

2006

Open to Public Inspection

Form 990-EZ

Short Form 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) Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.

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

Department of the Treasury Internal Revenue Service

A For the 2006 calendar year, or tax year beginning JANUARY 01, 2006, and ending DECEMBER 31, 20 2007

B Check if applicable:

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization Mathews Maritime Foundation
Number and street (or P.O. box, if mail is not delivered to street address) PO Box 1201
Room/suite
City or town, state or country, and ZIP + 4 Mathews, Virginia, 23109

D Employer identification number 54-1927067
E Telephone number (804) 725-4444
F Group Exemption Number

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: [X] Cash [ ] Accrual Other (specify)

I Website: www.mathewsmaritimemuseum.com

H Check [X] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

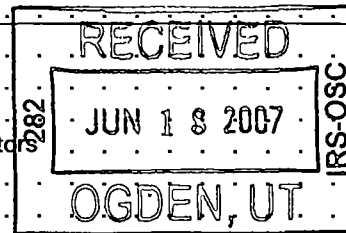
J Organization type (check only one) - [X] 501(c) ( 3 ) (insert no.) [ ] 4947(a)(1) or [ ] 527

K Check [X] if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 47 of the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, program service revenue, membership dues, investment income, gross amount from sale of assets, special events, gross revenue, net income, gross sales, other revenue, grants paid, salaries, professional fees, occupancy, printing, other expenses, excess or deficit, net assets at beginning/end of year.



Part II Balance Sheets - If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 51 of the instructions.)

Table with columns (A) Beginning of year and (B) End of year. Rows include Cash, savings, and investments; Land and buildings; Other assets (describe GIFT SHOP INVENTORY); Total assets; Total liabilities; Net assets or fund balances.

SCANNED JUL 2 3 2007

<b>Part III Statement of Program Service Accomplishments</b> (See page 51 of the instructions.)		<b>Expenses</b> (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)	
What is the organization's primary exempt purpose? <b>EDUCATION, RESEARCH, DOCUMENTATION</b>			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.			
<b>28</b>	<b>FAMILY BOATBUILDING EVENT- DEMONSTRATE/TEACH BOAT BUILDING SKILLS TO 35 TEENS AND ADULTS IN A TWO DAY CLASS WHERE PARTICIPANTS BUILD SIX BOATS.</b>		
	(Grants \$ <b>2,650.00</b> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>28a</b>	<b>2,794.00</b>
<b>29</b>	<b>MATHEWS MARITIME HERITAGE DAY CELEBRATION - EXHIBITORS DISPLAYED/DEMONSTRATED MARITIME RELATED CRAFTS AND MATHEWS MARITIME HISTORY - 750 PEOPLE ATTENDED</b>		
	(Grants \$ <b>2,675.00</b> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>29a</b>	<b>2,457.00</b>
<b>30</b>	.....		
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>30a</b>	
<b>31</b>	Other program services (attach schedule) .....		
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>31a</b>	
<b>32</b>	<b>Total program service expenses</b> (add lines 28a through 31a) .....	<b>32</b>	

<b>Part IV List of Officers, Directors, Trustees, and Key Employees</b> (List each one even if not compensated. See page 52 of the instructions.)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<b>A. JOSEPH ORTIZ OFFICER</b> 959 DIGGS WHARF RD. PORT HAYWOOD, VA		0	0	0
<b>KATHERINE HENDRICK OFFICER</b> 50 SCHOONER LANE, MATHEWS, VA 23109		0	0	0
<b>J. DOUGLAS WILTON</b> PO BOX 66, HALLIEFORD, VA 23068		0	0	0
<b>PETER R. HALL</b> 6971 SEAWELL AVE., GLOUCESTER, VA 23061		0	0	0

<b>Part V Other Information</b> (Note the statement requirement in General Instruction V.)			Yes	No
<b>33</b>	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity .....	<b>33</b>		X
<b>34</b>	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes .....	<b>34</b>		X
<b>35</b>	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
<b>a</b>	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements? .....	<b>35a</b>		
<b>b</b>	If "Yes," has it filed a tax return on Form 990-T for this year? .....	<b>35b</b>		
<b>36</b>	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.) .....	<b>36</b>		X
<b>37a</b>	Enter amount of political expenditures, direct or indirect, as described in the instructions. <b>37a</b> 0			
<b>b</b>	Did the organization file Form 1120-POL for this year? .....	<b>37b</b>		X
<b>38a</b>	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return? .....	<b>38a</b>		X
<b>b</b>	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved .....	<b>38b</b>		
<b>39</b>	501(c)(7) organizations. Enter:			
<b>a</b>	Initiation fees and capital contributions included on line 9 .....	<b>39a</b>		
<b>b</b>	Gross receipts, included on line 9, for public use of club facilities .....	<b>39b</b>		

**Part V Other Information** (Note the statement requirement in General Instruction V.) (Continued)

**40a** 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  
 section 4911 0 ; section 4912 0 ; section 4955 0

**b** 501(c)(3) and (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 an explanation . . .

**c** Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . .

**d** Enter amount of tax on line 40c reimbursed by the organization . . . . .

**e** All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? . . . . .

	Yes	No
<b>40b</b>		X
<b>40c</b>		
<b>40d</b>		
<b>40e</b>		X

**41** List the states with which a copy of this return is filed. VIRGINIA

**42a** The books are in care of PETER R. HALL Telephone no. ( 804 ) 725-4444  
 Located at 482 MAIN STREET, MATHEWS, VA ZIP + 4 23109

**b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .

If "Yes," enter the name of the foreign country: \_\_\_\_\_

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1**.

**c** At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .

If "Yes," enter the name of the foreign country: \_\_\_\_\_

	Yes	No
<b>42b</b>		X
<b>42c</b>		X

**43** Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here   
 and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . 43

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

**Please Sign Here**

Peter R. Hall Signature of officer Date June 12, 2007  
PETER R. HALL, TREASURER  
 Type or print name and title.

**Paid Preparer's Use Only**

Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check if self-employed  Preparer's SSN or PTIN (See Gen. Inst. X) \_\_\_\_\_  
 Firm's name (or yours if self-employed), address, and ZIP + 4 \_\_\_\_\_ EIN \_\_\_\_\_  
 Phone no. ( ) \_\_\_\_\_

Mathews Maritime Foundation EIN # 54-1927067

Form 990 EZ

Line 10. Grants...

Sponsored two Mathews County youth to a one week sailing camp aboard the Virginia Maritime Heritage Foundation's Schooner Virginia.

Line 16. Other Expenses...

Equipment rental	\$550.00
Licenses & Permitsez	213.00
Food & Beverage	312.00
Advertising	770.00
Registration Fees	47.00
Association Dues	<u>100.00</u>
Total	\$1992.00