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B	71600.

FORM 990	CASH GRANTS AND ALLOCATIONS	STATEMENT 5
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CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
	SEE ATTACHED LIST		NONE	70264.

TOTAL INCLUDED ON FORM 990, PART II, LINE 22	70264.
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FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

6

## DESCRIPTION OF PROGRAM SERVICE ONE

TO ADVANCE PUBLIC UNDERSTANDING OF RELIGION BY  
 MEANS OF INFORMATIVE PUBLICATIONS, PROGRAMS,  
 INCLUDING CONFERENCE SEMINARS AND DISCUSSION GROUPS  
 FOR REPORTERS, EDITORS OTHER MEMEBERS OF THE SECULAR

NEWS MEDIA AND THE GENERAL PUBLIC

GRANTS

EXPENSES

TO FORM 990, PART III, LINE A

783773.

FORM 990

DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT

STATEMENT

7

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE AND EQUIPMENT	8054.	8054.	0.
FURNITURE AND EQUIPMENT	2555.	2281.	274.
FURNITURE AND EQUIPMENT	13003.	10206.	2797.
FURNITURE	1813.	1474.	339.
EQUIPMENT	19717.	17809.	1908.
EQUIPMENT	157.	140.	17.
OFFICE EQUIPMENT	3298.	1341.	1957.
OFFICE EQUIPMENT	1942.	670.	1272.
OFFICE EQUIPMENT	793.	398.	395.
RICOH COPIER	4740.	1693.	3047.
APPLE COMPUTER	4689.	2267.	2422.
APPLE FIRELITE	2102.	1015.	1087.
HP PRINTER	242.	116.	126.
FIRELITE BACKUPS AND COMPUTER			
EQUIPEMENT	751.	363.	388.
APPLE MONITOR	629.	304.	325.
G-5 APPLE	2383.	1153.	1230.
APPLE PART 1 OF \$364	353.	148.	205.
PEARCE - NEW COMPUTER	2564.	1069.	1495.
PARTLOW DESK/FILES/SHELVES	880.	241.	639.
POWERBOOK 12" 1.5 GHZ			
SUPERDRIVE	1721.	344.	1377.



LATERAL FILES	1240.	177.	1063.
EQUA 2 WORK CHAIR W/ PHEUMATIC	721.	86.	635.
IMAC G5 COMPUTER	1149.	96.	1053.
IMAC G4 COMPUTER	1199.	100.	1099.
TOTAL TO FORM 990, PART IV, LN 57	76695.	51545.	25150.

FORM 990	OTHER ASSETS	STATEMENT	8
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DESCRIPTION	AMOUNT
INTEREST RECEIVABLE	0.
PREPAID CONFERENCE EXPENSE	0.
PREPAID SCHOLARSHIP EXPENSE	24165.
PREPAID TELEPHONE WAGES	210.
PREPAID SALARY	34847.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	59222.

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	9
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DESCRIPTION	AMOUNT
SCHOLARSHIP REFUNDS INCLUDED IN EXPENSES	8409.
TOTAL TO FORM 990, PART IV-A	8409.

FORM 990	OTHER EXPENSES INCLUDED ON FORM 990	STATEMENT	10
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DESCRIPTION	AMOUNT
SCHOLARSHIP REFUNDS	-8409.
BOOK/TAX DEPRECIATION	-792.
ROUNDING	-1.
TOTAL TO FORM 990, PART IV-B	-9202.

FORM 990                      PART V-A - LIST OF OFFICERS, DIRECTORS,                      STATEMENT 11  
                                  TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DEBRA L. MASON 99 N. STATE ST. WESTERVILLE, OH 43081	EXECUTIVE DIRECTOR 40.00	66296.	5304.	0.
ROBERT MONG 508 YOUNG STS., DALLAS, TX 75202	PRESIDENT 10.00	0.	0.	0.
YONAT SHIMRON 215 S. MCDOWELL ST. RELEIGH, NC 27601	VICE-PRESIDENT 10.00	0.	0.	0.
JEFF SHELER 408 WASHINGTON ST. PORTSMOUTH, VA 23704	SECRETARY/TREASURER 10.00	0.	0.	0.
CHARLES OVERBY 1101 WILSON BLVD. ARLINGTON, VA 22209	CHAIRMAN 10.00	0.	0.	0.
ADELLE BANKS 1101 CONNECTICUT AVE. NW, STE 350. WASHINGTON, DC 20036	TRUSTEE 10.00	0.	0.	0.
BRUCE NOLAN 3800 HOWARD AVE. NEW ORLEANS, LA 70125	TRUSTEE 10.00	0.	0.	0.
KATHRYN OLSON 2216 SHEFFIELD DR. KALAMAZOO, MI 49008	TRUSTEE 10.00	0.	0.	0.
JERRY WARREN P.O. BOX 408 MIDDELBURG, VA 20118	TRUSTEE 10.00	0.	0.	0.
JIMMY R. ALLEN 1091 SANDERLIN MOUNTAIN DR. 10711 BIG CANOE, GA 30143	TRUSTEE 10.00	0.	0.	0.
PAUL ANGER 600 W. FORT DETROIT, MI 48226	TRUSTEE 10.00	0.	0.	0.



RELIGION NEWSWRITERS FOUNDATION

31-1650883

RUSSELL CHANDLER 14493 .KEBRA LN. SONARA, CA 95370	TRUSTEE 10.00	0.	0.	0.
GEORGE GALLUP JR. 502 CARNEGIE CENTER, STE. 300 PRINCETON, NJ 08540	TRUSTEE 10.00	0.	0.	0.
DEBORAH HOWELL 34 WELLESLEY CIRCLE GLEN ECHO, MD 20812	TRUSTEE 10.00	0.	0.	0.
JOAN KONNER 200 CENTRAL PARK S., APT. 33B NEW YORK, NY 10019	TRUSTEE 10.00	0.	0.	0.
KEN PAULSON 7950 JONES BRANCH DR. MCLEAN, VA 22108	TRUSTEE 10.00	0.	0.	0.
DAVID SHRIBMAN 34 BLVD, OF THE ALLIES PITTSBURGH, PA 15222-1204	TRUSTEE 10.00	0.	0.	0.
PAMELA THOMPSON 300 CONSHOHOCKEN STATE RD., STE. 500 WEST CONSHOHOCKEN, PA 19429	TRUSTEE 10.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		66296.	5304.	0.

SCHEDULE A INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 12  
PART VII, LINE 51, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

RELIGION NEWSWRITERS ASSOCIATION

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

PAID RNA FOR THIS ORGANIZATIONS SHARE OF BUILDING RENT

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

RELIGION NEWSWRITERS ASSOCIATION

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

RNA REIMBURSED THIS ORGANIZATION FOR IT'S SHARE OF PAYROLL AND SUPPLIES



SCHEDULE A      AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS      STATEMENT    13  
PART VII, LINE 52, COLUMN (C)

NAME OF AFFILIATED OR RELATED ORGANIZATION

RELIGION NEWSWRITERS ASSOCIATION

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

SUPPORTED ORGANIZATION

# Religion Newswriters Foundation

## Scholarships

FYE June 30, 2006

Date	Num	Name	Amount
12/08/2005		Bill Tammeus	600.00
07/28/2005		Calvin Bratt	1,700.00
12/01/2005		Calvin Bratt	1,500.00
12/06/2005		Carla Jean Whitley	650.00
01/27/2006		Catherine Cambra	1,200.00
01/27/2006		Catherine Guiles	2,800.00
01/12/2006		Christina Littlefiled	1,444.00
03/01/2006		Christina Littlefiled	1,206.00
01/12/2006		Dan Benson	620.00
08/01/2005		Dave Smith	800.00
12/13/2005		Dave Smith	1,000.00
06/01/2006		David Benson	800.00
01/18/2006		David Francis	4,360.00
07/26/2005		Deirdre Cox Baker	3,600.00
01/12/2006		Evrin Bunn	3,030.00
02/02/2006		Evrin Bunn	500.00
11/02/2005		Francisco Cotto	1,100.00
05/23/2006		Frank Lockwood	1,290.00
12/31/2005		James V. Haug	2,500.00
08/08/2005		Jody Hassett Sanchez	3,500.00
01/12/2006		Kay Johnson	1,314.00
12/06/2005		Kimberly Alleyne	1,000.00
11/28/2005		Linda Ireland	800.00
07/25/2005		Lisa Gauthier	1,100.00
01/11/2006		Lisa Gauthier	890.00
05/02/2006		Magin McKenna	1,600.00
08/09/2005		Mark Rumsey	1,100.00
04/19/2006		Michelle Burford	5,000.00
05/23/2006		Myrna Moore	1,200.00
01/12/2006		Peter Smith	1,345.00
05/18/2006		Peter Smith	1,310.00
07/25/2005		Phil Haslanger	900.00
01/12/2006		Phil Haslanger	1,840.00
06/27/2006		Phil Haslanger	1,000.00
07/26/2005		Phyllis Hanlon	810.00
01/12/2006		Samuel Scott	2,475.00
11/22/2005		Sharon Reece	1,600.00
08/09/2005		Sheila Lalwani	2,530.00
02/23/2006		Sheila Lalwani	2,400.00
08/02/2005		Susan Jacobs	1,900.00
11/03/2005		Tamara E. Holmes	500.00
05/18/2006		Tim Callahan	1,550.00
07/26/2005		Timothy Tooten	900.00
09/13/2005		Todd Pitock	1,000.00
			<u>70,264.00</u>