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 07/01 , 2005, and ending 06/30/2006

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: PLAYING FOR PEACE

Number and street (or P O box if mail is not delivered to street address): 1455 PENNSYLVANIA AVENUE, NW — Room/suite: 640

City or town, state or country, and ZIP + 4: WASHINGTON, DC 20004

D Employer identification number: 52-2272092

E Telephone number: (202)639-6685

F Accounting method: [ ] Cash [X] 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 [X] No

H(b) If "Yes" enter number of affiliates ▶

H(c) Are all affiliates included? [ ] Yes [ ] No (If "No" attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

G Website: ▶ WWW.PLAYINGFORPEACE.ORG

J Organization type (check only one) ▶ [X] 501(c) (3) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

I Group Exemption Number ▶

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 ▶ 1,670,479.

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

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	1,585,444.		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c			
	d	Total (add lines 1a through 1c) (cash $ 1,585,444. noncash $)			1d	1,585,444.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	42,449.
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	86.
	5	Dividends and interest from securities			5	
	6 a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7	Other investment income (describe ▶)			7	
	8 a	Gross amount from sales of assets other than inventory — (A) Securities: ; (B) Other:	8a			
	b	Less cost or other basis and sales expenses — (A) Securities: ; (B) Other:	8b			
	c	Gain or (loss) (attach schedule) — (A) Securities: ; (B) Other:	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
	9	Special events and activities (attach schedule) If any amount is from gaming, check here ▶ [ ]				
	a	Gross revenue (not including $ of contributions reported on line 1a) STMT 1	9a			
	b	Less direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	42,500.
	10 a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
	11	Other revenue (from Part VII, line 103)			11	
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	1,670,479.
Expenses	13	Program services (from line 44, column (B))			13	1,163,056.
	14	Management and general (from line 44, column (C))			14	141,286.
	15	Fundraising (from line 44, column (D))			15	152,284.
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44, column (A))			17	1,456,626.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	213,853.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	477,363.
	20	Other changes in net assets or fund balances (attach explanation)			20	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	691,216.

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Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ ______ noncash $ ______) If this amount includes foreign grants, check here ▶ ☐	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				
26 Other salaries and wages	26	739,231.	556,093.	81,520.	101,618.
27 Pension plan contributions	27				
28 Other employee benefits	28	35,686.	24,865.	4,752.	6,069.
29 Payroll taxes	29	49,720.	27,523.	12,708.	9,489.
30 Professional fundraising fees	30				
31 Accounting fees	31	12,348.	9,824.	2,524.	
32 Legal fees	32	5,512.	5,512.		
33 Supplies	33	12,623.	10,507.	273.	1,843.
34 Telephone	34	26,815.	26,152.	663.	
35 Postage and shipping	35	3,918.	2,080.	674.	1,164.
36 Occupancy	36	74,811.	74,397.	350.	64.
37 Equipment rental and maintenance	37	4,167.	1,813.	2,354.	
38 Printing and publications	38	12,190.	6,283.	2,433.	3,474.
39 Travel	39	155,611.	145,227.	3,546.	6,838.
40 Conferences, conventions, and meetings	40	5,499.	4,554.		945.
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	10,494.	7,840.	2,258.	396.
43 Other expenses not covered above (itemize) a STMT 2	43a	308,001.	260,386.	27,231.	20,384.
b	43b				
c	43c				
d	43d				
e	43e				
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	1,456,626.	1,163,056.	141,286.	152,284.

Joint Costs. Check ▶ ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs $ ______, (ii) the amount allocated to Program services $ ______, (iii) the amount allocated to Management and general $ ______, and (iv) the amount allocated to Fundraising $ ______

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

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

What is the organization's primary exempt purpose? ▶SEE STATEMENT 3 All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts but optional for others)
a PLAYING FOR PEACE WORKS WITH A STAFF OF 80 SOUTH AFRICANS TO ADMINISTER LEAGUES, CLUBS, CLINICS AND TOURNAMENTS THAT USE BASKETBALL TO EDUCATE BLACK, WHITE AND INDIAN CHILDREN ANNUALLY ACROSS COMMUNITY LINES. (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	445,785.
b PLAYING FOR PEACE WORKS WITH THOUSANDS OF 10-14 YEAR OLD CATHOLIC AND PROTESTANT CHILDREN IN NORTHERN IRELAND ANNUALLY. THE CHILDREN LEARN ABOUT EACH OTHER THROUGH BASKETBALL, A NEUTRAL SPORT WITH NO RELIGIOUS OR CULTURAL AFFILIATION. (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	357,296.
c PLAYING FOR PEACE OPERATES PROGRAMS THAT BRING TOGETHER ISRAELI AND PALESTINIAN YOUTH TO PLAY BASKETBALL IN A SAFE, INCLUSIVE ENVIRONMENT. PLAYING FOR PEACE ALSO WORKS WITH PALESTINIAN MINISTRIES TO DEVELOP THE BASKETBALL INFRASTRUCTURE IN THE WEST BANK AND TO TRAIN YOUNG ADULTS TO BE COACHES AND MENTORS. (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	359,975.
d PLAYING FOR PEACE LAUNCHED A PROGRAM IN CYPRUS IN OCTOBER 2006 IN PARTNERSHIP WITH THE UNITED NATIONS DEVELOPMENT PROGRAMME THAT USES THE GAME OF BASKETBALL TO FACILITATE POSITIVE DIALOGUE AND INTERACTION BETWEEN TURKISH AND GREEK CYPRIOT YOUTH.PLAYING FOR PEACE WILL ADMINISTER ACTIVITIES THAT BRING 10-12 YEAR OLD TURKISH AND GREEK YOUTH TOGETHER. (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
e Other program services (attach schedule) (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services). . . . . . . ▶	1,163,056.

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			133,427.	46	56,204.
	47a	Accounts receivable	47a	NONE			
	b	Less: allowance for doubtful accounts	47b		5,520.	47c	NONE
	48a	Pledges receivable	48a	777,999.			
	b	Less: allowance for doubtful accounts	48b		351,439.	48c	777,999.
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a	Other notes and loans receivable (attach schedule)	51a				
	b	Less: allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges				53	
	54	Investments - securities (attach schedule) ▶ ☐ Cost ☐ FMV				54	
	55a	Investments - land, buildings, and equipment: basis	55a				
	b	Less: accumulated depreciation (attach schedule)	55b			55c	
	56	Investments - other (attach schedule)				56	
	57a	Land, buildings, and equipment: basis STMT 4	57a	23,864.			
	b	Less: accumulated depreciation (attach schedule)	57b	11,638.	18,297.	57c	12,226.
	58	Other assets (describe ▶)				58	
	59	**Total assets** (must equal line 74). Add lines 45 through 58			508,683.	59	846,429.
Liabilities	60	Accounts payable and accrued expenses			17,370.	60	83,571.
	61	Grants payable				61	
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule)				64b	
	65	Other liabilities (describe ▶ STMT 5)			13,950.	65	71,642.
	66	**Total liabilities.** Add lines 60 through 65			31,320.	66	155,213.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 67 through 69 and lines 73 and 74.**					
	67	Unrestricted			125,924.	67	-86,783.
	68	Temporarily restricted			351,439.	68	777,999.
	69	Permanently restricted				69	
		Organizations that do not follow SFAS 117, check here ▶ ☐ 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)			477,363.	73	691,216.
	74	**Total liabilities and net assets/fund balances.** Add lines 66 and 73			508,683.	74	846,429.

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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	1,681,879.
b	Amounts included on line **a** but not on Part I, line 12				
1	Net unrealized gains on investments	b1			
2	Donated services and use of facilities	b2	11,400.		
3	Recoveries of prior year grants	b3			
4	Other (specify)	b4			
	Add lines **b1** through **b4**			b	11,400.
c	Subtract line **b** from line **a**			c	1,670,479.
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	
e	**Total revenue** (Part I, line 12) Add lines **c** and **d** ▶			e	1,670,479.

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

a	Total expenses and losses per audited financial statements			a	1,468,026.
b	Amounts included on line **a** but not on Part I, line 17				
1	Donated services and use of facilities	b1	11,400.		
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify)	b4			
	Add lines **b1** through **b4**			b	11,400.
c	Subtract line **b** from line **a**			c	1,456,626.
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	
e	**Total expenses** (Part I, line 17) Add lines **c** and **d** ▶			e	1,456,626.

Part V **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 6		-0-	-0-	-0-

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

			Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 16			
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? **Note.** Related organizations include section 509(a)(3) supporting organizations	75c		X
	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
	-0-	-0-	-0-	-0-

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?	77		X
	If "Yes," attach a conformed copy of the changes			
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ and check whether it is ☐ exempt or ☐ nonexempt			
81a	Enter direct and indirect political expenditures (See line 81 instructions) 81a			
b	Did the organization file Form 1120-POL for this year?	81b		X

Part VI Other Information *(continued)*

					Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?			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	11,400.			
83a	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	
84a	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) orgs* 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) orgs* 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
89a	*501(c)(3) organizations* Enter Amount of tax imposed on the organization during the year under section 4911 ▶ N/A , section 4912 ▶ N/A , section 4955 ▶ N/A					
b	*501(c)(3) and 501(c)(4) orgs* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction			89b		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ N/A					
d	Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ N/A					
90a	List the states with which a copy of this return is filed ▶					
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions)			90b		

91a The books are in care of ▶ BRENDAN TOUHEY Telephone no ▶ 202-639-6685

Located at ▶ 1455 PENNSYLVANIA AVE, NW, #640,WASH,DC , ZIP + 4 ▶ 20004

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b	X	
	If "Yes," enter the name of the foreign country ▶ SOUTH AFRICA, NORTHERN IRELAND,ISRAEL			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22 1**, Report of Foreign Bank and Financial Accounts			
c	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c	X	
	If "Yes," enter the name of the foreign country ▶ SOUTH AFRICA, NORTHERN IRELAND,ISRAEL			

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

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

Note: *Enter gross amounts unless otherwise indicated.*	Unrelated business income (A) Business code	(B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue					
a PROGRAM & COACHING					42,449.
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	86.	
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					42,500.
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))				86.	84,949.

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 85,035.

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).
	STMT 9

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
	%			
	%			
	%			
	%			

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.

▶ Brendan Tuohey — Signature of officer — Date 2/15/07

▶ Brendan Tuohey Executive Director — Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ [signature] Date 2/15/07 Check if self-employed ▶ ☐ Preparer's SSN or PTIN (See Gen. Inst. W) P00151763

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ LIVELY, OSTRYE & WORCH, PC, 10405 MONTGOMERY AVENUE, KENSINGTON, MD 20895

EIN ▶ 52-2055204

Phone no. ▶ 301-949-2490

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: PLAYING FOR PEACE

Employer identification number: 52-2272092

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
SEE STATEMENT 10				
Total number of other employees paid over $50,000 . . ▶	NONE			

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 . . . . ▶	NONE	

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 . . . . ▶	NONE	

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)? STMT 11	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3a	Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)	3a		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
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a		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 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶ ______

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

12 ☐ An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** section 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)

JSA
5E1220 1 000

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)	934,061.	309,995.	202,002.	97,732.	1,543,790.
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	47,661.	36,496.			84,157.
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	118.	4.	13.	23.	158.
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	STMT 12 44,303.	25,000.			69,303.
23 Total of lines 15 through 22	1,026,143.	371,495.	202,015.	97,755.	1,697,408.
24 Line 23 minus line 17	978,482.	334,999.	202,015.	97,755.	1,613,251.
25 Enter 1% of line 23	10,261.	3,715.	2,020.	978.	

26 Organizations described on lines 10 or 11. a Enter 2% of amount in column (e), line 24 ▶ 26a 32,265.

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 439,819.

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ 26c 1,613,251.

d Add Amounts from column (e) for lines 18 158. 19 ____ 22 69,303. 26b 439,819. ▶ 26d 509,280.

e Public support (line 26c minus line 26d total) ▶ 26e 1,103,971.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 68.4314 %

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

NOT APPLICABLE

(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 11, 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

d Add Line 27a total ____ and line 27b total ____ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h %

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

Part V Private School Questionnaire (See page 7 of the instructions) **NOT APPLICABLE**
(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?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	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?	32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

Check ▶ a [ ] if the organization belongs to an affiliated group Check ▶ b [ ] if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table -			
If the amount on line 40 is - / **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	41		
Over \$1,500 000 but not over \$17 000 000 — \$225 000 plus 5% of the excess over \$1,500,000			
Over \$17 000 000 — \$1 000 000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

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

Part VI-B **Lobbying Activity by Nonelecting Public Charities** **NOT APPLICABLE**
(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	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**)			

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

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions.)

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

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

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

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers transactions and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	NET INCOME
FUNDRAISING EVENTS	42,500.
TOTALS	42,500.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
BANK CHARGES AND OTHER FEES	14,333.	3,425.	10,908.	
CAMPS & CLINICS	94,267.	94,267.		
CONSULTING	16,777.	11,340.	4,818.	619.
COURT CONSTRUCTION & RENTAL	18,607.	18,607.		
INSURANCE	44,751.	37,661.	7,090.	
MEALS	5,715.	4,927.	525.	263.
MISCELLANEOUS	9,837.	7,143.	2,694.	
PROMOTIONAL EVENTS	23,208.	4,010.	1,196.	18,002.
TOURNAMENTS	35,704.	35,704.		
TRAINING, ASSESSMENTS & RETREA	38,751.	37,251.		1,500.
UNIFORMS	6,051.	6,051.		
TOTALS	308,001.	260,386.	27,231.	20,384.

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

PLAYING FOR PEACE IS AN INNOVATIVE GLOBAL ORGANIZATION THAT USES THE GAME OF BASKETBALL TO BRIDGE SOCIAL DIVIDES AND DEVELOP LEADERS IN CONFLICT AND POST-CONFLICT REGIONS. ITS PROGRAMS BRING TOGETHER THOUSANDS OF 10-16 YEAR OLD CHILDREN FROM DIFFERENT RELIGIOUS, RACIAL AND CULTURAL BACKGROUNDS TO FORM POSITIVE RELATIONSHIPS, DEVELOP LEADERSHIP SKILLS AND IMPROVE THEIR FUTURES.

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

ASSET DESCRIPTION	METHOD/ CLASS	FIXED ASSET DETAIL BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	ACCUMULATED DEPRECIATION DETAIL BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE
COMPUTER EQUIPMENTC	SL	2,500.			2,500.	1,898.	602.		2,500.
COMPUTER EQUIPMENTC	SL	5,972.			5,972.	1,091.	1,990.		3,081.
DERRY CAR #1	SL	3,586.			3,586.	797.	1,195.		1,992.
SA RURAL CAR	SL	6,438.		6,438.		1,431.	2,146.	3,577.	
DUNGANNON CAR #2	SL	4,287.			4,287.	835.	1,429.		2,264.
DERRY CAR #2	SL	1,706.			1,706.	142.	569.		711.
NI CAR #5	SL		1,771.		1,771.		344.		344.
LAPTOP-Z LEVERENZ	SL		1,191.		1,191.		231.		231.
LAPTOP-A GREEN	SL		1,781.		1,781.		396.		396.
PC-SA #3	SL		535.		535.		59.		59.
PC-SA #4	SL		535.		535.		60.		60.
LAPTOP-S TUOHEY	SL		1,961.	1,961.			327.	327.	
SA CAR #2-HONDA	SL		5,064.	5,064.			985.	985.	
SA CAR #3-VW CITI	SL		1,447.	1,447.			161.	161.	
TOTALS		24,489.			23,864.	6,194.			11,638.

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION		ENDING BOOK VALUE
ACCRUED PAYROLL		22,642.
LINE OF CREDIT		49,000.
	TOTALS	71,642.

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
FRANK BRAMBLE MBNA 5724 ST. ALBANS WAY BALTIMORE, MD 21212	DIRECTOR			
JOHN FEINSTEIN 6 STANMORE COURT POTOMAC, MD 20854	DIRECTOR			
JOHN FOWLER 1 EDGEHILL ROAD BROOKLINE, MA 02445	DIRECTOR			
TOM HARDART 2234 DECATUR PLACE, NW WASHINGTON, DC 20008	DIRECTOR			
STEVE KERR PO BOX 1964 RANCHO SANTE FE, CA 92067	DIRECTOR			
GENE MASSEY ARENT FOX 1050 CONNECTICUT AVENUE, NW WASHINGTON, DC 20001	TREASURER			
ARN TELLEM 11911 SAN VINCENTE BLVD, #325 LOS ANGELES, CA 90049	DIRECTOR			
EVAN RYAN	SECRETARY			

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
1638 R STREET, NW, #401 WASHINGTON, DC 20009				
RON SHAPIRO 36 SOUTH CHARLES ST, 20TH FLOOR BALTIMORE, MD 21204	CHAIRMAN			
MARK TUOHEY 1655 KALMIA ROAD, NW WASHINGTON, DC 20012	DIRECTOR			
KATHLEEN SHEEKEY 1357 JUNIPER STREET, NW WASHINGTON, DC 20012	DIRECTOR			
WIN SHERIDAN APEX SYSTEMS,8270 WILLOW OAKS DR SUITE 650 FAIRFAX, VA 22031-4517	DIRECTOR			
DANIEL FERRY 5335 WISCONSIN AVE, NW, #850 WASHINGTON, DC 20015	DIRECTOR			
GREGORY SMITH 333 WEST CAMDEN ST BALTIMORE, MD 21201-2435	DIRECTOR			
SEAN MORAN 21 ROBIN ROAD RUMSOM, NJ 07760	DIRECTOR			

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
RC BUFORD 100 MONTANA ST, #320 SAN ANTONIO, TX 78203	DIRECTOR 1			
	GRAND TOTALS			

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
93	PLAYING FOR PEACE RECEIVES FUNDING FROM PROGRAM AND COACHING FEES THROUGH SCHOOLS AND CLUBS THAT IMPLEMENT THE ORGANIZATION'S PRIMARY MISSION.
101	THE SPECIAL EVENTS ARE FUNDRAISERS THAT RAISE AWARENESS OF THE ORGANIZATIONS'S ACTIVITIES, ACCOMPLISHMENTS AND MISSION.

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION
BRENDAN TUOHEY 1455 PENNSYLVANIA AVE,NW,#640 WASHINGTON, DC 20004	EXECUTIVE DIRECTOR 40	77,308.
THIBAULT MANEKIN 1455 PENNSYLVANIA AVE,NW,#640 WASHINGTON, DC 20004	DIRECTOR OPERATIONS 40	71,123.
SEAN TUOHEY 1455 PENNSYLVANIA AVE,NW,#640 WASHINGTON, DC 20004	FOUNDER & DIRECTOR 40	64,953.
TIM GUINAN 1455 PENNSYLVANIA AVE,NW,#640 WASHINGTON, DC 20004	DIRECTOR OF FINANCE 40	71,123.
ANDREW GORDON 1455 PENNSYLVANIA AVE,NW,#640 WASHINGTON, DC 20004	DIR, HUMAN RESOURCES 40	62,500.
	TOTAL COMPENSATION	347,007.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D
==

SEE PART I OF FORM 990, SCHEDULE A.

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2004	2003	2002	2001	TOTAL
FUNDRAISING EVENTS	44,303.	25,000.			69,303.
TOTALS	44,303.	25,000.			69,303.

2005

Description of Property

DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me-thod	Conv	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
COMPUTER EQUIPMENT	12/31/2002	2,500.	100.000			2,500.	1,898.	2,500.	SL		3.000				602.
COMPUTER EQUIPMENT	12/30/2004	5,972.	100.000			5,972.	1,091.	3,081.	SL		3.000				1,990.
DERRY CAR #1	10/01/2004	3,586.	100.000			3,586.	797.	1,992.	SL		3.000				1,195.
SA RURAL CAR	10/20/2004	6,438.	100.000			6,438.	1,431.		SL		3.000				2,146. *
DUNGANNON CAR #2	11/05/2004	4,287.	100.000			4,287.	835.	2,264.	SL		3.000				1,429.
DERRY CAR #2	03/31/2005	1,706.	100.000			1,706.	142.	711.	SL		3.000				569.
NI CAR #5	11/03/2005	1,771.	100.000			1,771.		344.	SL		3.000				344.
LAPTOP-Z LEVERENZ	11/09/2005	1,191.	100.000			1,191.		231.	SL		3.000				231.
LAPTOP-A GREEN	10/27/2005	1,781.	100.000			1,781.		396.	SL		3.000				396.
PC-SA #3	02/13/2006	535.	100.000			535.		59.	SL		3.000				59.
PC-SA #4	02/13/2006	535.	100.000			535.		60.	SL		3.000				60.
LAPTOP-S TUOHEY	08/03/2005	1,961.	100.000			1,961.			SL		3.000				327. *
SA CAR #2-HONDA	11/18/2005	5,064.	100.000			5,064.			SL		3.000				985. *
SA CAR #3-VW CITI	02/21/2006	1,447.	100.000			1,447.			SL		3.000				161. *
Less Retired Assets		14,910.				14,910.	1,431.								
Subtotals		23,864.				23,864.	4,763.	11,638.							10,494.
Listed Property															
Less Retired Assets															
Subtotals															
TOTALS		23,864.				23,864.	4,763.	11,638.							10,494.

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
TOTALS							

*Assets Retired

JSA
5X8024 1 000

FEDERAL FOOTNOTES
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PART V-A, LINE 75B
DIRECTOR, MARK TUOHEY, IS THE FATHER OF EXECUTIVE DIRECTOR, BRENDAN TUOHEY AND FOUNDER, SEAN TUOHEY.

CGWY

Form **8868**
(Rev. December 2004)
Department of the Treasury
Internal Revenue Service

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 . . . . ▶ [X]
- 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	Employer identification number
File by the due date for filing your return See instructions	PLAYING FOR PEACE	52-2272092
	Number, street, and room or suite no. If a P.O. box, see instructions. 1455 PENNSYLVANIA AVENUE, NW 640	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20004	

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

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T(sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ BRENDAN TOUHEY

Telephone No. ▶ 202 639-6685 FAX No. ▶

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

1 I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until 02/15 , 2007 . to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [ ] calendar year ______ or
▶ [X] tax year beginning 07/01 , 2005 , and ending 06/30 , 2006 .

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions . . . . $ 0

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 . . . . $ 0

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.

Form **8868** (Rev December 2004)
Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return

OMB No 1545-1709

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For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form **8868** (Rev 12-2004)