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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	ror the 2	OUS calendar year, or tax year beginning JUL	1, 2005	and en	aing JUN 30	<u>, 2006</u>	<u> </u>
В	Check if applicable	1. ,0000				D Employer	identification number
_	~ Addres	use IRS				05 1	720210
	ichange Name	D11111 O1					729319
<u> </u>	Name change lnitial return	See	ivered to street address)		Room/suite		
	<u> </u>	Specific 2111 PARK GROVE AVENUE Instruc-		· —	<u>l</u>		<u>)749-3031</u>
<u> </u>	Final return Amende	City or town, state or country, and ZIP + 4				F Accounting ma	
\ <u>-</u>	Ireturn Applica	LOS ANGELES, CA 90007 Section 501(c)(3) organizations and 4947(a)(1) no	nexempt charitable trus	ts T	Hond Low cot cool	(specify	
<u> </u>	pending	must attach a completed Schedule A (Form 990 or	-		• •		ates? Yes X No
. .	8/aka:4a.	NT / 7		- 1	H(a) Is this a group re		
	_	tion type (check only one) X 501(c) (3) (insert no)	4947(a)(1) or	<u>, </u>	H(b) If "Yes," enter nu H(c) Are all affiliates i		
	·				(If "No," attach a		N/AYesNo
		re if the organization's gross receipts are normally in the poor set file a return with the IRS; but if the organization is			H(d) Is this a separate ganization cover	e return filed l	by an or- p ruling? Yes X No
	•	tion need not file a return with the IRS; but if the organization (le a complete return. Some states require a complete return		' [©]	I Group Exemptio		
							ation is not required to attach
1 (Bross red	ceipts: Add lines 6b, 8b, 9b, and 10b to line 12	6,605,66	ایم	Sch. B (Form 99	_	•
		Revenue, Expenses, and Changes in Net					
	1	Contributions, gifts, grants, and similar amounts received:					
	a	Direct public support	į	<u> 1a</u>	287,8	<u>56.</u>	
	b	Indirect public support		1b	530,4	64.	
	C	Government contributions (grants)		1c	5,609,1	71.	
	d	Total (add lines 1a through 1c) (cash \$ 6,021	<u>,707</u> noncash \$		405,784.) <u>1d</u>	6,427,491.
	2	Program service revenue including government fees and con	ntracts (from Part VII, line	e 93)		2	71,827.
	3	Membership dues and assessments				3	
	4	Interest on savings and temporary cash investments				4	11,612.
	5	Dividends and interest from securities	3	1		5_	
	6 a	Gross rents SEE ST	ATEMENT 1	6a	<u>8,5</u>	<u>59.</u>	
	b	Less: rental expenses	Ĺ	<u>6b</u>			
	С	Net rental income or (loss) (subtract line 6b from line 6a)			-	<u>6c</u>	8,559.
ē	7	Other investment income (describe		-			
en	8 a	Gross amount from sales of assets other	(A) Securities		(B) Other		
Rev		than inventory	84,175.		2,0		
_	b	Less: cost or other basis and sales expenses	32,367.		28,4		
	i	Gain or (loss) (attach schedule)	<u>51,808.</u>	8c	-26,4		25 226
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	STMT 2		STMT	3 8d	<u>25,326.</u>
	9	Special events and activities (attach schedule). If any amoun		nere p			
	a	Gross revenue (not including \$	_ of contributions	0- 1			
		reported on line 1a)	Ì	9a oh			
2001	C	Less: direct expenses other than fundraising expenses Net income or (loss) from special events (subtract line 9b from the subtract line 9b).	l (cD anıl mo	<u>9b</u>		90	
7	10 a	Gross sales of inventory, less returns and allowances		10a	•		
		Less: cost of goods sold		106			
2	C	Gross profit or (loss) from sales of inventory (attach schedu	le) (subtract line 10b from	n ine	han Q	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, ar	d 11) SER	II D	2007	. 12	6,544,815.
$\overline{}$	13	Program services (from line 44, column (B))			200.	13_	5,043,054.
Ses	14	Management and general (from line 44, column (C))		V.C. V.		14	675,359.
Secuses Expenses	15	Fundraising (from line 44, column (D))	OGE			15	128,755.
巡	16	Payments to affiliates (attach schedule)			_ • • -	16	
1	17	Total expenses (add lines 16 and 44, column (A))				17	5,847,168.
֓֞֝֟֝֟֝֟ <u>֟</u>	18	Excess or (deficit) for the year (subtract line 17 from line 12			•	18	697,647.
Net Assets	19	Net assets or fund balances at beginning of year (from line 7	3, column (A))	•	•	. 19	866,394.
ZSY	20	Other changes in net assets or fund balances (attach explan	·	EE :	STATEMENT	4 20	20,235.
	21	Net assets or fund balances at end of year (combine lines 18	3, 19, and 20)			21	1,584,276.
5230 02-0:	01 3-06	LHA For Privacy Act and Paperwork Reduction Act Notice	e, see the separate instr	uctions	3 .		Form 990 (2005)

Pârt II Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) Functional Expenses and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (C) Management (B) Program Do not include amounts reported on line (D) Fundraising (A) Total and general 6b, 8b, 9b, 10b, or 16 of Part I. services 22 Grants and allocations (attach schedule) 0 • noncash \$ (cash \$ If this amount includes foreign grants, check here 23 Specific assistance to individuals (attach 23 schedule) Benefits paid to or for members (attach schedule) 24 213,332. 155,191. 58,141. Compensation of officers, directors, etc. * * 25 3,326,992. 3,575,406. 233,374. 15,040. 26 Other salaries and wages 27 Pension plan contributions 153,930. 41,930. 197,062. <u>1,202.</u> 28 28 Other employee benefits 358,878. 386,162. 21,559. <u>5,725.</u> 29 29 Payroll taxes 30 Professional fundraising fees 30 17,000. 17,000. 31 Accounting fees 32 Legal fees 328,131. 303,515. 24,596. 20. 33 65,014. 51,480. 13,534. 34 Telephone 34 16. 23,776. 96. 23,664. 35 35 Postage and shipping 133,334. 133,334. 36 36 Occupancy 37 Equipment rental and maintenance 41,026. 14,219. 26,807. 38 38 Printing and publications 39 39 Travel 23,898. 621. 44,131. 19,612. 40 40 Conferences, conventions, and meetings 70,491. 70,491. 41 Interest 46,453. 18,790. 65,243. 42 Depreciation, depletion, etc (attach schedule) 43 Other expenses not covered above (itemize): 43a 43b 43c 43d 43e 43f 591,717. 47,353. 47,990. 687,060. STATEMENT 43g Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 675,359. 5,043,054. 5,847,168. 128,755. 13-15)

** SEE STATEMENT 6

N/A

N/A

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

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

If "Yes," enter (i) the aggregate amount of these joint costs \$

(iii) the amount allocated to Management and general \$

Form **990** (2005)

Yes X No

N/A

N/A

; (ii) the amount allocated to Program services \$_

; and (iv) the amount allocated to Fundraising \$

Pàrt 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.

YOUTH DEVELOPMENT PROGRAMS FOR LOW INCOME AND/OR AT-RISK YOUTH 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) 4947(a)(1) trusts; organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) a SEE STATEMENT 7 (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ 266, 4 b SEE STATEMENT 8	but s.)
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ 266, 4	10.
	10.
	10.
	<u>10.</u>
h CEE CUATEMENT Q	
O DEE DIVIENTAL O	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ 4,776,6	ΛΛ
(Grants and allocations \$) If this amount includes foreign grants, check here ► 4,776,6 C	11.
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ L d	
(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)	<u>54.</u>

Form 990 (2005) WOODCRAFT RA		C	~ <u></u>	95-1729	<u>319</u>	P	age 6
Part V-A Current Officers, Directors, Tr	ustees, and Ke	y Employees (continu	ied)			Yes	No
75 a Enter the total number of officers, directors, and t	trustees permitted t	to vote on organization bu	siness at board				
· meetings			. 🕨	<u>0</u>			
b Are any officers, directors, trustees, or key employ	yees listed ın Form	990, Part V-A, or highest	compensated emp	loyees			
listed in Schedule A, Part I, or highest compensat	ted professional and	d other independent conti	ractors listed in Sci	nedule A,			
Part II-A or II-B, related to each other through fam	ily or business rela	tionships? If "Yes," attach	a statement that i	dentifies			
the individuals and explains the relationship(s)	•		••	}_	75b		X
c Do any officers, directors, trustees, or key employ	ees listed in Form	990, Part V-A, or highest o	ompensated empl	oyees			
listed in Schedule A, Part I, or highest compensat	ted professional and	d other independent conti	ractors listed in Sci	nedule A,			
Part II-A or II-B, receive compensation from any of	-	whether tax exempt or tax	kable, that are relat	ed to this			
organization through common supervision or com	nmon control?			-	75c		<u> X</u>
Note. Related organizations include section 509(a					}		
If "Yes," attach a statement that identifies the individuals,				ization(s), and	İ		
describes the compensation arrangements, including an		iuiviuuai by each relateu orga	inzation.		_		
Does the organization have a written conflict of in		v Employees That E	Pagaired Came		75d		<u> X</u>
Part V-B Former Officers, Directors, True Benefits (If any former officer, directors)							200
the year, list that person below and ente	•	•		•		•	•
				(D) Contributions t) Expe	
(A) Name and address	\\ TT3	(B) Loans and Advances	(C) Compensation	l Dians & deterred	ac	count	and
<u>NC</u>	ONE			compensation plan	s Otne	r allow	<u>ances</u>
			<u> </u>		+-		
				•			
			-		+-		
					1		
	<u> </u>				+-		
							
			<u></u> -		 		
			 	<u></u> .	+		
	<u> </u>				+-		
Part VI Other Information (See the instruction	ns.)	<u></u>	<u> </u>			Yes	No
76 Did the organization engage in any activity not pre		the IRS? If "Yes." attach	a detailed				
description of each activity					76		X
77 Were any changes made in the organizing or gove	ernina documents l	out not reported to the IRS	 S?	·	77		X
If "Yes," attach a conformed copy of the changes			 •	- •			
78 a Did the organization have unrelated business gros		0 or more during the vear	covered by this ret	urn?	78a		X
b If "Yes," has it filed a tax return on Form 990-T fo		, g your		N/A	78b		 _
79 Was there a liquidation, dissolution, termination, o		action during the year? If	"Yes." attach a sta	' · F	79		X
80 a Is the organization related (other than by associate				ſ		— †	
membership, governing bodies, trustees, officers,			_		80a		X
b If "Yes," enter the name of the organization	N/A			· ···			
, Since the name of the organization		and check whether it is	exempt or	nonexempt			
81 a Enter direct or indirect political expenditures. (See	line 81 instruction		81a				
b Did the organization file Form 1120-POL for this y		- ,			81b		X
523161/02-03-06						990 (2005)

523161/02-03-06

Form	1990 (2005) WOODCRAFT RANGERS, INC. 95-172	<u>9319</u>	Р	age 7
Pa	rt 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.)	<u>. </u>		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
þ	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? $\dots N/A$.	83b		
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
	tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? $$	85b	<u> </u>	
	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		4		
d	Section 162(e) lobbying and political expenditures	4		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	4		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	4		
_	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? \mathbb{N}/\mathbb{A}	85g	<u></u>	
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	<u> </u>	
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on			
	line 12	4		
b	Gross receipts, included on line 12, for public use of club facilities N/A	-	j	
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.)	\dashv		
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?			v
	If "Yes," complete Part IX	88	-	
89 a				
	section 4911 ▶			
D	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	89ь		x
•	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	030	<u> </u>	
C	sections 4912, 4955, and 4958			0 -
ų	Enter: Amount of tax on line 89c, above, reimbursed by the organization		_	0.
	List the states with which a copy of this return is filed > CA			
	Number of employees employed in the pay period that includes March 12, 2005	 _		303
	The books are in care of ► WOODCRAFT RANGERS Telephone no. ► (213)	74 9-	303	
J . u	Located at > 2111 PARK GROVE AVE., LOS ANGELES, CA ZIP+4 >			
h	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		Yes	No
	account)?	91b		X
	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.			
C	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c_		X
J	If "Yes," enter the name of the foreign country N/A			
92	Section 4947(a)(1) nonexempt chantable 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	N/	Α	
				(2005)

95-1729319

		<u> </u>	ed business income	 	led by section 512, 513, or 514	
undicated		(A) Business	(B) Amount	(C) Exclu-	(D) Amount	(E) Related or exempt
-	ram service revenue:	code		code		function income
a <u>CA</u>	MP PROGRAMS					<u>71,827.</u>
b					<u> </u>	
C			- · · · · · · · · · · · · · · · · · · ·			
d		<u> </u>				
e			<u> </u>			
f Medi	care/Medicaid payments	ļ				······································
g Fees	and contracts from government agencies	<u> </u>				
94 Mem	bership dues and assessments .		<u> </u>			
95 Intere	st on savings and temporary cash investments			14	11,612.	<u> </u>
96 Divid	ends and interest from securities		. <u> </u>			<u> </u>
97 Net r	ental income or (loss) from real estate:	<u> </u>				
a debt-	financed property					<u>.</u>
	ebt-financed property	1		16	8,559.	
	ental income or (loss) from personal property	- I				
99 Othe	r investment income					·- · · · · · · · · · · · · · · · · · ·
100 Gain	or (loss) from sales of assets					
other	than inventory					25,326.
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					_
103 Other			•			
а						
b						
С						
d						
е						
	otal (add columns (B), (D), and (E))			0.	_20,171.	97,153.
	(add line 104, columns (B), (D), and (E))					117,324.
	105 plus line 1d, Part I, should equal the am			<i>.</i>		
Part VI	II Relationship of Activities to the	e Accompli	shment of Exe	mpt Pur	poses (See the instruction	ons.)
Line No.	Explain how each activity for which income is rep					<u> </u>
▼	exempt purposes (other than by providing funds			•		
	SEE STATEMENT 11		· · · · · · · · · · · · · · · · · · ·	-		
				<u>-</u>		
			 			
Part IX	Information Regarding Taxable	Subsidiar	es and Disrega	arded En	tities (See the instruction	ns.)
	(A)		(C)		(D)	(E)
Name, ad	ddress, and EIN of corporation, Percentage o ership, or disregarded entity ownership inter		Nature of activities		Total income	End-of-year assets
partii	Cromp, or disregarded entity	%				
	N/A	%				
		%	<u> </u>			<u> </u>
		%				<u> </u>
Part X	Information Regarding Transfe		ted with Perso	nal Bene	efit Contracts (See the	instructions)
			_	•		Yes X No
	he organization, during the year, receive any funds					Yes X No
V - Y	the organization, during the year, pay premiums, dis		•	int Contract?		res
	"Yes" to (b), file Form 8870 and Form 4720 (s			s and statemer	nts, and to the best of my knowledge	ge and belief, it is true,
Please	Under penalties of perjury I declare that I have examined to correct, and complete Declaration of preparer (other than o	officer) is based on	all information of which pr	eparer has any		
Sign	Supporture of officer		Data 1101	TVOCAT	THI STARK CFC	<u> </u>
Here	Signature of officer	<u>-</u>	Date	T _	rint name and title. Check if	Preparer's SCNI & DTINI
Paid	Preparer's	2, \	. 1	Date FEB - 2	self-	Preparer's SSN or PTIN
	signature 44	Mu)			2007 employed ►	<u> </u>
Use Only	l Vours II		K, KLEIN &	cO.,	LLP EIN >	
	self-employed), 15400 SHERMAN	•				
523163 02-03-06	ZIP + 4 VAN NUYS, CA	<u>91406-</u>	4235		Phone no.	<u>818)988-4053</u>

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

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

Employer identification number

WOODCRAFT RANGERS, INC.		······································		95 1729	319
Part I Compensation of the Five Highest Paid Em		her Than	Officers, Direc	ctors, and T	rustees
(See page 1 of the instructions. List each one. If there are none,				12.5	_
(a) Name and address of each employee paid more than \$50,000	` per week	verage hours devoted to ition	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
PABLO GARCIA	STAFF I	DEV DIR			
C/O 2111 PARK GROVE AVE LA CA 90007	40.0	000	65,000.		
MARCELINO SANCHEZ	REGION	AL MGR			
C/O 2111 PARK GROVE AVE LA CA 90007	40.	0 (52,500.		
Total number of other employees paid over \$50,000	·	0			<u> </u>
Part II-A Compensation of the Five Highest Paid Inc. (See page 2 of the instructions. List each one (whether individual)	_			onal Servic	es
(a) Name and address of each independent contractor paid more t	than \$50,000		(b) Type of s	ervice	(c) Compensation
NONE					
Total number of others receiving over \$50,000 for professional services		^			
	lonondont (\\	o for Other S	- m.:	
Part II-B Compensation of the Five Highest Paid Inc. (List each contractor who performed services other than profess firms. If there are none, enter "None." See page 2 of the instruction	sional services, w			=1 VICES	
(a) Name and address of each independent contractor paid more t	than \$50,000		(b) Type of s	егуісе	(c) Compensation
NONE					
Total number of other contractors receiving over \$50,000 for other services		0			

Schedule A (Form 990 or 990-EZ) 2005 WOODCRAFT RANGERS, INC.	<u>95-172931</u>	<u>9</u> F	age 2
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	ng 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 ► \$ \$ (Mu	ist equal amounts on line 38, Part VI-A, or		
line i of Part VI-B.)	<u> 1 </u>		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A			
checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lob			
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts trustees, directors, officers, creators, key employees, or members of their families, or with any taxable	with any substantial contributors, organization with which any such		
person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the ansi	wer to any question is "Yes,"		
attach a detailed statement explaining the transactions.)	2a		Y
a Sale, exchange, or leasing of property?	<u>. </u>	-	
b Lending of money or other extension of credit?	2ь		X
c Furnishing of goods, services, or facilities?	<u>2c</u>		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<u>2d</u>		X
e Transfer of any part of its income or assets?	<u> 2e</u>		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation			37
you determine that recipients qualify to receive payments.)	3a		X V
b Do you have a section 403(b) annuity plan for your employees? - During the year, did the argenization secure a contribution of qualified real property interest under con-	3b strop 170(b)2		V
c During the year, did the organization receive a contribution of qualified real property interest under sec 4 a Did you maintain any separate account for participating donors where donors have the right to provide			
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	f the restrictions \	•	
Hait is neason for ison-rivate i oundation otatus (see pages s anough o of			
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.)			
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).	(A)/)		
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	novernmental unit. Section 170(b)(1)(A)(iv)		
An organization operated for the benefit of a college or university owned or operated by a generated (Also complete the Support Schedule in Part IV-A.)	joverninental unit. Section 170(0)(1)(M)(1V).		
An organization that normally receives a substantial part of its support from a government	al unit or from the general public.		
Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	ar arms or mother time governor publics		
11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Par	t IV-A.)		
12 X An organization that normally receives: (1) more than 33 1/3% of its support from contribu			
receipts from activities related to its charitable, etc., functions - subject to certain exception	· ·		
its support from gross investment income and unrelated business taxable income (less section 509(a)(2). (Also complete the Suppo			
An organization that is not controlled by any disqualified persons (other than foundation m		•	
(1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of s			
the type of supporting organization: Type 1 Provide the following information about the supported organizations. (S	See page 6 of the instructions.)		
Trovido tito tonoving information about tito oupported organication (=		ne num	ber
(a) Name(s) of supported organization(s)		rom abo	
An organization organized and operated to test for public safety. Section 509(a)(4). (See p	age 6 of the instructions.)		

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

NONE_

return. Do not include these grants in line 15.

523121 02-03-08

95-1729319

Schedule A (Form 990 or 990-EZ) 2005

Page 3

Schedule A (Form 990 or 990-EZ) 2005 WOODCRAFT RANGERS, INC.

1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

<u>Pa</u>	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/	A	
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
23	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	<u> </u>	
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:	00-		
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	<u> </u>	
	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	220		
د	admissions, programs, and scholarships?	32c 32d		
a	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.)	320		
	——————————————————————————————————————			
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		
þ	Admissions policies?	33b	ļ	
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d	 	
е	Educational policies?	33e		
f	Use of facilities?	33f		
•	Athletic programs?	33g	-	
ħ	Other extracurricular activities?	_33h	-	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
•	Describe averaginates receive any financial aid av accidence from a coveramental access O			
34 a		34a 34b		
D	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.	340		
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,			
. .	Pana nia ai Aninemian adi mit in uma adinhuan mini ma mhhuanna i adamanna ai adamana ma i ma aninambi inda ai man i man a man i ada	i	I .	1

35_

	eted ONLY by an eligible organiz						
Check a if the organ	<u>ization belongs to an affiliated g</u>	roup. Check	▶ b if	you che	cked "a" and "limited o	ontrol*	
	Limits on Lobbying Exerm 'expenditures' means amou				(a) Affiliated group totals		(b) To be completed for ALL electing organizations
(1116 (erni expenditures means amou	into para or incurred.)	<u></u>	Τ	N/A		
36 Total lobbying expenditures	to influence public opinion (gra	essents Johnving)		36	14/11		
, ,	to influence a legislative body (37		-	
38 Total lobbying expenditures				38			
39 Other exempt purpose expe				39	- ·		
• • • •	nditures (add lines 38 and 39)			40			
41 Lobbying nontaxable amou	•	ollowing table -	•				
If the amount on line 40 is		nontaxable amount is -				ŀ	
Not over \$500,000	20% of the amo		`				
Over \$500,000 but not over \$1,0	00,000 \$100,000 plus 1	5% of the excess over \$500,0	00			İ	
Over \$1,000,000 but not over \$1,	,500,000 \$175,000 plus 1	0% of the excess over \$1,000	,000	41			
Over \$1,500,000 but not over \$1	7,000,000 \$225,000 plus 5	% of the excess over \$1,500,0	000				
Over \$17,000,000	\$1,000,000		J				
42 Grassroots nontaxable amo		-		42			
43 Subtract line 42 from line 30	6. Enter -0- if line 42 is more tha	an line 36		43			
44 Subtract line 41 from line 38	B. Enter -0- if line 41 is more tha	an line 38		44			
			. 4700				
Caulion. Il there is an an	nount on either line 43 or line	, 44, you must me r om					-
Calendar year (or	(a)	Lobbying Exp (b)	enditures Durid (c)	ng 4-Ye	ar Averaging Period (d)		N/A (e)
fiscal year beginning in)	2005	2004	200	3	2002		Total
45 Lobbying nontaxable							
amount		<u>-</u>		_·	<u> </u>		0.
46 Lobbying ceiling amount							
(150% of line 45(e))							<u> </u>
47 Total lobbying							0.
expenditures							•
48 Grassroots nontaxable	1						0.
49 Grassroots ceiling amount		<u> </u>					
(150% of line 48(e))							0.
50 Grassroots lobbying							
expenditures			<u> </u>				0.
	Activity by Nonelect	_					/-
	only by organizations that did				1	T	N/A
During the year, did the organiza			n, including any	/ attemp	Yes Yes	No	Amount
influence public opinion on a leg	Jislative matter or referendum, t	nrough the use of:					<u> </u>
a Volunteers	Induda componention in evaca	cae rangetad on lines a thi	rough h \				
b Paid staff or management (include compensation in expen	ses reported on ames c an	ough II.)		-		
c Media advertisementsd Mailings to members, legis	lators or the nublic					 	
e Publications, or published of							
f Grants to other organization							
Direct contact with legislate		cials, or a legislative body					
•	minars, conventions, speeches,				•		
i Total lobbying expenditures		- -					0.
	also attach a statement giving	a detailed description of the	he lobbying act	vities.		_	<u> </u>
523141 02-03-08					Scl	edule /	A (Form 990 or 990-EZ) 2005

Schedule A (Form 990 or 990-EZ) 2005 WOODCRAFT RANGERS, INC.

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

95-1729319

Page 5

N/A

		WOODCRAFT RANGE			729319 Page 6
Part \		garding Transfers To and zations (See page 12 of the instr		d Relationships With Nonchari	table
- 51 Di		irectly or indirectly engage in any of		r organization described in section	
		section 501(c)(3) organizations) or in			
a Tr	ansfers from the reporting org	ganization to a noncharitable exempt	organization of:		Yes No
•	i) Cash				51a(i) X
_	i) Other assets her transactions;				a(ii) X
		ts with a noncharitable exempt orgai	חסולאנות		b(i) X
•	•	noncharitable exempt organization			b(ii) X
(iii	i) Rental of facilities, equipme	nt, or other assets			b(iii) X
•) Reimbursement arrangeme	nts			b(iv) X
•) Loans or loan guarantees	mambarahin ar fund-alama saliadat			b(vi) X
•		membership or fundraising solicitate mailing lists, other assets, or paid er			b(vi) X
			, ,	always show the fair market value of the	
	•	given by the reporting organization.	` '	-	
tra	insaction or sharing arrangem	ent, show in column (d) the value of	the goods, other assets, o	r services received:	N/A
(a) Line no. l	(b) Amount involved	(c) Name of noncharitable exe	empt organization	(d) Description of transfers, transactions, and	sharing arrangements
		Traine of nonditable ext			——————————————————————————————————————
			<u></u>	 	
				· · · · · · · · · · · · · · · · · · ·	
		··-			
			ne or more tax-exempt org	ganizations described in section 501(c) of the	· · · ·
	de (other than section 501(c) Yes," complete the following s				Yes X No
	(a))	(b)	(c)	
	Name of org	janization	Type of organization	Description of relations	hip
	<u> </u>			<u></u>	
	<u> </u>				
		· · · · · · · · · · · · · · · · · · ·	f		
	<u> </u>				
	<u> </u>		<u></u>	<u> </u>	
	<u> </u>				
		<u> </u>	 		
	<u> </u>		<u></u>	<u> </u>	
523 15 1 02-03-06			<u></u>	Cahadula A /Fa-	m 000 or 000-E71 0005
02-03-08				ochedule A (fol	rm 990 or 990-EZ) 2005

FORM 990	RENTAL INCOM	E		STATEMENT	1
KIND AND LOCATION OF PROPERTY			ACTIVITY NUMBER	GROSS RENTAL INCO)ME
STANLEY RANCH CAMP GROUNDS			1	8,55	59.
TOTAL TO FORM 990, PART I, LIN	VE 6A			8,55	<u>59.</u>
FORM 990 GAIN (LOSS) FE	ROM PUBLICLY T	RADED SECURI	TIES	STATEMENT	
		· · · · · · · · · · · · · · · · · · ·			
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAINOR (LOSS	
DESCRIPTION SEE STATEMENT \2 FOR DETAILS		OTHER BASIS	OF SALE	OR (LOSS	3)

FORM 990	GAIN (LOSS) FROM	SALE OF OT	HER ASSETS	S	TATEMENT 3
DESCRIPTION		DATI			THOD UIRED
SEE STATEMENT /3 FOR DETAILS	OR	VARIO	JS VARIOU	PUR	CHASED
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	2,000.	28,482.	0.	0	-26,482.
TO FM 990, PART I,	LN 8 2,000.	28,482.	0.	0	-26,482.
FORM 990 OTH	ER CHANGES IN NE	T ASSETS OR	FUND BALANC	ES S	TATEMENT 4
DESCRIPTION					AMOUNT
UNREALIZED GAIN ON I					3,735. 16,500.
TOTAL TO FORM 990,	PART I, LINE 20				20,235.
FORM 990	OT	HER EXPENSES	3	S	TATEMENT 5
DECOD T DETON	(A) TOTAL	(B) PROGRAI SERVICI			(D) FUNDRAISING
DESCRIPTION AUTO AND PARKING PROGRAM EVENTS FOOD INSURANCE	78,538 107,797 443,641 79,050	73, 65, 443,	105. 737. 541. 050.	5,072. 417. 0.	61. 41,643. 0.
LIVESTOCK FEED MEMBERSHIP DUES UTILITIES ADVERTISING REPAIRS &	659 5,840 21,328 23,578	13,	559. 548. 540. 188.	5,192. 7,688. 0,104.	6,286.
MAINTENANCE PROPERTY TAXES BANK CHARGES DONATED RENT RENT ADJUSTMENT -	34,927 1,206 6,439 -117,000		151. 791.	2,177. 1,055. 5,648.	0.0.
AMORTIZATION OF DEFERRED GAIN	0	•			

WOODCRAFT RANGERS, INC.				95-1729319
COMPUTER EXPENSES MISCELLANEOUS	437. 620.	437. 620.		
TOTAL TO FM 990, LN 43	687,060.	591,717.	47,353.	47,990.

FORM 990 OFFIC	CER COMPENSATION PART II, LIN			STATEMENT	6
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS	
CATHIE MOSTOVOY	122,692.			122,69	2.
A. PROGRAM SERVICES					
B. MANAGEMENT AND GENERAL	73,615.			73,61	.5.
C. FUNDRAISING	49,077.			49,07	7.
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE	TOTALS	
SANTHI STARK	90,640.			90,64	0.
A. PROGRAM SERVICES					
B. MANAGEMENT AND GENERAL	81,576.			81,57	6.
C. FUNDRAISING	9,064.			9,06	4.
TOTAL PROGRAM SERVICES					
TOTAL MANAGEMENT AND GENERA	7 L			155,19	1.
TOTAL FUNDRAISING				58,14	· 1 ·
TOTAL OFFICER, ETC., COMPEN	NSATION INCLUDE	D ON PARTS V	-A AND V-B	213,33	2.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

DESCRIPTION OF PROGRAM SERVICE ONE

CAMP PROGRAM: WOODCRAFT RANGERS PROVIDES RESIDENTIAL SUMMER CAMP PROGRAMS TO ELEMENTARY SCHOOL CHILDREN AT BLUE SKY MEADOW CAMP IN BIG BEAR, CA. THE PROGRAM IS DESIGNED TO PROVIDE OUTDOOR EXPERIENCES, RESPECT FOR NATURE AND ENHANCE

SOCIAL SKILLS. MIDDLE SCHOOL YOUTH ARE PROVIDED WITH A DAY CAMP PROGRAM AT SURF CAMPS IN THE LOS ANGELES AREA. TOTAL CHILDREN BENEFITED: 1,107

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		266,410.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 8

DESCRIPTION OF PROGRAM SERVICE TWO

AFTER-SCHOOL YOUTH DEVELOPMENT PROGRAMS: THE NVISION AFTERSCHOOL CLUB PROGRAM PROVIDES ACADEMIC, ENRICHMENT AND RECREATION PROGRAMS FOR CHILDREN AGES 6-18. PROGRAMS ARE OFFERED FIVE DAYS A WEEK UNTIL 6:00 P.M. ON SCHOOL CAMPUSES

AND IN COMMUNITY CENTERS. THE NVISION PROGRAM INCLUDES A HOMEWORK CLINIC, FITNESS PERIOD, HEALTHY SNACK AND SPECIAL INTEREST CLUBS. CLUBS OFFER A WIDE RANGE OF ACTIVITIES THAT BUILD SELF-CONFIDENCE, IMPROVE ACADEMIC PERFORMANCE, AND

STRENGTHEN LEADERSHIP ABILITIES. TOTAL CHILDREN BENEFITED: 12,498

TO FORM 990, PART III, LINE B	GRANTS	EXPENSES 4,776,644.
FORM 990 OTHER ASSETS		STATEMENT 9
DESCRIPTION		AMOUNT
DEPOSITS EMPLOYEE ADVANCES DUE TO OTHER FUNDS		30,647. 6,332. 3,619.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B		40,598.

FORM 990

10

STATEMENT

	AND KEY EMPLOYEES	•		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
CATHIE MOSTOVOY C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	CEO / BOARD SE 40.00	CRETARY 122,692.	0.	0.
ALEXANDER GOMEZ C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	PRESIDENT 0.00	0.	0.	0.
PETER ANDERSON C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	VICE PRESIDENT 0.00	0.	0.	0.
PHILLIP MCNATT C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	TREASURER 0.00	0.	0.	0.
TONY VAZQUEZ C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
LARRY CLARK C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	EMERITUS BOARD 0.00	MEMBER 0.	0.	0.
GIL CURTIS C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
FAYE DANGERFIELD C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
KIMBERLY WEST C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	VICE PRESIDENT 0.00	0.	0.	0.
BRAD PYE, JR. C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
JOHN DICECCO C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.

PART V-A - LIST OF OFFICERS, DIRECTORS,

WOODCRAFT RANGERS, INC.			95-1	729319
MADELINE GOODWIN C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	EMERITUS BOARD 0.00	MEMBER 0.	0.	0.
LESTER JONES C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
JOAN LING C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
ROBERT M. JOHNSON C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
PAMELA HUNTOON C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
CARMEN MANCINI C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
SANTHI STARK C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	DIRECTOR OF FII	NANCE 90,640.	0.	0.
PAUL THOMPSON III, CPA C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
MATTHEW DIGIROLAMO C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
KENNETH KORMAN C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
MARK SCHWARTZ C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990,	PART V-A	213,332.	0.	0.

	<u></u>					
FORM 990	PART VIII -	RELATIONSHIP OF	ACTIVITIES	TO	STATEMENT	11
•	ACCOMPL	ISHMENT OF EXEMPT	PURPOSES			

LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

- THE CAMP PROGRAM USES THE OUTDOORS TO PROMOTE THE DEVELOPMENT OF HIGH SELF-ESTEEM AND POSITIVE PERSONAL AND SOCIAL VALUES.
- THE AFTER SCHOOL PROGRAM ENHANCES SOCIAL, COGNITIVE, MOTOR AND FITNESS SKILLS, WHICH HELP PARTICIPANTS DISCOVER NEW INTERESTS AND GAIN SELF-ESTEEM THROUGH GENUINE ACCOMPLISHMENTS.

	Date of	# of shs	Cost	Sales Price	Realized Gain / (Loss)
Description	Sale				
			1	2	2 - 1
<u>Equities</u>					
Cardinal Health	1/9/2006	150	8,637	10,397	1,760
Cisco Sys Inc	9/21/2005	745	14,215	13,465	(750)
Pfizer Inc	9/21/2005	345	9,515	8,722	(793)
Total Equities			32,367	32,584	217
received as cash <u>Mutual Funds</u>					
Constellation Clover Small Cap Value I	12/29/2005		-	27,429	27,429
Vanguard Star	12/29/2005		-	366	366
Exeter Pro-Blend Term Series	12/16/2005		-	6,004	6,004
Northern Income Equity	12/20/2004		-	9,603	9,603
Perritt Microcap Opportunities	11/30/2005		-	8,189	8,189
Capital Gain Distributions				51,591	51,591
Total Gain on Securities			32,367	84,175	51,808

			•	June 30, 2006								
Asset Description	Method	ב ב	Date placed In service	Cost 6/30/2005	Additions	Defetions	Cost 6/30/2006	A/O @ 6/30/2005	Current year Depreciation	Deletions	A/D @9 6/30/2006	NBV
FURNITURE & FIXTURES - 1500-01												
	ē			224.4		224.4	C	777	Ç	_		
MING FLIRNITLIRE	ار در		VARIOUS	4 4 0		2,174 02	\circ	B :		483 23		
AIR CONDITIONERS	SL		01/07/99	8464			846 4	846			846	
FURNITURE	એ <u>વ</u>		10/1/1999	21 8 56 7			- 4 - 4	7 6				
FURNITURE-CHAIR	بر کار		12/31/2001	6426			6426	8			589	
FURNITURE-FILE CABINET	ત્ર જ		4/22/2002	393			000	00				
FURNITURE-LIBRARY, SKYALADEK FURNITURE-CHAIR	ત જ		10/18/2002	173 11			3 -					
CHAIR	JS (11/25/2002	86.			80 4	31				
FURNITURE-WRKSTAN WIDE 277 FURNITURE- 5 CHAIRS	አ የ		1/21/2003	5.7			5 4	O 1				
URNITUR			1/8/2004	57			5 7	5	17			
AITURE.	1		96	0 4			0 4	32				
XTURES	장		11/5/2004	5.0			5.0	ത				
FIXTURES (KEY ELECTRIC)	ار د		12/1/2004	2 6			20	es v	3 8			
S.LATERAL FILE	S.		7/12/2005	5	818		8184	0	83			
URE-V	S. St	5 00 5 00	7/12/2005		2,545 09 1,028 79		2,545 09 1,028 79	0 0 0	509 02 188 61		509 02 188 61	2,036 07 840 18
							9	000000	7 404 05	2 274 00	25 042 52	
RECREATION EQUIPMENT - 1500-02				45,971 64	6,392.34	7,408 15	44 955 83	33,003 30	CU 121,	3,371 08	2]	
						1	•	4	•	(
CE MACHINE	ನ ಶ		8/8/85 1/1/89	60 60		ന ന	00	က္ဝ	00		0 00 0	
TRAFFIC SIGNS	ન જ		6/6/91	855		855	0	855 0	O	855	000	
EXERCISE EQUIP	ನ ಸ		9/1/92 6/28/95	2 2		2 28	00	72 3 20 4	00	8 2	8 8 0 0	
BUNK BEDS	તું જ		07/15/94	974		974	0	974 2	0	974	00 0	
RAILING FOR WALL	ನ :		12/6/94	8 8		යු ද	00	200	0 0	පු ද	000	
TENTS	א א		7/21/95	200		38	0	50.0	9	3 2	800	
ALS	کر ج		06/30/97	757		757	0	757 7	0	757	000	
MATTRESSES	7 8		6/19/98	333 922		925	> Q	922 7	\circ	922	800	
ECONO MATS	당		06/03/99	17		17	0	17.5	0	17	000	
SAR TENTS	ત્ર જ		6/28/97	328 922		.328 922	0	,328 6 ,922 7	9 0	922	00 00 00	
TENTS	4 정		6/8/2000	986		086	0	086 4		980	000	
HORSE	징 3		3/27/2002	8 2		8 6	0 0	33 3 07 4	80 Q	91	000	
CLIMBING ROPE	ય જ <u>્</u>		4/12/2003	<u>\$</u>		<u>\$</u>	. 0	828	4	5	800	
MT GEAR SUPPLIES CORI LACHAPELLE	ನ ನ	5 00 5 00	10/15/2003 7/19/2004	5,148 74		5,148 74 115 13	0 0 0	1,802 06 23 03	600 67	2,402 73 36 47	0 0 0	0 0 0
G/L# 1500-02	RECREATION EQUIP (SR)			44,965 08	00 0	44,965 08	000	36,445 68	1,229 41	37,675 09	00 0	00 0
COMPUTER EQUIPMENT - 1500-03												
				,		74 004		,		64 425 04		
SERNT STANDARD STANDA	당 악 약 약 약	2 2 2 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	04/18/96 5/30/96 10/24/96 10/31/96	1 514 41 936 35 4 158 68 519 58			1,514 41 936 35 4,158 68 519 58	1,514 41 936 35 4,158 68 519 58	8888		1,514 41 936 35 4,158 68 519 58 1,941 26	8888
AK SO	당 당		· ;; -	10 60			83	85 0 40 3	0 4		404	
ARE DE	ઝ જ		3/30/2001 8/7/2001	.500 D			22,28	,250 0 ,762 5	20		2 2 2 2 3 8	0 ~
TER	장정		8/30	,040 5 836 6			.040 836	165 0 546 1	888		.973 685	~ ~
TER EQ	당		8/24/2001	~ C			71	96 1	2 3		0 6	– 60
Y ROLL SOFTWARE	기 (기)		1/1) O a			55.6	725	33.		~ 6	67
TER SO	정 등		4720	9000			900	585 0	8 2		765	33
ir Jere	당 장		8/1/ 8/28	,255 6 615 8			615	3592	23		, 482 282 283 283	8 8 9
R EQUIPMENTCOMPUTER R.PROJECTOR, LAP TOP	당 당 당		377	8			54 5	17 9 45 4	80 8		တော့	8 19
	St. St.		8/7/2003 9/9/2003	,112 B 647 3			,112 647 1	26 5 37 3			നധ	
	S		11/12	0			4	38 O	02		0	73

WOODCRAFT RANGERS
PROPERTY & DEPRECIATION
June 30, 2006

Method Method	£	Date placed	Cost			Cost	AD 69	Current year		AD @	Endina
		in service	6/30/2005	Additions	Deletions	8/30/2006	6/30/2005	Depreciation	Deletions	6/30/2006	NBV
COMPLITER SOFTWARECOMPLITER SOFTWARE	0	12/9/2003	44 7			844 70	67 4	68		4	38.2
COMPUTER EQUIPMENT - DELL	O	2/6/2004	730			1,47300	7 3			6	31 0
MAPUTER EQUIPMENT	0 (3/12/2004	65 7 53 7			365 78	97 5 4 6 7	2:		\ 0 0	5 C
COMPUTER SOFTWARECOMPUTER SOFTWARE)	0/8/2004	- Y			1 186 40	ני ה	- K		2 K	2. 2.
COMPUTER EQUIPMENT DELL	\circ	8/17/2004	346			73	24 4	4		6	35.2
COMPUTER EQUIPMENT DELL	0	9/14/2004	562			1,056 23	34	22		4	70!
SOMPUTER EQUIPMENT COMPUTER EQUIPMENT)	10/30/2004	2 2 2 3			4 039 90		48.		7 W	, c
SOMPUTER EQUIPMENT COMPUTER EQUIPMENT	O	1/5/2005	8			551	919			2759	2759
COMPUTER EQUIPMENT COMPUTER EQUIPMENT	O (1/5/2005	42 8 5 4			1,242 87	7 7	4 5		4 C	21 4 20 7
COMPUTER EQUIPMENT COMPUTER EQUIPMENT	9 0	3/11/2005				1,900 00) -	3 8		. 4	55.5
COMPUTER EQUIPMENT DELL	Q	25/2	83 5			583	97 2	2		17	917
COMPUTER EQUIPMENT DELL	0	18/2	ලි දි			099	90	8		4 (76.4 4 .
SOMPUTER EQUIPMENT DELL	5 C		- 0			1,900,00	95 O	3 8		S	25.0
SOMPUTER EQUIPMENT DELL	0	302	928			492	36	8		7.9	148
COMPUTER EQUIPMENT DELL	O	30/2	(C)			959 37	9 6	1 9		4	12 g
COMPUTER EQUIPMENT DELL	O (6/30/2005	φć	Ľ.		346 87	D C	t S		7 Y	2 1 G
ECHSOUP-EXCHANGE SERVERS WINDWSZUUS.P	J	14/2	, 0	513		513	9 0	8 8) 4 - 4	988
3ATEWAY COMPUTERS(3310S,7310S,3310S)	U	7/6/2005	0	48		2,548 77	O	49		9	90
DW-512MB PIN DDR, ACER, APC BACKUP, STAND	O (3/2/2006	0	871		871	0	96		80 0	74 6 28 4
DELL COMPUTERS & A SERVER FOR CITADEL & DELL COMPUTERS & A SERVER FOR CITADEL & CITADE	J	11/4/2005	90	957		957	Ç			2 6	3 4
DELL COMPUTER REF# 888803394	300	3/31/2006	00 0	1,015 81		1,015.81	000	112 87		112 87	902 94
COW-SONICWALL 12 170 UNRESTRUT NODE	,	4///2006	ا د	106		100	, I			, l	<u> </u>
G/L# 1500-03 COMPUTER EQUIP			133,049 15	18,158 08	62,438 15	88,769,08	99,941 53	19,514 61	61,125 01	58,331 13	30,437 95
10 10 10 10 10 10 10 10 10 10 10 10 10 1											
AMP OFFICE EQUIPMENT	0	VARIOUS	82 6		3,382 68		4	3	2,843 43	O,	O .
ISC OFFICE EQUIPMENT	0	VARIOUS	.053 4		.053		.08 .4	<u> </u>	,152 7	0 6	0 0
AFE (LA)) C	9/1/1999	3156			315	315	0		3156	0
WAY COMMUNICATION DEVICES	\circ	4/1/2000	619				61	0		619	0
ELLULAR COMM DEVICES	0	5/1/2000	0754			075	075	0		,075 4	O
ELLULAR COMM DEVICES	0	6/1/2000	857 9			857	857	0		857 9	O.
LE CABINETS	O	6/28/2000	8659			865	865	0,		8659	0
WAY COMMUNICATION DEVICES	?	2002/22/21	, a				8 2	- 40		129	9 00
ATTERIES & CHARGER	,	6/1/2002	8720			872	872	00		8720	00
OTOROLA WALKIE T5320 TALKIES	Q	6/8/2003	~				35	4		00 2	4
OTOROLA WALKIE 15320 TALKIES	0	10/4/2002	0				27	6 ,		742	0
FFICE FAX MACHINE	0 0	9/25/2002	079			079	20 g	\ \$ \times		305 079 079 2	000
ALKIES TALKIES EQUIPMENT	90	5/14/2003	10				4	. 0		350	O
FFICE EQUIPMENT C B E	0	5/13/2003	,8943			, 8 94	20	78.8		,1997	46
EXTAL PHONES	0	10/21/2003	2 3				20 2	468		28 8 50 5	05.4
EXIAL PHONES) C	12/19/2003	- (C			236) 4) P		22 1) 4) W
EXTAL PHONES	Ç	1/21/2004	4				S	67		417	17
EXTAL PHONES	Q	3/18/2004	6				8	25 9		60 4	69 1
OTOROLA WALKIE T5320 TALKIES	0	3/12/2004	3				0 4	2 0		0 4 0 4)
EXIAL PHONES	\circ	7/15/2004	ט נאנ				3 8	5 2		758	505
EXTAL PHONES	0	15/	2182			218	87	436		308	87.2
EXTAL PHONES	0	8/17/2004	9				~	48		755	650
EXTAL PHONES	0	9/21/2004	- C				20 8	4 4 0		65 0 4 0 6	5/ 7 42 4
EXTAL PHONES	90	10/30/2004	7 C7				0 0	00		1 (D	, ,
EXTERIA ONE	, 0	11/3/2004	1490			149	6	29 8		49 8	993
EXTEL - CELL PHONE	0	ਨ੍ਹੇ	32				2	926		87 7	75 5
TOOLS TO GO	5 0 0 0	1/31/2005	2,662 15 686 52			2,682 15 686 52	266 22 68 65	532 43		798 65 205 95	1,863 50 480 57
EXIEL - CELL PHONE	ט כ	220	ם ה				9	21.2		300	759
EXTEL - CELL PHONE	9	3/23/2005	4					96		28 1	523
EXTEL - CELL PHONE	0	6/30/2005	C)			690		4 2		200	400 i
EXTEL 1830(4),838(2),860,BELTCLIPS,PWR CHRG	O	7/13/2005		,011 2 8 1 1 2		<u> </u>		37 0 70 6		37 U 70 6	5412
NEXTEL 1850/760(2), 860(1), 760(1), TRVL CHRGERS,	, 0	8/10/2005		2136		213		763		763	37.2
(118)MOTOROLA WALKIE T5500aa TALKIES & BAT	U	11/18/2005		2,581 76				37		37	0 7
NEXTEL (275(2), TRVL CHRGERS(4)	O C	1/10/2006		2 / 60', 7 839 7		/60°		8 2 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		88 88	- 4 წ - 20 წ
SAL# 1500-04 FURNITURE & EQUIPMENT	,		96,364 52	55 4	45,436 14			5 0	44,996 18	9	57.7
				l							

			WOOD PROPER	CRAFT RANGE TY & DEPRECL	RS							•
Asset Description	Method	£ E	Date placed In service	Cost 6/30/2005	Additions De	eletions	Cost 6/30/2006	A/D @ 6/30/2005	Current year Depreciation	Deletions	A/D @ 6/30/2006	Ending
AUTOMOBILES - 1500-05												
CAMP AUTOMOBILES 02 FORD ECONOLINE 02 FORD ECONOLINE	ನ ನ	5 00 5 00 5 00	VARIOUS 5/21/2002 7/2/2002	40,038 72 33,262 87 30,427 87	4	10,038 72	0 00 33,262 87 30,427 87	38,118 72 21,066 48 18,256 72	560 00 6,652 57 6,085 57	38,678 72	0 00 27,719 05 24 342 29	0 00 5,543 82 6 085 58
G/L# 1500-05	AUTOMOBILES			103,729 46	4	40,038 72	63,690 74	77,441 92	13,298 15	38,678 72	52,061 35	11,629 39
BLDG IMPROVEMENTS - 1500-06												
CAMP BLDG IMPS	SL	20 00	VARIOUS	761	2	21,761 86	0	616	900 41	8,516 99	00 0	
BLDG IMP (GEN)	אר אר	20 00 5 00	7/82 3/15/87	16,880 00 4,350 92			16,880 00 4,350 92	16,880 00 4,350 92	8 0 0		16,880 00 4,350 92	000
BATHROOM IMP	දු	15 00	1/1/92	60 2			093	183	000		28,123 31	969
PARK GROVE IMP	고 고	15 00 15 00	5/01/92 8/26/92	540 540 540			5 33	462 462	823 36		54,157 51 498 00	o a
LIGHT FIXT (MAIN OF)	당 당	15 00	5/31/94	2,689 79			2,689 79	1,987 46	നാ		2,166 78	(C) C
WATER HEATER	ನ ಸ	20 00 20 00	11/09/95	3.830 00			3.830 00	545 US 1,723 51	191 50		1,915 01	5 4
FIRE PLACE IMPROVEMENT	당	200	7/21/97	35			750	8	37 50		337 50	412
BRICK WALL REPAIR	ನ <i>ಸ</i>	20 00 20 00 20 00	12/23/97	3,452 76 8,280 00			3,452 /6 8,280 00	3.312 00	414 00		3,726 00	554
ELECTRICAL REPAIRS 2111 PARK GROVE	ਤ ਤ	20 00	78/8/7	760			760	104	138 00		1,242 00	1,518 00
2111 PARK GROVE PLUMBING REPAIR	ನ ಸ	8 8 8 8	2/11/98 5/1/99	849 373			849 373	315 498	42 48 5.918 70		357 52 42,607 53	492 768
MOBILE HOME - GENERAL CONTRACTOR	당	200	7	8,525			8,525 00	2,557 50	428		2,983 75	5,541
KITCHEN FLOOR TILE	ನ ಸ	2 2 2 3	6/30/2004	8. 6 6 6 6 6			8 6	360 00 80 00 80 00	9 00 98 98		160 00	240
A1 House Painting	당	20 00	23/20	12,900 00			12,900 00	268 75	645 00		913 75 378 60	11,986 25
CARPETING PAINTING AI HOUSE	지 정 정	50 00 70 00 70 00	115/20	906			86	48 33	145 00		183 33	86
PAINTING A! HOUSE	ත් ග	20 00 20 00	3/22/2005 5/26/2005	500 290			290	8 33 2 42	25 00 14 50		33 33 16 92	466 67 273 08
TRENDWEST WOODWORKING AWNING	า เ	20 00	6/9/2005	2,550 00	C L		550	10 63	127 50		138 13	2,411 87
SINGLE CELL SHADE/BLINDS STD STYLE AWNING DESIGN,INSTALL&FAB SINGLE CELL SHADE/BLINDS-5LOCATIONS	S. S.	20 00 20 00 20 00	10/17/2005	8 8 8	2,350.00 1,511 28 820 00 -		2,550 00 1,511 28 820 00	8 8 8	56 67 27 33		56 67 27 33	1,454 61 792 67
3/1# 1500-06	BUILDING IMPROVEMENTS			307,054 78		21,761.86	290,174 20	156,392 73	16,112 37	8,516 99	164,178.31	125,995 89
County Aronal												
PARK GROVE AVENUE	JS	20 00		8,622 00			8,622 00	8,622 00	00 0		8,622 00	00 0
G/L# 1500-07	BUILDING			8,622 00	000	000	8,622 00	8,622 00	000	000	8,622 00	0 00
VIDEO EQUIPMENT VIDEO EQUIPMENT	ر ا ا	2 00	7/31/98	799 90			799 90	799 90	0 00		799 90	0 00
PROJECTOR	7		Z00Z/1Z/C									
FOOD SERVICE EQUIPMENT - 1500-11				1,086 73	00 0	00 0	1,086 73	981 56	57 37	00 0	1,038 93	47 80
KITCHEN EQUIP	ಸ ಸ		6/30/93	812		2 5				3,812 57		000
FREEZER	ያ ያ		1226			32.5		155		155		
OVEN IMPROVEMENTS (VALLEY GAS)	ನ ಸ		4/20/98	.498 850		8 6		850 850		498 850		
KEPURBISHED ICE MAREK EQUIPMENT	장		1/1/19			22		22 9		182 94		
CHAR-BROIL GRILL OF HEMENT -CAMP REFRIDGE	ನ ಸ		5/29/2003			4 4		တာ ထွ		151 21 75 73		
EQUIPMENT -CAMP REFRIDGE	전	5 00 5	1/8/20(/13/20	800 00		800 00 190 97	0 0 0	200 00 73 21	93 31 22 33	293 31 95 54	00 0	00 0 0
					00 0	12				11.614 72		
									•			
UNLOCATED DIFFERENCE				00 0	000	000	00 0	000	000	000	0 00	000
GRAND TOTAL				753,254 85 Disposals	39,287 11 2	34,459 59 34,459 59	558,082 37 #	504,915 35 CURRENT	65,242 79 YEAR DEPREC	205,977 79 ATION	364,371.25	193,711 12
				Accum Deprec Loss on Disposal	S	977 481		DEPRECIA	Ä	. 08564	242	
				Net Loss on Disp	leso	51 - #			<u>J</u>	11		

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

- ∕lfy	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	X
	ou are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this f	
	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed Form 8868.
Par	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 oti returi	her corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file incon is. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 10	ne tax 166, or 1041.
belov exten	ronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additiona sion, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on th hww.irs.gov/efile.	I (not automatic) 3-month
Type		Employer identification number
-	WOODCRAFT RANGERS, INC.	<u>95-1729319</u>
File by due dat filing yo return	$_{ m e}$ for $ $ Number, street, and room or suite no. If a P.O. box, see instructions. Further $ $ 2111 PARK GROVE AVENUE	
instruct		
Chec	k type of return to be filed (file a separate application for each return):	
	Form 990 Form 990-T (corporation) Form 47 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 60 Form 990-PF Form 1041-A Form 88	27 69
• Th	e books are in the care of WOODCRAFT RANGERS	
	ephone No. ► (213)749-3031 FAX No. ►	
• If t	he organization does not have an office or place of business in the United States, check this box	s is for the whole group, check this nembers the extension will cover.
	I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time untilFEBR1 to file the exempt organization return for the organization named above. The extension is for the organization's calendar year or	
	► X tax year beginning <u>JUL 1, 2005</u> , and ending <u>JUN 30, 2006</u>	
2	If this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
	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	\$
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with F coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	-TD \$ N/A
	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	· · · · · · · · · · · · · · · · · · ·
LHA	For Privacy Act and Paperwork Reduction Act Notice, see instructions.	Form 8868 (Rev. 12-2004)