

Return of Organization Exempt From Income Tax

2005

Department of the Treasury
Internal Revenue Service

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.

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
CHICAGO LEGAL CLINIC, INC

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
2938 EAST 91ST STREET

City or town, state or country, and ZIP + 4
CHICAGO, IL 60617

D Employer identification number
36-3200465

E Telephone number
(773) 731-1762

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.CLCLAW.ORG**

J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

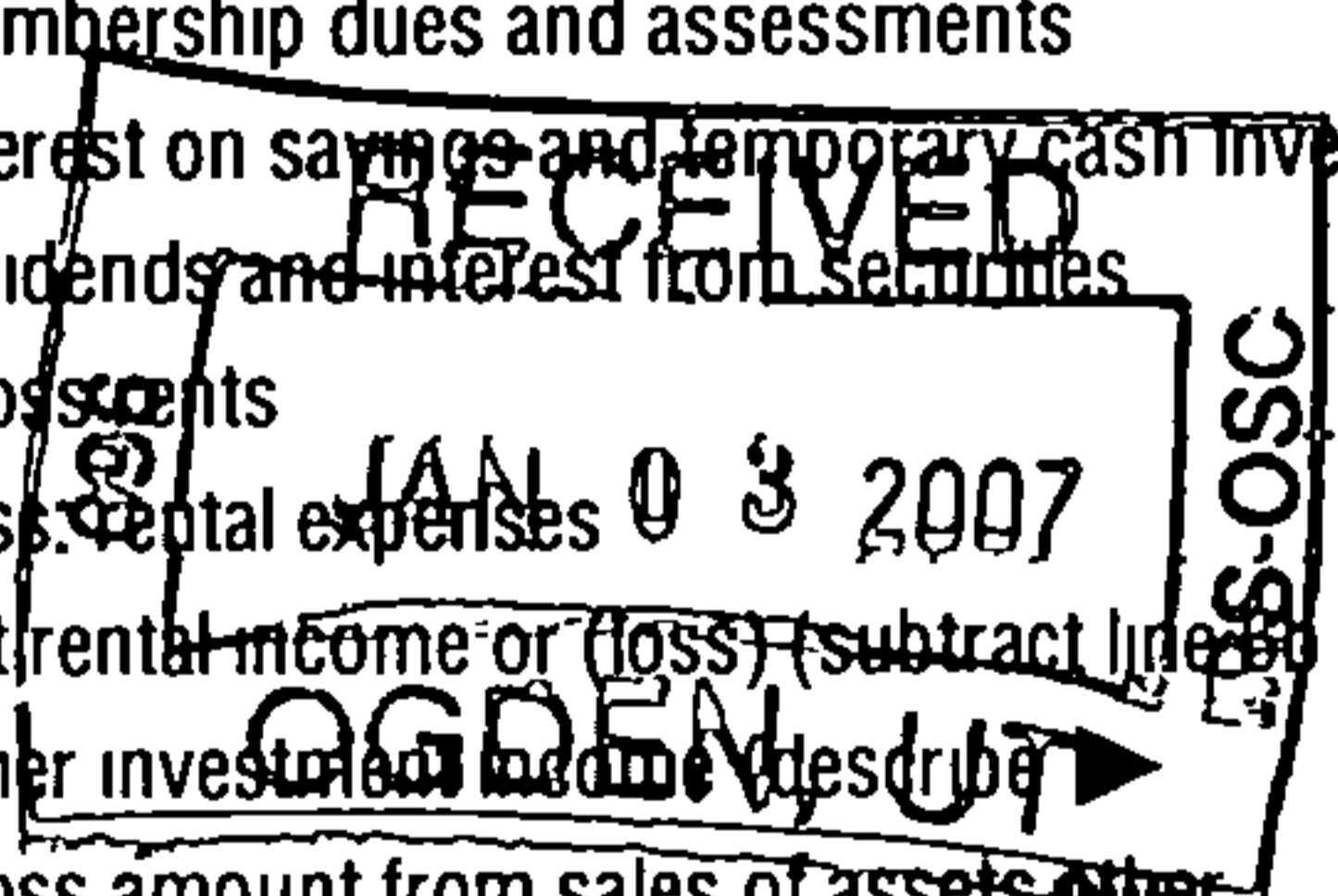
K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

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 **1,593,532.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	619,139.		
b	Indirect public support	1b	67,326.		
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ 686,465. noncash \$ _____)	1d	686,465.		
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	699,513.		
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4	12,755.		
5	Dividends and interest from securities	5			
6a	Gross receipts	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	700.		
c	Gain or (loss) (attach schedule)	8b	3,264.		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	-2,564.	8d	-2,564.
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ 0. of contributions reported on line 1a)	9a	159,185.		
b	Less: direct expenses other than fundraising expenses	9b	39,684.		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	119,501.		
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11	34,914.		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,550,584.		
13	Program services (from line 44, column (B))	13	1,371,650.		
14	Management and general (from line 44, column (C))	14	83,188.		
15	Fundraising (from line 44, column (D))	15	69,359.		
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17	1,524,197.		
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	26,387.		
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	632,963.		
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3	20	6,587.		
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	665,937.		



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>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/> 22				
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	187,750.	126,963.	27,050.	33,737.
26 Other salaries and wages 26	867,083.	810,997.	36,214.	19,872.
27 Pension plan contributions 27				
28 Other employee benefits 28	74,997.	69,040.	3,262.	2,695.
29 Payroll taxes 29	91,328.	81,430.	5,265.	4,633.
30 Professional fundraising fees 30				
31 Accounting fees 31	15,059.	13,704.	602.	753.
32 Legal fees 32				
33 Supplies 33	15,524.	14,084.	826.	614.
34 Telephone 34	25,483.	24,766.	299.	418.
35 Postage and shipping 35	14,788.	13,565.	544.	679.
36 Occupancy 36	134,576.	129,308.	2,195.	3,073.
37 Equipment rental and maintenance 37	18,110.	17,024.	397.	689.
38 Printing and publications 38	14,759.	14,017.	551.	191.
39 Travel 39	29,167.	27,592.	633.	942.
40 Conferences, conventions, and meetings 40				
41 Interest 41				
42 Depreciation, depletion, etc. (attach schedule) 42	13,513.	12,016.	810.	687.
43 Other expenses not covered above (itemize).				
a <u>INSURANCE</u> 43a	11,206.	8,450.	2,574.	182.
b <u>DUES</u> 43b	1,821.	1,821.		
c <u>ADVERTISING</u> 43c	478.	288.	190.	
d <u>OTHER</u> 43d	4,096.	2,466.	1,625.	5.
e <u>CONSULTING</u> 43e	4,459.	4,119.	151.	189.
f 43f				
g 43g				
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15) 44	1,524,197.	1,371,650.	83,188.	69,359.

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 ; (i) 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

** 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? ► <u>SEE STATEMENT 5</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)	
a <u>LEGAL SERVICES - THE CLINIC PROVIDES LEGAL ASSISTANCE FOR THE POOR AND WORKING POOR IN THE AREAS OF LAW ESSENTIAL TO INDIVIDUAL WELL-BEING AND SPECIFICALLY HOUSING, CONSUMER, FAMILY LAW AND ENTITLEMENTS.</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	758,396.
b <u>ENVIRONMENTAL LAW - FOCUSES ON NEIGHBORHOOD ENVIRONMENTAL PROBLEMS, OFFERING BOTH EDUCATION AND DIRECT SERVICES.</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	88,252.
c <u>DOMESTIC VIOLENCE - THE PROGRAM WAS CREATED TO EFFECTIVELY COMBAT THE NIGHTMARE OF DOMESTIC VIOLENCE THROUGH A COMPREHENSIVE APPROACH TO VICTIM ASSISTANCE.</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	156,076.
d <u>IMMIGRATION PROJECT - THE CLINIC PROVIDES REPRESENTATION TO THOSE FACING IMMIGRATION PROBLEMS.</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	133,546.
e Other program services (attach schedule) <u>SEE STATEMENT 6</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	235,380.
f <u>Total of Program Service Expenses (should equal line 44, column (B), Program services)</u> ►	1,371,650.

Form 990 (2005)

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	207,366.	46	269,972.	
	47 a Accounts receivable	47a			
	b Less: allowance for doubtful accounts	47b	47c		
	48 a Pledges receivable	48a			
	b Less: allowance for doubtful accounts	48b	48c		
	49 Grants receivable	33,096.	49	11,805.	
	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	SEE STATEMENT 7	241,210.	56	223,266.
	57 a Land, buildings, and equipment basis	57a 262,489.			
	b Less: accumulated depreciation	57b 207,799.	35,351.	57c	54,690.
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 8)		1,069,888.	58	565,586.	
59 Total assets (must equal line 74). Add lines 45 through 58		1,586,911.	59	1,125,319.	
Liabilities	60 Accounts payable and accrued expenses	-2,135.	60	-7,911.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	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 <input type="checkbox"/> CLIENTS DEPOSITS)		956,083.	65	467,293.
66 Total liabilities. Add lines 60 through 65)		953,948.	66	459,382.	
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	581,808.	67	635,541.	
	68 Temporarily restricted	51,155.	68	30,396.	
	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; column (B) must equal line 21)		632,963.	73	665,937.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		1,586,911.	74	1,125,319.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions)

a	Total revenue, gains, and other support per audited financial statements		a	2,109,925.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1	6,587.	
2	Donated services and use of facilities	b2	513,070.	
3	Recoveries of prior year grants	b3		
4	Other (specify): <u>SEE STATEMENT 9</u>	b4	39,684.	
	Add lines b1 through b4			b 559,341.
c	Subtract line b from line a			c 1,550,584.
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2			d 0.
e	Total revenue (Part I, line 12) Add lines c and d			e 1,550,584.

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

a	Total expenses and losses per audited financial statements		a	2,076,951.
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1	513,070.	
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify): <u>SEE STATEMENT 10</u>	b4	39,684.	
	Add lines b1 through b4			b 552,754.
c	Subtract line b from line a			c 1,524,197.
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2			d 0.
e	Total expenses (Part I, line 17) Add lines c and d			e 1,524,197.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 11		187,750.	0.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) **Yes No**

75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 21			
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b		X
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? SEE STATEMENT 13	75c	X	
Note. Related organizations include section 509(a)(3) supporting organizations.			
If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.			
d Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NONE				

Part VI Other Information (See the instructions) **Yes No**

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b		
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	
b If "Yes," enter the name of the organization SEE STATEMENT 12			
and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
81 a Enter direct or indirect political expenditures. (See line 81 instructions.) 81a 0.	81a		
b Did the organization file Form 1120-POL for this year?	81b		X

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	513,070.
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? 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	85b	N/A
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 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0.		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? 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 ▶ IL		
b	Number of employees employed in the pay period that includes March 12, 2005	90b	34
91 a	The books are in care of ▶ EDWARD GROSSMAN, EXEC DIR Telephone no. ▶ (773) 731-1762 Located at ▶ 2938 EAST 91ST STREET, CHICAGO, IL ZIP + 4 ▶ 60617		
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 ▶ N/A 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 ▶ N/A	91c	X
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)

	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	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a CLIENT FEES					515,846.
b CONTRACT FOR SERVICE					183,667.
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	12,755.	
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					-2,564.
101 Net income or (loss) from special events					119,501.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS					8,474.
b SUBLET INCOME					26,440.
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		12,755.	851,364.
105 Total (add line 104, columns (B), (D), and (E))					864,119.

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).
▼	SEE STATEMENT 14

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
SERENEDEBT, LLC - 2938 EAST 91ST STREET, CHICAGO, IL 60617	100%	DEBT MONITORING & DEBT REDUCTION	135,779.	16,381.

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: *[Signature]* Date: 12-22-06 Type or print name and title: PAUL J. BENEVOLO, TREASURER

Paid Preparer's Use Only: Preparer's signature: *[Signature]* Date: 12/19/06 Check if self-employed: Preparer's SSN or PTIN: P00095588

Firm's name (or yours if self-employed), address, and ZIP + 4: CLIFTON GUNDERSON LLP, 1501 W. 22ND STREET, OAK BROOK, ILLINOIS 60523

EIN: 37-0802863 Phone no.: (630) 573-8600

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 CHICAGO LEGAL CLINIC, INC	Employer identification number 36 3200465
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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.) 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.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	X	
e Transfer of any part of its income or assets?		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.)		X
b Do you have a section 403(b) annuity plan for your employees?	X	
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		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?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		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 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)(v). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and 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: ► Type 1 Type 2 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

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

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

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.)	462,653.	437,144.	540,939.	715,490.	2,156,226.
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	666,158.	668,078.	620,897.	599,865.	2,554,998.
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	9,210.	2,895.	11,432.	11,084.	34,621.
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	139,050.	114,446.	SEE STATEMENT 15 102,872.	115,763.	472,131.
23 Total of lines 15 through 22	1,277,071.	1,222,563.	1,276,140.	1,442,202.	5,217,976.
24 Line 23 minus line 17	610,913.	554,485.	655,243.	842,337.	2,662,978.
25 Enter 1% of line 23	12,771.	12,226.	12,761.	14,422.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 53,260.
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 1,225,675.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 2,662,978.
d Add: Amounts from column (e) for lines: 18 34,621. 19 _____					26d 1,732,427.
22 472,131. 26b 1,225,675.					26e 930,551.
e Public support (line 26c minus line 26d total)					26f 34.9440%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
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: N/A					
(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: N/A					
(2004) (2003) (2002) (2001)					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____					27c N/A
17 _____ 20 _____ 21 _____					27d N/A
d Add: Line 27a total _____ and line 27b total _____					27e N/A
e Public support (line 27c total minus line 27d total)					
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.					

NONE

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?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	

33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 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 (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		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:	Yes	No	Amount
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.)			0.

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

Book Asset Detail 7/01/05 - 6/30/06

FYE: 6/30/2006

Asset *	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Automobiles											
100 *	96 Ford Aspire	12/14/01	1,500.00	0.00	0.00	1,500.00	0.00	1,500.00	0.00	S/L	3 0
Automobiles											
			1,500.00	0.00c	0.00	1,500.00	0.00	1,500.00	0.00		
	*Less: Dispositions		1,500.00	0.00	0.00	1,500.00	0.00	1,500.00	0.00		
	Net Automobiles		0.00	0.00c	0.00	0.00	0.00	0.00	0.00		
Group: Donated property											
13	Office equip (see permanent file for	12/31/96	900.00	0.00	0.00	900.00	0.00	900.00	0.00	S/L	5.0
17	Research materials	6/30/94	2,974.00	0.00	0.00	2,974.00	0.00	2,974.00	0.00	S/L	3.0
18	Various	6/30/94	1,059.25	0.00	0.00	1,059.25	0.00	1,059.25	0.00	S/L	3.0
21	Desk and 2 chairs - Samuel Cultrata	6/30/95	150.00	0.00	0.00	150.00	0.00	150.00	0.00	S/L	5.0
22	File cabinet - Muhammed Gheith	6/30/95	150.00	0.00	0.00	150.00	0.00	150.00	0.00	S/L	5.0
25	Library (see permanent file for detai	12/31/96	5,195.00	0.00	0.00	5,195.00	0.00	5,195.00	0.00	S/L	5.0
26	Computer equipment (see perm file	12/31/96	4,825.00	0.00	0.00	4,825.00	0.00	4,825.00	0.00	S/L	5.0
27	Furniture (see permanent file for det	12/31/96	4,550.00	0.00	0.00	4,550.00	0.00	4,550.00	0.00	S/L	5.0
38	Tables & chairs - Clifton Gunderson	6/30/98	1,750.00	0.00	0.00	1,750.00	0.00	1,750.00	0.00	S/L	5.0
39	Desks & filing cabinets - Clifton Gu	6/30/98	1,700.00	0.00	0.00	1,700.00	0.00	1,700.00	0.00	S/L	5.0
40	Desks & filing cabinets - Archdioce	6/30/98	500.00	0.00	0.00	500.00	0.00	500.00	0.00	S/L	5.0
43	United States Code - N Brent	6/30/98	300.00	0.00	0.00	300.00	0.00	300.00	0.00	S/L	5.0
44	Marindale Hubbell Law - Loyola	6/30/98	3,500.00	0.00	0.00	3,500.00	0.00	3,500.00	0.00	S/L	5.0
49	Filing cabinets - Beeler, Schad & D	6/30/99	1,200.00	0.00	0.00	1,200.00	0.00	1,200.00	0.00	S/L	5.0
50	US Code, Annotated - Karaganis &	6/30/99	550.00	0.00	0.00	550.00	0.00	550.00	0.00	S/L	5.0
52	Office Furniture - South Chicago Bi	6/30/99	1,000.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00	S/L	5.0
54	Office furniture - J Fridkin	6/30/99	900.00	0.00	0.00	900.00	0.00	900.00	0.00	S/L	5.0
56	Conference table, chairs, cabinets	6/15/00	1,800.00	0.00	0.00	1,800.00	0.00	1,800.00	0.00	S/L	5.0
57	Chairs (4)	5/19/00	500.00	0.00	0.00	500.00	0.00	500.00	0.00	S/L	5.0
59	Copy Machine	2/01/00	400.00	0.00	0.00	400.00	0.00	400.00	0.00	S/L	5.0
62	Office furniture	11/15/99	300.00	0.00	0.00	300.00	0.00	300.00	0.00	S/L	5.0
63	Cabinets	11/15/99	800.00	0.00	0.00	800.00	0.00	800.00	0.00	S/L	5.0
64	Pentium processor and monitor	11/15/99	1,000.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00	S/L	5.0
81	Office Furniture-Bobb & Assoc	4/15/01	2,500.00	0.00	0.00	2,125.00	375.00	2,500.00	0.00	S/L	3.0
83	(4) Secretarial Desks-Allgretti	6/15/01	2,750.00	0.00	0.00	2,245.83	504.17	2,750.00	0.00	S/L	5.0
84	Credenza-Allgretti	6/15/01	500.00	0.00	0.00	408.33	91.67	500.00	0.00	S/L	5.0
86	Executive Desk Chairs-Allgretti	6/15/01	800.00	0.00	0.00	653.33	146.67	800.00	0.00	S/L	5.0
87	(5) Desk Chairs-Allgretti	6/15/01	1,150.00	0.00	0.00	939.17	210.83	1,150.00	0.00	S/L	5.0
88	(2) Bookcases & Accessories-Allgre	6/15/01	725.00	0.00	0.00	592.08	132.92	725.00	0.00	S/L	5.0
89	ILL Decision Books-Allgretti	6/15/01	1,250.00	0.00	0.00	1,250.00	0.00	1,250.00	0.00	S/L	5.0
90	Drapes & Curtain Rods-Grossman	11/02/00	300.00	0.00	0.00	280.00	20.00	300.00	0.00	S/L	3.0
91	Corel WordPerfect 2000-Vizza	2/20/01	300.00	0.00	0.00	300.00	0.00	300.00	0.00	S/L	5.0
92	Panasonic Typewriter-Freireich	4/02/01	150.00	0.00	0.00	127.50	22.50	150.00	0.00	S/L	3.0
97	Computer equipment - AAA Club	6/30/02	1,800.00	0.00	0.00	1,800.00	0.00	1,800.00	0.00	S/L	5.0
99	Phone system - CBE	12/31/01	2,380.00	0.00	0.00	1,666.00	476.00	2,142.00	238.00	S/L	3.0
106	Hewlett Packard Laser Jet III Printe	10/05/02	600.00	0.00	0.00	330.00	120.00	450.00	150.00	S/L	5.0
107	Multi-media computer w/ scanner &	12/23/02	900.00	0.00	0.00	450.00	180.00	630.00	270.00	S/L	5.0
108	EM PAC computer w/ 17" monitor	4/04/03	850.00	0.00	0.00	382.50	170.00	552.50	297.50	S/L	5.0
109	Lanier copier - 6765 & 6735	4/04/03	5,000.00	0.00	0.00	2,250.00	1,000.00	3,250.00	1,750.00	S/L	5.0
119	3M Projector	12/11/03	1,000.00	0.00	0.00	316.67	200.00	516.67	483.33	S/L	5.0

Book Asset Detail 7/01/05 - 6/30/06

FYE: 6/30/2006

Asset *	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Donated property (continued)											
120	Computer equipment	2/16/04	4,500.00	0.00	0.00	1,200.00	900.00	2,100.00	2,400.00	S/L	50
121	Printer	11/17/03	2,700.00	0.00	0.00	855.00	540.00	1,395.00	1,305.00	S/L	50
122	12 filing cabinets	10/14/03	1,000.00	0.00	0.00	350.00	200.00	550.00	450.00	S/L	50
123	Computer equipment	10/29/04	3,000.00	0.00	0.00	400.00	600.00	1,000.00	2,000.00	S/L	50
124	Computer equipment	10/06/04	1,000.00	0.00	0.00	250.00	333.33	583.33	416.67	S/L	30
125	Computer equipment	6/11/05	1,200.00	0.00	0.00	20.00	240.00	260.00	940.00	S/L	50
126	PC980 Copier	1/04/05	1,500.00	0.00	0.00	150.00	300.00	450.00	1,050.00	S/L	50
127	Office furniture	10/29/04	1,500.00	0.00	0.00	200.00	300.00	500.00	1,000.00	S/L	50
128 *	1994 Volvo	7/23/04	2,500.00	0.00	0.00	763.89	416.67	1,180.56	1,319.44	S/L	30
138	Computer equipment	4/26/06	500.00	0.00c	0.00	0.00	16.67	16.67	483.33	S/L	50
139 *	91 Dodge Caravan	8/19/05	2,000.00	0.00c	0.00	0.00	55.56	55.56	1,944.44	S/L	30
140	5 acres of land in WI	7/28/05	30,000.00	0.00c	0.00	0.00	0.00	0.00	30,000.00	Land	0.0
			110,358.25	0.00c	0.00	56,308.55	7,551.99	63,860.54	46,497.71		
			*Less: Dispositions	0.00	0.00	763.89	0.00	1,236.12	3,263.88		
			Net Donated property	0.00c	0.00	55,544.66	7,551.99	62,624.42	43,233.83		

Group: Equipment

1	Office equipment	6/30/91	33,046.00	0.00	0.00	33,046.00	0.00	33,046.00	0.00	S/L	50
2	Office equipment	6/30/92	3,711.00	0.00	0.00	3,711.00	0.00	3,711.00	0.00	S/L	50
3	Software	6/30/96	980.00	0.00	0.00	980.00	0.00	980.00	0.00	S/L	50
4	Computer	6/30/94	5,664.00	0.00	0.00	5,664.00	0.00	5,664.00	0.00	S/L	30
5	Donated copy machine	6/30/94	1,500.00	0.00	0.00	1,500.00	0.00	1,500.00	0.00	S/L	40
6	Computer equipment - CompUSA	8/09/94	1,709.87	0.00	0.00	1,709.87	0.00	1,709.87	0.00	S/L	30
7	AT&T telephone system	1/23/95	8,459.50	0.00	0.00	8,459.50	0.00	8,459.50	0.00	S/L	50
8	Computer - Keith Harley	8/22/94	1,500.00	0.00	0.00	1,500.00	0.00	1,500.00	0.00	S/L	30
9	Air conditioner - Ted Stacey	7/26/95	200.00	0.00	0.00	200.00	0.00	200.00	0.00	S/L	50
10	Copier - N.E. Brands	9/09/97	7,413.00	0.00	0.00	7,413.00	0.00	7,413.00	0.00	S/L	50
11	Copier - N E Brand	2/22/96	6,550.00	0.00	0.00	6,550.00	0.00	6,550.00	0.00	S/L	50
12	Computer - Elek Tek	11/18/96	2,016.12	0.00	0.00	2,016.12	0.00	2,016.12	0.00	S/L	30
31	Computer equipment - Insight	11/06/97	31,072.97	0.00	0.00	31,072.97	0.00	31,072.97	0.00	S/L	50
32	NT servers - Dell	11/19/97	7,908.00	0.00	0.00	7,908.00	0.00	7,908.00	0.00	S/L	50
33	Computer equipment - Insight	12/12/97	318.60	0.00	0.00	318.60	0.00	318.60	0.00	S/L	50
34	Telephone equipment	12/15/97	212.00	0.00	0.00	212.00	0.00	212.00	0.00	S/L	50
35	Computer equipment - Insight	1/29/98	782.82	0.00	0.00	782.82	0.00	782.82	0.00	S/L	50
36	Copier - Image Solutions	3/31/98	5.00	0.00	0.00	5.00	0.00	5.00	0.00	S/L	50
45	3 HP Printers - Insight	7/23/98	3,191.88	0.00	0.00	3,191.88	0.00	3,191.88	0.00	S/L	50
67	Computer Monitor	8/04/99	247.53	0.00	0.00	247.53	0.00	247.53	0.00	S/L	30
68	Phone System	10/01/99	1,120.31	0.00	0.00	1,120.31	0.00	1,120.31	0.00	S/L	50
69	Telephone	10/04/99	245.00	0.00	0.00	245.00	0.00	245.00	0.00	S/L	50
70	Fax Machine	10/19/99	229.96	0.00	0.00	229.96	0.00	229.96	0.00	S/L	50
71	Refrigerator	10/19/99	139.92	0.00	0.00	139.92	0.00	139.92	0.00	S/L	50
73	printer	1/12/00	699.00	0.00	0.00	699.00	0.00	699.00	0.00	S/L	50
74	(3) Spirit 6-BTN Phones	8/17/00	571.56	0.00	0.00	552.50	19.06	571.56	0.00	S/L	50
75	(5) Monitors	5/15/01	699.95	0.00	0.00	699.95	0.00	699.95	0.00	S/L	30
76	(2) Hard Drives	5/15/01	219.98	0.00	0.00	183.33	36.65	219.98	0.00	S/L	50
77	(4) Monitors w/ cables	5/30/01	659.89	0.00	0.00	659.89	0.00	659.89	0.00	S/L	30
78	HP Laserjet printer	3/22/01	2,131.95	0.00	0.00	1,812.16	319.79	2,131.95	0.00	S/L	50

Book Asset Detail 7/01/05 - 6/30/06

FYE: 6/30/2006

Asset *	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Equipment (continued)											
79	Hard Drive for Paul Imparl	2/08/01	681.94	0.00	0.00	602.39	79.55	681.94	0.00	S/L	5.0
95	Desk Chair-Avila	9/29/00	69.99	0.00	0.00	66.50	3.49	69.99	0.00	S/L	5.0
96	Fax machine-Vondracek	12/05/00	249.99	0.00	0.00	229.17	20.82	249.99	0.00	S/L	5.0
102	Printer	7/31/01	399.95	0.00	0.00	399.95	0.00	399.95	0.00	S/L	3.0
103	Toshiba laptop	8/03/01	1,949.90	0.00	0.00	1,949.90	0.00	1,949.90	0.00	S/L	3.0
104	Misc computer parts to rebuild old c	5/16/02	801.86	0.00	0.00	801.86	0.00	801.86	0.00	S/L	3.0
105	Computer	6/12/02	563.66	0.00	0.00	563.66	0.00	563.66	0.00	S/L	3.0
112	Server & software	3/07/03	2,700.77	0.00	0.00	2,100.61	600.16	2,700.77	0.00	S/L	3.0
113	Software & computer equipment	3/14/03	1,588.69	0.00	0.00	1,235.64	353.05	1,588.69	0.00	S/L	3.0
114	3 computers	6/13/03	2,676.51	0.00	0.00	1,858.69	817.82	2,676.51	0.00	S/L	3.0
115	Printer/fax machine	2/11/03	563.76	0.00	0.00	454.14	109.62	563.76	0.00	S/L	3.0
116	3 phones	2/13/03	592.00	0.00	0.00	286.13	118.40	404.53	187.47	S/L	5.0
117	Billing software	3/10/03	649.90	0.00	0.00	505.47	144.43	649.90	0.00	S/L	3.0
118	Fax machine	8/15/03	735.00	0.00	0.00	469.58	245.00	714.58	20.42	S/L	3.0
129	Hard drive	2/02/05	595.99	0.00	0.00	49.67	119.20	168.87	427.12	S/L	5.0
130	Hard drive	2/15/05	546.98	0.00	0.00	45.58	109.40	154.98	392.00	S/L	5.0
131	Computer	5/31/05	628.52	0.00	0.00	10.48	125.70	136.18	492.34	S/L	5.0
132	Hard drive	5/31/05	729.70	0.00	0.00	12.16	145.94	158.10	571.60	S/L	5.0
133	Computer	4/22/05	651.32	0.00	0.00	21.71	130.26	151.97	499.35	S/L	5.0
134	Reman copier	9/03/04	995.00	0.00	0.00	165.83	199.00	364.83	630.17	S/L	5.0
135	3 computers	4/22/05	1,854.21	0.00	0.00	61.81	370.84	432.65	1,421.56	S/L	5.0
136	3 computers - LASPD	7/20/04	2,581.80	0.00	0.00	473.33	516.36	989.69	1,592.11	S/L	5.0
137	Telephone system - LASPD	8/02/04	3,652.00	0.00	0.00	669.53	730.40	1,399.93	2,252.07	S/L	5.0
141	HP computer	8/24/05	708.51	0.00c	0.00	0.00	196.81	196.81	511.70	S/L	3.0
142	HP computer	9/26/05	642.33	0.00c	0.00	0.00	160.58	160.58	481.75	S/L	3.0
143	HP computer	1/03/06	642.33	0.00c	0.00	0.00	107.06	107.06	535.27	S/L	3.0
144	HP laser printer	3/01/06	1,620.50	0.00c	0.00	0.00	180.06	180.06	1,440.44	S/L	3.0
Equipment			153,278.92	0.00c	0.00	135,864.10	5,959.45	141,823.55	11,455.37		
Group: Furnishings											
14	Furniture	6/30/94	3,018.75	0.00	0.00	3,018.75	0.00	3,018.75	0.00	S/L	5.0
15	Furniture - Office Max	8/11/94	226.54	0.00	0.00	226.54	0.00	226.54	0.00	S/L	5.0
16	Filing cabinet - Arvey	4/04/95	105.90	0.00	0.00	105.90	0.00	105.90	0.00	S/L	5.0
Furnishings			3,351.19	0.00c	0.00	3,351.19	0.00	3,351.19	0.00		
Grand Total			268,488.36	0.00c	0.00	197,023.84	13,511.44	210,535.28	57,953.08		
Less: Dispositions			6,000.00	0.00	0.00	2,263.89	0.00	2,736.12	3,263.88		
Net Grand Total			262,488.36	0.00c	0.00	194,759.95	13,511.44	207,799.16	54,689.20		

FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 1

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
DISPOSAL OF 96 FORD ASPIRE	12/14/01	12/19/05	PURCHASED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	1,500.	0.	1,500.	0.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
DISPOSAL OF 94 VOLVO	07/23/04	01/05/06	DONATED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	700.	2,500.	0.	1,181.	-619.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
DISPOSAL OF 91 DODGE CARAVAN	08/19/05	09/20/05	DONATED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	2,000.	0.	55.	-1,945.

TO FM 990, PART I, LN 8	700.	6,000.	0.	2,736.	-2,564.
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FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 2

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
2005 BANQUET	159,185.		159,185.	39,684.	119,501.
TO FM 990, PART I, LINE 9	159,185.		159,185.	39,684.	119,501.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 3

DESCRIPTION

AMOUNT

UNREALIZED GAIN ON INVESTMENTS

6,587.

TOTAL TO FORM 990, PART I, LINE 20

6,587.

FORM 990

OFFICER COMPENSATION ALLOCATION
PART II, LINE 25

STATEMENT 4

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
EDWARD GROSSMAN	67,875.			67,875.
A. PROGRAM SERVICES	27,150.			27,150.
B. MANAGEMENT AND GENERAL	20,363.			20,363.
C. FUNDRAISING	20,362.			20,362.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
MARTA BUKATA	66,875.			66,875.
A. PROGRAM SERVICES	46,813.			46,813.
B. MANAGEMENT AND GENERAL	6,688.			6,688.
C. FUNDRAISING	13,374.			13,374.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
CAROLINE SHOENBERGER	53,000.			53,000.
A. PROGRAM SERVICES	53,000.			53,000.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

TOTAL PROGRAM SERVICES				126,963.
TOTAL MANAGEMENT AND GENERAL				27,051.
TOTAL FUNDRAISING				33,736.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B				187,750.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 5
PART III

EXPLANATION

THE ORGANIZATION PROVIDES COMMUNITY BASED LEGAL SERVICES AND EDUCATION TO THE UNDER-SERVED AND DISADVANTAGED IN CHICAGO METROPOLITAN AREAS.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 6

<u>DESCRIPTION</u>	<u>GRANTS AND ALLOCATIONS</u>	<u>EXPENSES</u>
EDUCATIONAL SEMINARS		28,018.
PRO BONO LEGAL SERVICES		77,066.
CIRCUIT RIDER		18,326.
ADVICE DESK		3,295.
LASPD		108,675.
TOTAL TO FORM 990, PART III, LINE E235,380.		

FORM 990 OTHER INVESTMENTS STATEMENT 7

<u>DESCRIPTION</u>	<u>VALUATION METHOD</u>	<u>AMOUNT</u>
U.S. TREASURY STRIPS	MARKET VALUE	0.
MUTUAL FUNDS	MARKET VALUE	107,727.
CERTIFICATE OF DEPOSIT	MARKET VALUE	113,831.
CORPORATE STOCKS	MARKET VALUE	1,708.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		223,266.

FORM 990 OTHER ASSETS STATEMENT 8

<u>DESCRIPTION</u>	<u>AMOUNT</u>	
RESTRICTED CASH, CLIENT DEPOSITS	467,293.	
UNCONDITIONAL PROMISES TO GIVE, UNRESTRICTED	35,497.	
CLIENT FEES RECEIVABLE	25,095.	
OTHER RECEIVABLES	37,701.	
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B		565,586.

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	9
DESCRIPTION		AMOUNT	
DIRECT EXPENSES RELATED TO SPECIAL EVENT ON LINE 9B		39,684.	
TOTAL TO FORM 990, PART IV-A		39,684.	

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	10
DESCRIPTION		AMOUNT	
DIRECT EXPENSES RELATED TO SPECIAL EVENTS ON LINE 9B		39,684.	
TOTAL TO FORM 990, PART IV-B		39,684.	

FORM 990	PART V-A - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT	11
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MOST REV. THOMAS J. PAPROCKI 1400 S. AUSTIN BLVD. CICERO, IL 60804	PRESIDENT 2.00	0.	0.	0.
PATRICIA C. BOBB 833 W. JACKSON BLVD., SUITE 200 CHICAGO, IL 60607	VICE-PRESIDENT 1.00	0.	0.	0.
REV. MARK BRUMMEL, C.M.F. 205 W. MONROE ST. CHICAGO, IL 60606	DIRECTOR 1.00	0.	0.	0.
PAUL BENETURSKI 10635 S. EWING AVENUE CHICAGO, IL 60617	TREASURER 1.00	0.	0.	0.
MARK CHUDZINSKI 319 N. WISNER ST. PARK RIDGE, IL 60068	DIRECTOR 1.00	0.	0.	0.

CARRIE K. HUFF 71 S. WACKER DRIVE CHICAGO, IL 60606	SECRETARY 1.00	0.	0.	0.
FRANK M. CLARK P.O. BOX 805398 CHICAGO, IL 60680-4398	HONORARY BOARD MEMBER 0.00	0.	0.	0.
MOST REV. WILTON D. GREGORY 680 W. PEACHTREE ATLANTA, GA 30308	HONORARY BOARD MEMBER 0.00	0.	0.	0.
ANTHONY J. ZIAK 16300 S. HARLEM AVENUE TINLEY PARK, IL 60477	DIRECTOR 1.00	0.	0.	0.
JESSE RUIZ 191 N. WACKER DR, STE. 3700 CHICAGO, IL 60606	DIRECTOR 1.00	0.	0.	0.
EDWARD GROSSMAN 7422 CHOCTAW PALOS HTS, IL 60463	EXEC DIRECTOR 46.00	67,875.0.		0.
CASE HOOGENDOORN 122 S. MICHIGAN, SUITE 1220 CHICAGO, IL 60603	DIRECTOR 1.00	0.	0.	0.
KATHY POSNER 100 E. HURON, APT 3505 CHICAGO, IL 60611	DIRECTOR 2.00	0.	0.	0.
JAMES D. JACOBSON 55 W. MONROE ST, SUITE 3550 CHICAGO, IL 60603	DIRECTOR 1.00	0.	0.	0.
ROBYN ROSS 111 W. MONROE ST. CHICAGO, IL 60603	DIRECTOR 1.00	0.	0.	0.
ROBERT SLAUGHTER 500 W. MONROE ST., SUITE 2800 CHICAGO, IL 60661	DIRECTOR 1.00	0.	0.	0.
THOMAS J. GRYZBEK 5454 HOHMAN AVENUE HAMMOND, IN 46320	HONORARY BOARD MEMBER 0.00	0.	0.	0.
HON. JOY V. CUNNINGHAM 251 E. HURON ST., SUITE 3-710 CHICAGO, IL 60611	DIRECTOR 1.00	0.	0.	0.

MARTA C. BUKATA 1515 S. PRAIRIE, #1206 CHICAGO, IL 60605	DEPUTY DIRECTOR 46.00	66,875.0.	0.
CAROLINE SHOENBERGER 1724 N. LARRABEE ST. CHICAGO, IL 60614	SUPERVISORY ATTORNEY 43.00	53,000.0.	0.
DAVID L. LAPORTE 175 W. JACKSON BLVD, STE #1600 CHICAGO, IL 60604	DIRECTOR 1.00	0.	0.
DARRYL M. BRADFORD ONE FINANCIAL PLACE, 440 S. LASALLE ST., 33RD. FLOOR CHICAGO, IL 60605	DIRECTOR 1.00	0.	0.
TRACY A. O'FLAHERTY ONE BAXTER PARKWAY DEERFIELD, IL 60015	DIRECTOR 1.00	0.	0.
EDWARD JOHN VAN MERRIENBOER, O.P. 1909 S. ASHLAND AVENUE CHICAGO, IL 60608	DIRECTOR 1.00	0.	0.
ANTHONY J. AIELLO BANK ONE PLAZA, 10 S. DEARBORN STREET CHICAGO, IL 60603	DIRECTOR 1.00	0.	0.
GEORGE JACKSON III 161 N. CLARK STREET, SUITE 4800 CHICAGO, IL 60601	DIRECTOR 1.00	0.	0.
JOSEPH A. ORLANDO 1000 W. MONROE STREET CHICAGO, IL 60607	DIRECTOR 1.00	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		187,750.	0.

FORM 990 IDENTIFICATION OF RELATED ORGANIZATIONS STATEMENT 12
PART VI, LINE 80B

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
CLCET, INC.	X	
SERENEDEBT, LLC	X	

FORM 990

PART V-A OFFICER COMPENSATION FROM
RELATED ORGANIZATIONS

STATEMENT 13

OFFICER'S NAME	COMPENSATION	EMPLOYEE BENEFIT PLAN CONTRIBUTION	EXPENSE ACCOUNT
EDWARD GROSSMAN	6,000.		

NAME OF RELATED ORGANIZATION	EMPLOYER ID NUMBER
CLCET, INC.	36-4138514

RELATIONSHIP BETWEEN ORGANIZATIONS

TITLE HOLDING CORPORATION FOR THE CHICAGO LEGAL CLINIC

COMPENSATION DESCRIPTION

COMPENSATION FOR POSITION OF EXECUTIVE DIRECTOR OF THE RELATED ORGANIZATION.

OFFICER'S NAME	COMPENSATION	EMPLOYEE BENEFIT PLAN CONTRIBUTION	EXPENSE ACCOUNT
MARTA BUKATA	6,000.		

NAME OF RELATED ORGANIZATION	EMPLOYER ID NUMBER
CLCET, INC.	36-4138514

RELATIONSHIP BETWEEN ORGANIZATIONS

TITLE HOLDING CORPORATION FOR THE CHICAGO LEGAL CLINIC

COMPENSATION DESCRIPTION

COMPENSATION FOR POSITION OF BOARD SECRETARY OF THE RELATED ORGANIZATION.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO STATEMENT 14
 ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	PROVIDING LOW COST LEGAL SERVICES IS THE PURPOSE OF THE ORGANIZATION.
93B	PROVIDING LOW COST LEGAL SERVICES IS THE PURPOSE OF THE ORGANIZATION.
100	LOSS RECOGNIZED FROM DISPOSAL OF PROPERTY AND EQUIPMENT.
101	AGENCY HAS AN ANNUAL FUND RAISER TO RAISE FUNDS TO BE USED FOR THE PURPOSE OF PROVIDING LOW COST LEGAL SERVICES TO THE UNDERSERVED.
103A	MISCELLANEOUS REVENUES ARE USED FOR PROVIDING LOW COST LEGAL SERVICES.
103B	SUBLET INCOME IS DERIVED FROM SUBLETTING UNUSED LEASED SPACE TO REDUCE RENT COSTS AND THEREBY MAKING MORE FUNDS AVAILABLE FOR PROGRAM SERVICES.

SCHEDULE A OTHER INCOME STATEMENT 15

DESCRIPTION	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT
SPECIAL EVENTS AND OTHER	139,050.	114,446.	102,872.	115,763.
TOTAL TO SCHEDULE A, LINE 22	139,050.	114,446.	102,872.	115,763.

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)

Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print	Name of Exempt Organization CHICAGO LEGAL CLINIC, INC	Employer identification number 36-3200465
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. 2938 EAST 91ST STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHICAGO, IL 60617	

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 ▶ **EDWARD GROSSMAN, EXEC DIR**
Telephone No. ▶ **(773) 731-1762** 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.

- I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until **FEBRUARY 15, 2007** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 - ▶ calendar year _____ or
 - ▶ tax year beginning **JUL 1, 2005**, and ending **JUN 30, 2006**.
- 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 \$ _____
- b 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 \$ _____
- c **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 \$ **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.

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

Form 8868 (Rev. 12-2004)

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NOV 13 2006

Downers Grove, IL