**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 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Α	For	the	200	8 calendar year, or tax year beginning ၂	<u>UL 1,</u>	2006	and en	ding	JUN 30	, 21	007_		
В	Chec	k ıf	_	Please C Name of organization						D Emp	loyer iden	tification numb	er
				use IRS									
	lcr	ddre nang	e	print or BUSHY RUN BATTLEFIEL	D HER	ITAGE S	OCIE	TY		2	5-1 <u>43</u>	6160	
	c	ame nang		type   Number and street (or P.O. box if mail is n	ot delivered	l to street addres	s)		Room/suite	E Tele	phone nur	nber	
	ln re	itial iturn		Specific P.O. BOX 468						7:	<u> 24-83</u>	6-4300	
	_Jre	nal turn		Instruc- tions								X Cash	Accrual
	lre	turn			<u> 5636</u>						Other specify)		
	⊒Ą	pplic endi	ation ng	occion oc italia, or gameanone and ro is tall	1) nonexen	npt charitable tr	usts	H an	d I are not app	licable	to sectioi	n 527 organiza	tions
				must attach a completed Schedule A (Form 9	90 OI 990-E	:2).		H(a)	Is this a group r	eturn fo	r affiliates	? Yes	X No
G	Wet	sit	e · 🕨	-WWW.BUSHYRUNBATTLEFIELD				H(b)	If "Yes," enter no	ımber o	f affiliates	► N/A	
J	Orga	anız	atio	in type (check only one) $\triangleright$ $\times$ 501(c) (3)	t no }	4947(a)(1) or	527	H(c)	Are all affiliates		17 N/	'A Yes	☐ No
K	Che	ck ł	iere	If the organization is not a 509(a)(3) support	ting organi	ızatıon <b>and</b> its gr	oss	H(q)	(If "No," attach a Is this a separat		filed by a	n or-	
	rece	ipts	are	normally not more than \$25,000. A return is not requ	ired, but if	the organization			ganization cove	red by a	group rul	ing? Yes	X No
	cho	ose	s to	file a return, be sure to file a complete return.				1	Group Exemption	n Numb	oer ►	N/A	
								М	Check ► X				to attach
		$\overline{}$		pts. Add lines 6b, 8b, 9b, and 10b to line 12		60,8		<u> </u>	Sch. B (Form 99	90, 990-	EZ, or 990	)-PF)	
P	<u>art</u>	1	R	evenue, Expenses, and Changes in	Net Ass	sets or Fun	d Bala	nce	<u> </u>				
	1	1	С	ontributions, gifts, grants, and similar amounts receiv	ed								
	1	ä	ı C	ontributions to donor advised funds			1a	ļ					
		t	D	irect public support (not included on line 1a)			1b		3,0	24.			
		(	: Ir	ndirect public support (not included on line 1a)			1c				,		
		(	l G	overnment contributions (grants) (not included on lin	e 1a)		1d	<u> </u>			1		
		6	; T	otal (add lines 1a through 1d) (cash \$	3,02	4. noncash	\$			_)	1e		024.
		2	Program service revenue including government fees and contracts (from Part VII, line 93)						2		748.		
		3	M	fembership dues and assessments						Ĺ	3	2,	790.
a		4	Ir	nterest on savings and temporary cash investments						Ĺ	_4		898.
C	3	5	D	ividends and interest from securities				,		Į	5		432.
0	TANKEN NE	6 a	ı G	Pross rents			6a						
đ	\$	ŀ	L	ess; rental expenses			6b_	<u> </u>					
Š		(	: N	let rental income or (loss). Subtract line 6b from line 6	Sa					[	6c		
풀	7	7	0	other investment income (describe				,			7		
ě	⊉	8 8	ı G	ross amount from sales of assets other	(A)	Securities			(B) Other				
4	<u> </u>		th	nan inventory			8a						
٥		t	L	ess; cost or other basis and sales expenses	_		8b						
H		(	G	ain or (loss) (attach schedule)			8c						
7	≱	C	N	et gain or (loss). Combine line 8c, columns (A) and (l	3)						8d		
Š	≸.	9	S	pecial events and activities (attach schedule) If any a	mount is fro	om <b>gaming</b> , che	ck here 🖡	▶□					
	٦	ä	L Gr	oss revenue (not include the CEIVED o	contributions re	eported on line 1b)	9a						
	1	t	, L	ess: direct expenses other than fundralsing expenses			9ь						
		C	: N	let in @ ne or Klossi in masing na reens Subtract line	9b from lin	e 9a	1 1	3		1	9c		
	1	0 a	ı G	ross sales of inventory, less returns and allowances			10a						
		t		ess cost of goods sold			10b	<u> </u>					
		(	: G	ross profit	hedule). Sı	ubtract line 10b f	rom line	10a			10c		
	1	1	0	ther revenue (from Part VII, line 103)						Į	11		
	1	2	<u> </u>	otal revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10	Oc, and 11						12		<u>892.</u>
(A	1	3	Р	rogram services (from line 44, column (B))						ļ	13		<u>781.</u>
Expenses	1	4	M	Management and general (from line 44, column (C))						ļ	_14	6,	<u>424.</u>
pen	. 1	5	F	undraising (from line 44, column (D))						ļ	15		
Ě	1	6	Payments to affiliates (attach schedule)						Ļ	16			
	1	7		otal expenses Add lines 16 and 44, column (A)							17		205.
•	1	8		xcess or (deficit) for the year. Subtract line 17 from lii							18		<u>687.</u>
Net	1	9		et assets or fund balances at beginning of year (from	•	lumn (A))				ļ	19	<u> </u>	667.
2	2	0	Other changes in net assets or fund balances (attach explanation)						20		0.		
	2	11	<u> N</u>	et assets or fund balances at end of year. Combine lir	es 18, 19, a	and 20					21		<u>354.</u>
623	001 18-07	,	나	A For Privacy Act and Paperwork Reduction Act	Notice, see	the separate in	struction	s				Form 99	0 (2006)

2006.06010 BUSHY RUN BATTLEFIELD HERIT 20008\_\_1

Functional Expenses and (	4) organ	nizations and section 4947(a	a)(1) nonexempt charitable	trusts but optional for othe	rs.
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds	$\prod$				
(attach schedule)					
(cash \$ 0 • noncash \$ 0	<u>.</u>				
If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedule	;)				
(cash \$ 0 • noncash \$ 0	<u> </u>			ľ	
If this amount includes foreign grants, check here	22b	,,			
23 Specific assistance to individuals (attach					
schedule)	23				
24 Benefits paid to or for members (attach					
schedule)	24				
25a Compensation of current officers, directors, key					
employees, etc. listed in Part V-A	25a	0.	0.	0.	0
<b>b</b> Compensation of former officers, directors, key	]				
employees, etc. listed in Part V-B	25b	0.	0.	0.	0
c Compensation and other distributions, not included	1				
above, to disqualified persons (as defined under					
section 4958(f)(1)) and persons described in					
section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not					
included on lines 25a, b, and c	26				
27 Pension plan contributions not included on					
lines 25a, b, and c	27				
28 Employee benefits not included on lines					
25a · 27	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31	850.		850.	
32 Legal fees	32				
33 Supplies	33	1,120.	1,120.		
34 Telephone	34			<del></del>	
35 Postage and shipping	35	367.	367.		
36 Occupancy	36				
37 Equipment rental and maintenance	37				
38 Printing and publications	38				<u> </u>
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	1,919.		1,919.	
43 Other expenses not covered above (itemize)					
a	43a				
b	43b				
C	43c				
d	43d				
e	43e				
f	43f				
g SEE STATEMENT 1	43g	27,949.	24,294.	3,655.	<del></del>
44 Total functional expenses. Add lines 22a through					
43g. (Organizations completing columns (B)-(D),					
carry these totals to lines 13-15)	44	32,205.	25,781.	6,424.	0
Joint Costs. Check > I if you are following					
Are any joint costs from a combined educational campa					Yes X No
If "Yes," enter (i) the aggregate amount of these joint co	_		) the amount allocated to F		<u>N/A</u> ;
(iii) the amount allocated to Management and general \$		N/A ; and (iv	) the amount allocated to f	undraising \$	N/A
623011 01-23-07					Form <b>990</b> (2006)

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.

	at is the organization's prim	ary exempt purpose? ▶ORICAL PRESERVA	Δ.T.O.N.				Program Service
All d	organizations must describe	their exempt purpose achie ued, etc Discuss achieveme onexempt charitable trusts in	vements in a clea	neasurable (Section 50	1(c)(3) and (4)		Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	ARCHEOLOGICAL PRESERVATION	SITE DEVELOPM	ENT AND H	ISTORICAL HE	ERITAGE		
b	(Grants and allocations	\$	) If this amou	nt includes foreign grant	ts, check here	<b>&gt;</b>	25,781.
C	(Grants and allocations	\$	) If this amou	nt includes foreign grant	ts, check here		
d	(Grants and allocations	\$	) If this amou	nt includes foreign grant	ts, check here	<b>&gt;</b>	
e	(Grants and allocations Other program services (at	\$ tach schedule)	) If this amou	nt includes foreign grant	ts, check here	<b>&gt;</b>	
	(Grants and allocations	\$		nt includes foreign grant	ts, check here		25 701
<u> </u>	Total of Program Service	Expenses (should equal line	44, column (B), I	rogram services)			25,781.

Form **990** (2006)

Ра	rt IV	balance Sheets (See the instructions)				
Note		ere required, attached schedules and amounts wit uld be for end-of-year amounts only	hin the description column	(A) Beginning of year		(B) End of year
		Cook and interest horizon		70 240		72 060
	45	Cash - non-interest-bearing Savings and temporary cash investments		78,348. 15,000.		73,060. 35,762.
	46	Savings and temporary cash investments		15,000.	40	35,762.
	47 a	Accounts receivable	47a			-
	b	Less allowance for doubtful accounts	47b	1	47c	
	48 a	Pledges receivable	48a	_		
	b	Less. allowance for doubtful accounts	48b		48c	
	49	Grants receivable			49	
	50 a	Receivables from current and former officers, de	rectors, trustees, and			
		key employees		50a	<del></del>	
<b>,</b>	0	Receivables from other disqualified persons (as 4958(f)(1)) and persons described in section 49.			504	
Assets	51 2	Other notes and loans receivable	51a 51a		50b	<del>-</del>
As	Ь		51b		51c	
	52	Inventories for sale or use		3,000.		18,132.
	53	Prepaid expenses and deferred charges			53	
	54 a	Investments - publicly-traded securities	► Cost FMV		54a	
	Ь	Investments - other securities	Cost FMV		54b	
	55 a	Investments - land, buildings, and	1 1			
		equipment basis	55a			
	,					
	1	Less. accumulated depreciation	55b	_	55c	
	56	Investments - other	0.700	<del></del>	56	<del></del>
	1	Land, buildings, and equipment basis	57a 8,790 57b 5,390	5,319.		2 400
	1	Less accumulated depreciation STMT 3 Other assets, including program-related investments	57b 5,390	5,319.	57c	3,400.
	58	(describe >		58	0.	
	59	Total assets (must equal line 74) Add lines 45	through 58	101,667.	59	130,354.
	60	Accounts payable and accrued expenses			60	
	61	Grants payable			61	
	62	Deferred revenue			62	
bilities	63	Loans from officers, directors, trustees, and key	employees		63	
ijģ	1	a Tax-exempt bond liabilities			64a	<del></del>
Liat	t	Mortgages and other notes payable			64b	
	65	Other liabilities (describe		)	65	
		Total liabilities. Add lines 60 through 65		0.	66	0.
	Orga	anizations that follow SFAS 117, check here	and complete lines	-	00	
	Orge	67 through 69 and lines 73 and 74	and complete into			
es	67	Unrestricted			67	
auc	68	Temporarily restricted			68	
Ва	69	Permanently restricted			69	
Pun	Orga	anizations that do not follow SFAS 117, check	here 🕨 🗓 and			
Ē		complete lines 70 through 74				_
tso	70	Capital stock, trust principal, or current funds	0.	70	0.	
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, and	0.	71	0.	
χĄ	72	Retained earnings, endowment, accumulated in		101,667.	72	130,354.
ž	73	Total net assets or fund balances. Add lines 67 throu	-	101 667	_,	120 254
	74	(Column (A) must equal line 19 and column (B) must Total liabilities and net assets/fund balances	101,667. 101,667.	73	130,354. 130,354.	
	<u> </u>	. o.c	** SEE STA		1 / 4 1	Form <b>990</b> (2006)
						(2000)

623041 01-18-07

Form 990 (2006)

statement of each change  76  X  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  The interpolated is a tax return on Form 990-T for this year?  N/A  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement  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?  If "Yes," enter the name of the organization N/A  and check whether it is exempt or nonexempt  Enter direct or indirect political expenditures (See line 81 instructions)  Bit William And Check whether it is exempt or nonexempt  Did the organization file Form 1120-POL for this year?	_	n 990 (20	<u> </u>	HERITAGE SOC	EIETY	25-1436	160		age 6
Are any officers, directors, trustees, or key employees isted in Form 990. Part VA, or highest compensated employees isted in Schedule A, Part I, or highest compensated projects is and or Schedule A, Part I, or highest compensated projects is and or schedule A, Part II and a schedule A, Part II and a schedule A, Part II and II and a schedule A, Part II and II a								Yes	No
b Are any officers, directors, trustees, or key employees listed in Form 990, Part VA, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part I, or highest compensated professionals and other independent contractors listed in Schedule A, Part I And T, or highest compensated professionals and other independent contractors listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II And T, or highest compensated professional and other independent contractors listed in Schedule A, Part II And T, or highest compensated professional and other independent contractors listed in Schedule A, Part II And T, or highest compensation from 990, Part VA, or highest compensation of Schedule A, Part II And T, or highest compensation or other benefits different in the organization of the definition of "feliated organization", whether tax exempt or taxable, that are related to the organization than a statement that includes the information discharged in the instructions  4. Discharged that the professional part of the definition of the state organization and the professional part of the part of	75 a		•	to vote on organization bu	siness at board	•			
stated in Schedule A. Part I. or 'highest compensated professional and other independent contractors isted in Schedule A. Part II. or 'highest compensated professional and other independent contractors isted in Schedule A. Part I. or 'highest compensated professional and other independent contractors isted in Schedule A. Part I. or 'highest compensated professional and other independent contractors isted in Schedule A. Part I. or 'highest compensated professional and other independent contractors isted in Schedule A. Part II. or 'highest compensated professional and other independent contractors isted in Schedule A. Part II. or 'highest compensated professional and other independent contractors isted in Schedule A. Part II. or 'highest compensated professional and other independent contractors isted in Schedule A. Part II. or 'highest compensated professional and other independent contractors isted in Schedule A. Part II. or 'highest compensated professional and other independent contractors isted in Schedule A. Part II. or 'highest compensation or other independent and the part II. or 'highest compensation or other independent contractors is the independent contractors. In the part II. or 'highest compensation or other independent contractors in the part II. or 'highest compensation or other independent contractors in the part II. or 'highest compensation or other independent contractors in the part II. or 'highest compensation or other independent contractors in the part II. or 'highest compensation or other independent contractors in the part II. or 'highest compensation or other independent contractors in the part II. or 'highest compensation in the part III. or 'highest compensation i		`			►	·	ĺ		
Part II A or II-3, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationships? If a comparation of the property of the proper	t	Are any	officers, directors, trustees, or key employees listed in Form	990, Part V-A, or highest of	compensated emp	loyees			
the individuals and explains the relationship(s)  © Do any officers, directors, invaletes, or key employees listed in Form 990, Part VA, or highest compensated employees stated in Schedule A, Part I, or highest compensated professional and other independent contractors listed on Schedule A, Part I, or highest compensation from any other organizations, whether tax exempt or taxable, that are related to the organization of the individual of t		listed in	Schedule A, Part I, or highest compensated professional an	d other independent contr	actors listed in Sc	hedule A,			
c Do any officers, directors, trustees, or key employees listed in Form 390, 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 I. Nor highest compensated professional and other independent contractors listed in Schedule A, Part I. Nor highest compensated professional and other independent contractors listed in Schedule A, Part I. Nor highest compensation from the programs of the definition of "related organization" in "Yes," attach a statement that includes the information described in the instructions d. Does the organization have a written conflict of interest policy?  Part V.B. Pomer Officers, Directors, Trustees, and Key Employees That Received Compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (described below) during the year, list that person below and enter the amount of 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 color that the strength of the program of the p				tionships / if "Yes," attach	a statement that i	aentifies	756		v
Islated in Schedule A. Part I. or highest compensated professional and other independent contractors listed in Schedule A. Part II. or highest compensation from yother organizations, wither tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" or Cher organization have a written conflict of interest policy?    Part V-B  Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (if (if my 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			, , , ,				/ 30	+	^
Part IA-or II-B. receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of related organization? See the instructions for the definition of related organization?  If "Yes," attach a statement that includes the information described in the instructions?  Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits; (if any primer officer, detect), trustees, or key employee received compensation or other benefits of the paper of the year, list that person below and enter the amount of compensation or other benefits of the appropriate column See the instructions.  (B) Loans and Advances  (B)	C	Do any	officers, directors, trustees, or key employees listed in Form	990, Part V-A, or highest c	ompensated empl	oyees			
organization? See the instructions for the definition of "related organization" If "Yes," attach a statement of each change  Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other The Bromer Officers, Directors, Trustees, and Key Employees that Received Compensation or Other The Bromer Officers, Directors, Trustees, and Key Employees that Received Compensation or Other The Bromer Officers, Directors, Trustees, and Key Employees that Received Compensation or Other The Spendits (if any former orficer, director, frustees, and Key Employees that Received Compensation or other benefits (described below) during the year, lest that person below and enter the amount of compensation or other benefits in the appropriate compensation or other benefits with the propriate of the		Part II-A	A or II-B, receive compensation from any other organizations	whether tax exempt or tax	actors listed in Sci able, that are relat	nedule A, red to the			
If Yes," attach a statement that includes the information described in the instructions   Total   Total					abio, triat are relat	ed to the	75c		x
d. Does the organization have a written conflict of interest policy?  Part V-B   Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (if any former officers, director), fusitees, and 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 enter-tipudate of the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the enter-tipudate of the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the enter-tipudate of the year of the y		If "Yes,	attach a statement that includes the information described	in the instructions					
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 (Compensation (In Compensation (In Compensation) (In Comp		Does th	e organization have a written conflict of interest policy?				75d	1	x
the year, list that person below and enter the amount of compensation or other benefits in the appropriate column Set Ith is institutions.  (A) Name and address  NONE  (B) Loans and Advances  (C) Compensation (I) Combinations (C) Expanses account and enter-0-1  (In not paid, enter-0-1)  (In not paid, en	Pa	rt V-B	Former Officers, Directors, Trustees, and Ke	y Employees That R	leceived Com	pensation	or Ot	her	
(A) Name and address NONE  (B) Loans and Advances  (I) Compensation (I) Combinations (I) Combinations (I) (I) Indiginal remotors between a confirmed and other allowances  Part VI Other Information (See the instructions)  Ves No  15 Dot the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change statement of each change statement of each change statement of each change attachment of each change statement of each ch			Benefits (If any former officer, director, trustee, or key en	nployee received compens	sation or other ben	efits (describe	d belo	w) du	rıng
Part VI   Other Information (See the instructions)   Yes   No			the year, list that person below and enter the amount of co	mpensation or other benef					
Part VI   Other Information (See the instructions)   Yes   No      Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change				(B) Loans and Advances		`employee benefi	t a		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc			NONE		enter -0-)	compensation pla	ns Oth	er allow	/ances
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc							ı		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc					<u></u>		+-		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc							+		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc							+		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc							1		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc							T		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc							İ		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc		<b>-</b> -							
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc							—		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc					<del> </del>	<u> </u>	+		
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc									
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?  If "Yes," enter the name of the organization \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc	Pa	rt VI	Other Information (See the Instructions )	<u> </u>				Yes	No
statement of each change  76  X  Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  The interpolation is the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  The interpolation is the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  The interpolation is return on its polarity is polar	76			inducting activities? If "Yes	s." attach a detaile	d		1.55	
Were any changes made in the organizing or governing documents but not reported to the IRS?  If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If "Yes," has it filed a tax return on Form 990-T for this year?  N/A  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement  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?  If "Yes," enter the name of the organization  N/A  and check whether it is exempt or nonexempt  In the organization file Form 1120-POL for this year?  It is exempt or nonexempt  N/A  Bla 0.  Bla X					,		76		х
If "Yes," attach a conformed copy of the changes  78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  78 b If "Yes," has it filed a tax return on Form 990-T for this year?  78 b If "Yes," has it filed a tax return on Form 990-T for this year?  78 c N/A  78 c N/A  78 c N/A  78 c N/A  79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement  80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?  80 a If "Yes," enter the name of the organization N/A  and check whether it is exempt or nonexempt  81 a Enter direct or indirect political expenditures (See line 81 instructions)  81 b Did the organization file Form 1120-POL for this year?  81 b X	77		_	out not reported to the IRS	37				_
b If "Yes," has it filed a tax return on Form 990-T for this year?  N/A  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement  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?  If "Yes," enter the name of the organization  N/A  and check whether it is exempt or nonexempt  In the organization of the organi				•					
Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?    If "Yes," enter the name of the organization   N/A   and check whether it is exempt or nonexempt	78 a	Did the	organization have unrelated business gross income of \$1,00	0 or more during the year o	covered by this ret	urn?	78a	L	X
Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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?    If "Yes," enter the name of the organization   N/A   and check whether it is exempt or nonexempt	- · · · · · · · · · · · · · · · · · · ·								
membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?  b If "Yes," enter the name of the organization N/A  and check whether it is exempt or nonexempt  81 a Enter direct or indirect political expenditures (See line 81 instructions)  b Did the organization file Form 1120-POL for this year?  80a X  X	79	Was the	ere a liquidation, dissolution, termination, or substantial contr	action during the year? If "	Yes," attach a sta		79		X
b If "Yes," enter the name of the organization N/A  and check whether it is exempt or nonexempt  81 a Enter direct or indirect political expenditures (See line 81 instructions)  b Did the organization file Form 1120-POL for this year?  81b X	80 a	ls the o	rganization related (other than by association with a statewid	e or nationwide organizatio	on) through comm	on			
and check whether it is exempt or nonexempt  and check whether it is exempt or nonexempt  and check whether it is exempt or nonexempt  b Enter direct or indirect political expenditures (See line 81 instructions)  b Did the organization file Form 1120-POL for this year?		membe		exempt or nonexempt orga	anization?		80a		_X
81 a Enter direct or indirect political expenditures (See line 81 instructions)  b Did the organization file Form 1120-POL for this year?  81b X	b	If "Yes,	enter the name of the organization N/A						
b Did the organization file Form 1120-POL for this year?				•		_ •			
	81 a		·	s)	81a	0.			
	<u>b</u>	Did the	organization file Form 1120-POL for this year?	· · · · · · · · · · · · · · · · · · ·				990	

	rt VI Other Information (continued)  BUSHY RUN BATTLEFIELD HERITAGE SOCIETY 25-143	0100	Yes	age 7
			res	NO
02 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?			
b	If "Yes," you may indicate the value of these items here. Do not include this	82a		X
U	amount as revenue in Part I or as an expense in Part II			1
				İ
00 -	(See instructions in Part III )  82b N/A	╣		
_	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b 	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	L
84 a	,	84a	<del> </del> -	X
D	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	<u> </u>	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a		Į	l
	waiver for proxy tax owed for the prior year.			Ì
C	Dues, assessments, and similar amounts from members  85c N/A	4		
d	Section 162(e) lobbying and political expenditures  85d N/A			
е	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			
9	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  N/A	85g		
h	The second secon			
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the			
	following tax year? N/A	85h		
B6	501(c)(7) organizations Enter a Initiation fees and capital contributions included on			
	line 12 86a N/A			İ
þ	Gross receipts, included on line 12, for public use of club facilities  86b  N/A	_		}
87	501(c)(12) organizations Enter a Gross income from members or shareholders  87a N/A			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
88 a	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	88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of			1
	section 512(b)(13)? If "Yes," complete Part XI	- 88b		X
39 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under			
	section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4955 ▶ 0 .	1		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If "Yes," attach a statement explaining each transaction	89b		Х
C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		X
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		Х
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization,			
	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		х
90 a	List the states with which a copy of this return is filed ▶PA			
b	Number of employees employed in the pay period that includes March 12, 2006 90b			C
91 a	The books are in care of ► KELLY RUOFF Telephone no. ► 724-5	27-5	584	
	Located at ► P.O. BOX 468 HARRISON CITY PA ZIP+4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
-	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   N/A			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts			
				(2006)

Form 990 (2			LLPRE, T	ELD HERITAGE	SOC	<u> 25-</u>	1436160 Page 8
Part VI	Other Information (con	<del></del>					Yes No
-	time during the calendar year,	_			the Uni	ted States?	91c X
	s," enter the name of the foreig	-					
	n 4947(a)(1) nonexempt chanta	_			heck he	1 1	
	Analysis of Income-Pi					▶ 92	N/A
Part VII			<u>-</u>	ed business income	Evaluda	ed by section 512, 513, or 514	
	r gross amounts unless otherwi	se –	(A)	(B)	(C)		(E)
ındıcated.			Business	Amount	Exclu- sion	(D) Amount	Related or exempt
_	m service revenue.	<b> </b>	code	-	code	<del></del>	function income
	GRAM FEES					<del></del>	53,748.
					<del>                                     </del>		<del></del>
o							
e					<del>                                     </del>		
	ire/Medicaid payments			·			
-	nd contracts from government	agencies		<u> </u>		•	2 700
	ership dues and assessments				-		2,790.
	on savings and temporary cash inv		<del></del>		<del>                                     </del>		898.
	nds and interest from securities	<b>—</b>			<del>                                     </del>		432.
	ntal income or (loss) from real es	state -					
	nanced property ot-financed property	-			<del> </del>		
	ntal income or (loss) from perso	nal avanarty		<del></del> .		<del></del>	
	nvestment income	liai property		<del></del>	<del>                                     </del>		· · · · · · · · · · · · · · · · · · ·
	(loss) from sales of assets	-			-	<del></del>	
	nan inventory	1					
	ome or (loss) from special ever	,te					
	profit or (loss) from sales of inve				<del>                                     </del>	<u>-</u>	
103 Othern		-			<del>                                     </del>		
	- <del></del>			* · · · · · · · · · · · · · · · · · · ·			
					1		
<u> </u>						<del> </del>	
104 Subtoti	al (add columns (B), (D), and (E	<u>,, , , , , , , , , , , , , , , , , , ,</u>		0.		0.	57,868.
	add line 104, columns (B), (D), a			<u></u>			57,868.
	05 plus line 1e, Part I, should e		nt on line 1	2, Part I.		•	- 0,7000
Part VIII					t Purp	OSES (See the instruct	ions )
	Explain how each activity for which				<u>`</u>		
	exempt purposes (other than by pr	•		` '	•		<b>5</b>
	SEE STATEMENT	5		-			
						<u> </u>	
						-	
Part IX	Information Regarding	g Taxable S	ubsidiar	ies and Disregard	ed En	<b>tities</b> (See the instruction	ons)
Name add	(A) ress, and EIN of corporation,	(B) Percentage of		(C) Nature of activities		(D)	(E)
		wnership interest	<u>.</u>	ivature of activities		Total income	End-of-year assets
		%					
	N/A	%					
		%				· · · · · · · · · · · · · · · · · · ·	
		%					<u> </u>
Part X	Information Regarding	g Transfers	Associa	ted with Personal	Bene	fit Contracts (See th	e instructions )
(a) Did the	organization, during the year, rece	ive any funds, dir	ectly or indi	rectly, to pay premiums on	a persor	nal benefit contract?	Yes X No
(b) Did the	organization, during the year, pay	premiums, direct	ly or indirec	tly, on a personal benefit co	ontract?		Yes X No
Note: /f "Y	es" to (b), file Form 8870 and l	orm 4720 (see	instruction	is)		_	
							Form <b>990</b> (2006)

623163 01-18-07

Form **990** (2006)

### **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

2006

Name of the organization Employer identification number BUSHY RUN BATTLEFIELD HERITAGE SOCIETY 25 1436160 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 2 of the instructions. List each one. If there are none, enter "None.") (b) Title and average hours d) Contributions to employee benefit plans & deferred compensation (e) Expense account and other (a) Name and address of each employee paid per week devoted to (c) Compensation more than \$50,000 position allowances NONE Total number of other employees paid over \$50,000 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 Compensation of the Five Highest Paid Independent Contractors for Other Services Part II-B (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

623101/01-18-07 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2006

0

\$50,000 for other services

Total number of other contractors receiving over

S	chedule A (Form 990 or 990-EZ) 2006 BUSHY RUN BATTLEFIELD HERITAGE SOCIETY 25-14	<u> 3616</u>	0 F	Page 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 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.			l
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)?	2d		X
	e Transfer of any part of its income or assets?	2e		Х
3	a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how		1	
	the organization determines that recipients qualify to receive payments.)	3a		X
	b Dd the organization have a section 403(b) annuity plan for its employees?	3 b		X
	c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space,			
	the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f			
	and 4g	4a		Х
	b Did the organization make any taxable distributions under section 4966? N/A	4b		
	c Did the organization make a distribution to a donor, donor advisor, or related person? N/A	4c		
	d Enter the total number of donor advised funds owned at the end of the tax year		N/	A
	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		N/	
	f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on			
	line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0.

 ${f g}$  Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year

Schedule A (Form 990 or 990-EZ) 2006

0.

	(a)	(b)	(c)	(d)		(e)
	Name(s) of supported organization(s)	Employer identification number (EIN)	Type of organization (described in lines 5 through 12 above or IRC section)	organization listed in the supporting organization's governing documents?		Amount of support
				Yes	No	
<del></del>						
		-		-		
Total			·	· · · · · · · · · · · · · · · · · · ·	•	

An organization organized and operated to test for public safety. Section 509(a)(4) (See page 7 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2006

14

Sche	dule A (Form 990 or 990-EZ) 2006 B	<u>USHY RUN BAT</u>	TLEFIELD HE	RITAGE SOCI	ETY	25-14	36160	Page 4
Ра	rt IV-A   Support Schedule (C	omplete only if you chec worksheet in the instru	ked a box on line 10. 1	1, or 12.) Use cash m	ethod of acc	counting		
Cale	ndar year (or fiscal year nning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002		(e) Tota	
15	Gifts grants and contributions	(2) 2000	(5) 2504	(0) 2000	(0) 2002		(E) 101a	
	received. (Do not include unusual grants. See line 28.)	960.	20,017.	20,323.	4,6	511.	45,	911.
16	Membership fees received	4,400.	3,185.	1,255.	1,3	320.		160.
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	56,977.	41,245.	55 A26	F # 4	. 20	200	206
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	580.	1,011.	1,916.	<u>55,6</u>	369.		<ul><li>296.</li><li>876.</li></ul>
19	Net income from unrelated business activities not included in line 18							<u> </u>
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						<u></u>	
23	Total of lines 15 through 22	62,917.	65,458.	78,930.	61,9	38.	269,	243.
24	Line 23 minus line 17	5,940.	24,213.	23,494.	6,3	00.	59,	947.
25	Enter 1% of line 23	629.	655.	789.	6	19.		
26	Organizations described on lines 10		* **		<b>&gt;</b>	26a	1,	<u> 199.</u>
b	Prepare a list for your records to sho			•				
	unit or publicly supported organization	•	-	d the amount shown in line	e 26a.			
	Do not file this list with your return					26b		0.
	Total support for section 509(a)(1) to		•		<b>•</b>	26c	<u>59,</u>	<u>947.</u>
d	Add: Amounts from column (e) for li		3,876. 19 _		-		_	
	B.1.	22	26b	· · · · · · · · · · · · · · · · · · ·	- ▶	26d		<u>876.</u>
e	Public support (line 26c minus line 2	,			•	26e		071.
f	Public support percentage (line 26e			-1, - 1,	<b>&gt;</b>	26f		<u>343%</u>
27	Organizations described on line 12: records to show the name of, and tot such amounts for each year:							of
	(2005)	(2004)	(2003	3)	(200	)2)		
b	For any amount included in line 17 th	, ,	•	•	•	•	how the name	of.
	and amount received for each year, the described in lines 5 through 11b, as the larger amount described in (1) or (2005)	nat was more than the larg well as individuals.) <b>Do not</b>	er of (1) the amount on li file this list with your retu	ne 25 for the year or (2) \$ urn. After computing the c mounts) for each year:	5,000. (Includ	e in the list een the am	organizations	
С	Add Amounts from column (e) for lii	` '	•	16		1		
•			-	21		27c	N/	A
d	Add: Line 27a total		ine 27b total		_ `	27d	N/	
е	Public support (line 27c total minus I		-			27e	N/	
f	Total support for section 509(a)(2) to	st; Enter amount on line 23	, column (e)	27f N/	'A			
9	Public support percentage (line	e 27e (numerator) divid	ed by line 27f (denom	inator))	•	27g	N/	A %
h	Investment income percentage	/line 10 column (a) /nu	unamatar) dividad bu l	ina 074 /danaminatan	<b>.</b>	276	NT /	<b>λ</b> ο/.

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

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, 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.

823131 01-18-07 

NONE

Schedule A (Form 990 or 990-EZ) 2006

Private School Questionnaire (See page 9 of the instructions.)

N/A

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

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	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	<u> </u>	
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:			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	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)			
		_		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50,			
	1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Schedule A (Form 990 or 990-EZ) 2006

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)

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

N/A

Ch	eck 🕨 a 🔲 if the organization belon	gs to an affiliated group. Check <b>b</b> b		ıf you ch	ecked "a" and "limited contro	ol" provisions apply
		Lobbying Expenditures tures" means amounts paid or incurred.)			(a) Affiliated group totals	(b) To be completed for all electing organizations
36 37 38 39 40 41 42 43 44	Total lobbying expenditures to influence Total lobbying expenditures to influence Total lobbying expenditures (add lines 3 Other exempt purpose expenditures Total exempt purpose expenditures (add Lobbying nontaxable amount. Enter the If the amount on line 40 is - Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$17,000,000 Grassroots nontaxable amount (enter 25 Subtract line 42 from line 36. Enter -0-1	public opinion (grassroots lobbying) a legislative body (direct lobbying) 6 and 37)  I lines 38 and 39) amount from the following table -  The lobbying nontaxable amount is -  20% of the amount on line 40 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000  % of line 41) line 42 is more than line 36		36 37 38 39 40 41 42 43 44	N/A	
	Caution: If there is an amount on eit	her 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 13 of the instructions.)

		N/A			
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

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

(For reporting only by organizations that did not complete Part VI-A) (See page 13 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:

- a Volunteers
- b Paid staff or management (include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

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

Yes	No	Amount
	Х	
	X X X	
	X	
	Х	
	Х	
	X X X	
	Х	
		0.

623151

Schedule A (Form 990 or 990-EZ) 2006

Schedule	A (Form 990 or 990-EZ) 2006	BUSHY RUN BATTL	EFIELD HERIT	AGE SOCIETY 25-	1436160	) <u>F</u>	Page 7
Part \	/II Information Reg	garding Transfers To and	d Transactions and	Relationships With Noncha	ritable		
		zations (See page 13 of the instr					
		rectly or indirectly engage in any of		=			
	•	section 501(c)(3) organizations) or in		litical organizations?	[-	Yes	No
	ansiers from the reporting org i) Cash	ganization to a noncharitable exempt	organization of:		51a(i)	res	X
	i) Other assets				a(ii)		X
	her transactions:				()		
		ts with a noncharitable exempt organ	nization		b(i)	Ì	_X_
•	•	noncharitable exempt organization			b(ii)		X
•	; i) Rental of facilities, equipme				b(iii)		X
(iv	) Reimbursement arrangeme	nts			b(iv)		X
(v	) Loans or loan guarantees				b(v)		X
(vi	i) Performance of services or	membership or fundraising solicitati	ions		b(vi)		<u>X</u> _
		mailing lists, other assets, or paid er			C		<u>X</u>
				always show the fair market value of the			
		given by the reporting organization.			_		
		nent, show in column (d) the value of	the goods, other assets, or	T T T T T T T T T T T T T T T T T T T	1	1/A	
(a) Line no	(b) Amount involved	(c) Name of noncharitable exi	empt organization	(d) Description of transfers, transactions, a	nd sharing arra	nnem	ents
2	741100111111111111111111111111111111111	Traine of Honorial Rapid Ox		Description of transfero, transactions, a		ingen	
			<del></del>		•		
							<del></del>
·							
						<del></del>	
				504()	L _		
Cc	ode (other than section 501(c) Yes," complete the following s	(3)) or in section 527?	one of more tax-exempt org	anizations described in section 501(c) of t	Yes	X	] No
	(a) Name of org	) ganization	(b) Type of organization	(c) Description of relation	nship		· <b>-</b>
		<del></del>	<u> </u>				
		· · · · · · · · · · · · · · · · · · ·	<u> </u>				
					-		
			·				
						_	
		······································					
	·····						
823152 01-18-07				Schedule A (I	orm 990 or 99	90-EZ)	2006

Current Year Deduction	0	127.	1,792.	1,919.					<u></u>					
				•	 	 	 <del>.</del>	 <u> </u>		<del></del>				
Current Sec 179						 				_				
Accumulated Depreciation	288.	2,063.	1,120.	3,471.										
Basis For Depreciation	1,000.	2,190.	5,600.	8,790.								,		
Reduction In Basis				0							-		<u> </u>	
Bus % Excl				_			 		-					
Unadjusted Cost Or Basis	1,000.	2,190.	5,600.	8,790.										
No	17	17	17		 -					-				
Life	2.00	2.00	2.00	_		•			<del></del>					
Method	2000B	200DB	200DB		-					-				
Date Acquired	011599200DB	011502200DB	022806200DB							-				
Description	4EQUI PMENT	SPROJECTOR	c	TOTAL 330 FAGE 2 DEPR										
Asset	7'	٠,	•											
L					 	 	 	 						

(D) - Asset disposed

628102 07-28-06

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990	0	OTHER EXPENSES							
DESCRIPTION	(A) TOTAL		(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISI	NG			
<del></del>					-				
REPAIRS AND MAINTENENCE	1 5	2.		152.					
BATTLE REENACTMENTS	4,55		4,555						
TAXES		9.	4,555	779.					
TOURS	1,21		1,216						
INSURANCE		4.	2,210	404.					
ADVERTISING	2,41	6.	2,416						
BANK FEES	53	4.	·	534.					
WEBSITE MAINTENANCE		9.		919.					
MISCELLANEOUS	8,19		8,196						
UNREALIZED LOSS	1,48		1,484						
INTERN		0.	360.						
TRAINING		3.		343.					
GIFT SHOP FREIGHT		4.	4 245	524.					
SPECIAL EVENTS EXHIBIT	4,31 1,75		4,315						
T .	1,/5		1,752	• 					
TOTAL TO FM 990, LN 43	27,94	9.	24,294	3,655.					
I !									
FORM 990	ОТН	ER F	UNDS		STATEMENT	2			
1	· · · · · · · · · · · · · · · · · · ·								
).				(A)	(B)				
1				BEGINNING OF	END OF				
DESCRIPTION				YEAR	YEAR				
ENDOWMENT FUND			_	101,667.	130,3	54.			
TOTAL INCLUDED ON FORM	990, LINE 7	2	_	101,667.	130,3	54.			
<u>{</u>			=	<del></del>					
FORM 990 DEPRECIAT	TON OF ACCE	me M	OT HELD FOR	TMTECOMENO	STATEMENT	3			
FORM 990 BEFRECIAT	TON OF ABBE	110 10							
		C	OST OR	ACCUMULATED					
DESCRIPTION			ER BASIS	DEPRECIATION	BOOK VALU	Ē			
EQUIPMENT			1,000.	288.	7	12.			
PROJECTOR			2,190.	2,190.		0.			
CASH REGISTER			5,600.	2,912.	2,6	88.			
TOTAL TO FORM 990, PART	IV, LN 57		8,790.	5,390.	3,4	00.			
•			<del></del>	<del></del>					

FORM 990

STATEMENT

	EES AND KEY EMPLOYEE		STATI	EMENT 4
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JEAN LOUGHRY 2114 RIDGE RD. GREENSBURG PA 15601	PRESIDENT 8.00	0.	0.	0.
DONNA DETORE 248 HELEN DR. GREENSBURG PA 15601	V. PRESIDENT 8.00	0.	0.	0.
NORMA FRIEND 11448 JOSEPH ST. N HUNTINGDON PA 15642	SECRETARY 8.00	0.	0.	0.
KELLY RUOFF 225 OLD OAK LN JEANNETTE PA 15644	TREASURER 8.00	0.	0.	0.
LINDA ASSARD PO BOX 468 HARRISON CITY, PA 15636	DIRECTOR 8.00	0.	0.	0.
TIMOTHY DOWLING PO BOX 468 HARRISON CITY, PA 15636	DIRECTOR 8.00	0.	0.	0.
BEVERLY KING PO BOX 468 HARRISON CITY, PA 15636	DIRECTOR 8.00	0.	0.	0.
ROBERT LEARZAF PO BOX 468 HARRISON CITY, PA 15636	DIRECTOR 8.00	0.	0.	. 0.
JOSEPH MERENDA PO BOX 468 HARRISON CITY, PA 15636	DIRECTOR 8.00	0.	0.	0.
ANTHONY PEGNATO PO BOX 468 HARRISON CITY, PA 15636	DIRECTOR 8.00	0.	0.	0.
DACK SUICH PO BOX 468 HARRISON CITY, PA 15636	DIRECTOR 8.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990,	PART V-A	0.	0.	0.

PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS,

FORM	990 PART VIII - RELATIONSHIP OF ACTIVITIES TO STATEMENT ACCOMPLISHMENT OF EXEMPT PURPOSES	5
LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES	
93 94	THE VARIOUS PROGRAMS GENERATE REVENUE FOR THE HISTORICAL PRESERVATION OF THE BATTLEFIELD.	İ
94 95	MEMBERSHIP DUES ARE COLLECTED IN ORDER TO PRESERVE THE BATTLEFIELD.	
96 103	INTEREST ON PUBLIC SUPPORT PROVIDES NECESSARY FUND TO AID IN THE PRESERVATION OF THE BATTLEFIELD.	

ž

الما الما المالكالكالما المالم

Department of the Treasung Internal Revenue Service Name(s) shown on return

# **Depreciation and Amortization** (Including Information on Listed Property)

See separate instructions.

Attach to your tax return.

Business or activity to which this form relates

990

OMB No 1545-0172

Identifying number

BUSHY RUN BATTLEFIELD HERITAGE SOCIETY FORM 990 PAGE 2 25-1436160 Part 1 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount See the instructions for a higher limit for certain businesses 108,000. 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation 3 430,000. Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property 6 (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2007 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) 14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III | MACRS Depreciation (Do not include listed property ) (See instructions ) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2006 1,919. 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2006 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use (b) Month and (d) Recovery (a) Classification of property (f) Method vear placed (e) Convention (g) Depreciation deduction only - see instructions) 3-year property 19a b 5-year property c 7-year property d 10-year property 15-year property е 20-year property f q 25-year property 25 yrs S/L 27 5 yrs MM S/L h Residential rental property 27 5 yrs ММ S/I MM S/L 39 yrs i Nonresidential real property MM Section C - Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs S/I C 40-year 40 yrs S/L MM Part IV | Summary (see instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr 1,919. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs LHA For Paperwork Reduction Act Notice, see separate instructions. Form 4562 (2006)

616252/10-17-08

Form 4562 (2006)