**Form 990**

**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

**A For the 2005 calendar year, or tax year beginning** 10/1/2005 **and ending** 9/30/2006

<table>
<thead>
<tr>
<th>Check of applicable</th>
<th>Name of organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address change</td>
<td>Int'l Child Develop Rsch Center &amp; Good News Doctor Foundation</td>
<td>59-3473087</td>
</tr>
<tr>
<td>Name change</td>
<td>3800 West Eau Gallie Boulevard</td>
<td></td>
</tr>
<tr>
<td>Initial return</td>
<td>Room/suite (321) 259-7111</td>
<td></td>
</tr>
<tr>
<td>Final return</td>
<td>City or town Melbourne FL</td>
<td></td>
</tr>
<tr>
<td>Amended return</td>
<td>ZIP + 4 32934</td>
<td></td>
</tr>
<tr>
<td>Application pending</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**G Website. [www.icdrc.org]**

**J Organization type (check only one)**

- [ ] 501(c)(3)
- [ ] 4947(a)(1)
- [ ] 527

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

**L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Contributions, gifts, grants, and similar amounts received</td>
<td>218,565</td>
</tr>
<tr>
<td>2</td>
<td>Program service revenue including government fees and contracts (from Part VII, line 93)</td>
<td>113,097</td>
</tr>
<tr>
<td>3</td>
<td>Membership dues and assessments</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Interest on savings and temporary cash investments</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Dividends and interest from securities</td>
<td>5</td>
</tr>
<tr>
<td>6a</td>
<td>Gross rents</td>
<td>104,000</td>
</tr>
<tr>
<td>6b</td>
<td>Less: rental expenses</td>
<td>8,835</td>
</tr>
<tr>
<td>6c</td>
<td>Net rental income or (loss) (subtract line 6b from line 6a)</td>
<td>95,165</td>
</tr>
<tr>
<td>7</td>
<td>Other investment income (describe)</td>
<td>7</td>
</tr>
<tr>
<td>8a</td>
<td>Gross amount from sales of assets other than inventory</td>
<td>61,495</td>
</tr>
<tr>
<td>8b</td>
<td>Less: cost or other basis and sales expenses</td>
<td>37,160</td>
</tr>
<tr>
<td>8c</td>
<td>Gain or (loss) (attach schedule)</td>
<td>24,335</td>
</tr>
<tr>
<td>9</td>
<td>Gross revenue (not including $ of contributions reported on line 1a)</td>
<td>9a</td>
</tr>
<tr>
<td>9b</td>
<td>Less: direct expenses other than fundraising expenses</td>
<td>9b</td>
</tr>
<tr>
<td>9c</td>
<td>Net gain or (loss) (combine line 8c, columns (A) and (B))</td>
<td>24,335</td>
</tr>
<tr>
<td>10a</td>
<td>Gross sales of inventory, less returns and allowances</td>
<td>10a</td>
</tr>
<tr>
<td>10b</td>
<td>Less: cost of goods sold</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Other revenue (from Part VII, line 103)</td>
<td>11</td>
</tr>
<tr>
<td>12</td>
<td>Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)</td>
<td>1,147,918</td>
</tr>
<tr>
<td>13</td>
<td>Program services (from line 44, column (B))</td>
<td>609,470</td>
</tr>
<tr>
<td>14</td>
<td>Management and general (from line 44, column (C))</td>
<td>74,379</td>
</tr>
<tr>
<td>15</td>
<td>Fundraising (from line 44, column (D))</td>
<td>15</td>
</tr>
<tr>
<td>16</td>
<td>Payments to affiliates (attach schedule)</td>
<td>16</td>
</tr>
<tr>
<td>17</td>
<td>Total expenses (add lines 16 and 44, column (A))</td>
<td>683,849</td>
</tr>
<tr>
<td>18</td>
<td>Excess or (deficit) for the year (subtract line 17 from line 12)</td>
<td>465,409</td>
</tr>
<tr>
<td>19</td>
<td>Net assets or fund balances at beginning of year (from line 73, column (A))</td>
<td>34,841</td>
</tr>
<tr>
<td>20</td>
<td>Other changes in net assets or fund balances (attach explanation)</td>
<td>20</td>
</tr>
<tr>
<td>21</td>
<td>Net assets or fund balances at end of year (combine lines 18, 19, and 20)</td>
<td>498,910</td>
</tr>
</tbody>
</table>

**For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.**
### Part II Statement of Functional Expenses

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

<table>
<thead>
<tr>
<th>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I</th>
<th>(A) Total</th>
<th>(B) Program services</th>
<th>(C) Management and general</th>
<th>(D) Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>22 Grants and allocations (attach schedule)</td>
<td>22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(cash $ noncash $)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If this amount includes foreign grants, check here □</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Specific assistance to individuals (attach schedule)</td>
<td>23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Benefits paid to or for members (attach schedule)</td>
<td>24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Compensation of officers, directors, etc</td>
<td>25</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26 Other salaries and wages</td>
<td>26</td>
<td>14,573</td>
<td>14,573</td>
<td></td>
</tr>
<tr>
<td>27 Pension plan contributions</td>
<td>27</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28 Other employee benefits</td>
<td>28</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29 Payroll taxes</td>
<td>29</td>
<td>8,910</td>
<td>8,910</td>
<td></td>
</tr>
<tr>
<td>30 Professional fundraising fees</td>
<td>30</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Accounting fees</td>
<td>31</td>
<td>1,300</td>
<td>1,300</td>
<td></td>
</tr>
<tr>
<td>32 Legal fees</td>
<td>32</td>
<td>5,000</td>
<td>5,000</td>
<td></td>
</tr>
<tr>
<td>33 Supplies</td>
<td>33</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>34 Telephone</td>
<td>34</td>
<td>1,888</td>
<td>1,888</td>
<td></td>
</tr>
<tr>
<td>35 Postage and shipping</td>
<td>35</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>36 Occupancy</td>
<td>36</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>37 Equipment rental and maintenance</td>
<td>37</td>
<td>550</td>
<td>550</td>
<td></td>
</tr>
<tr>
<td>38 Printing and publications</td>
<td>38</td>
<td>3,464</td>
<td>3,464</td>
<td></td>
</tr>
<tr>
<td>39 Travel</td>
<td>39</td>
<td>6,389</td>
<td>6,389</td>
<td></td>
</tr>
<tr>
<td>40 Conferences, conventions, and meetings</td>
<td>40</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>41 Interest</td>
<td>41</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>42 Depreciation, depletion, etc (attach schedule)</td>
<td>42</td>
<td>124,877</td>
<td>121,042</td>
<td>3,835</td>
</tr>
<tr>
<td>43 Other expenses not covered above (itemize)</td>
<td>43</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a See attached statement</td>
<td>43a</td>
<td>516,898</td>
<td>488,428</td>
<td>28,470</td>
</tr>
<tr>
<td>b</td>
<td>43b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>43c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>43d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>43e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>43f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>43g</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>44 Total functional expenses. Add lines 22 through 43</td>
<td>44</td>
<td>683,849</td>
<td>609,470</td>
<td>74,379</td>
</tr>
</tbody>
</table>

### Joint Costs

Check □ if you are following SOP 98-2

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

If "Yes," enter (i) the aggregate amount of these joint costs $ , (ii) the amount allocated to Program services $ , (iii) the amount allocated to Management and general $ , and (iv) the amount allocated to Fundraising $.
Part III Statement of Program Service Accomplishments (See the instructions)

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

What is the organization's primary exempt purpose? ▶ Provide medical services & education for children with developmental disorder

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

<table>
<thead>
<tr>
<th>Program Service Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>a ICDRC and the Good News Doctor Foundation is an organization that brings together traditional science and medicine to assist families with treatment of children with developmental disorders. Education and training of parents leads to integrated therapies for the children. (Grants and allocations $)</td>
<td>205,985</td>
</tr>
<tr>
<td>b ICDRC and the Good News Doctor Foundation operate a school for children with autism and other developmental disorders. The school combines the best of educational and behavioral approaches in treatment with medical and biological intervention. Children are now being educated and mainstreamed into the public schools. (Grants and allocations $)</td>
<td>282,443</td>
</tr>
<tr>
<td>c ICDRC and the Good News Doctor Foundation obtained a grant to purchase hyperbaric chambers and oxygen concentrators. They offer treatments in the office as well as rentals of the equipment (Grants and allocations $)</td>
<td>121,042</td>
</tr>
<tr>
<td>d</td>
<td></td>
</tr>
<tr>
<td>e Other program services (attach schedule) (Grants and allocations $)</td>
<td></td>
</tr>
<tr>
<td>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</td>
<td>609,470</td>
</tr>
</tbody>
</table>
### Part IV - Balance Sheets (See the instructions)

<p>| Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only |</p>
<table>
<thead>
<tr>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>45 Cash—non-interest-bearing</td>
<td>23,240</td>
</tr>
<tr>
<td>46 Savings and temporary cash investments</td>
<td>46</td>
</tr>
<tr>
<td>47 a Accounts receivable</td>
<td>47a</td>
</tr>
<tr>
<td>b Less allowance for doubtful accounts</td>
<td>47b</td>
</tr>
<tr>
<td>48 a Pledges receivable</td>
<td>48a</td>
</tr>
<tr>
<td>b Less allowance for doubtful accounts</td>
<td>48b</td>
</tr>
<tr>
<td>49 Grants receivable</td>
<td>49</td>
</tr>
<tr>
<td>50 Receivables from officers, directors, trustees, and key employees (attach schedule)</td>
<td>50</td>
</tr>
<tr>
<td>51 a Other notes and loans receivable (attach schedule)</td>
<td>51a</td>
</tr>
<tr>
<td>b Less allowance for doubtful accounts</td>
<td>51b</td>
</tr>
<tr>
<td>52 Inventories for sale or use</td>
<td>52</td>
</tr>
<tr>
<td>53 Prepaid expenses and deferred charges</td>
<td>53</td>
</tr>
<tr>
<td>54 Investments—securities (attach schedule)</td>
<td>Cost</td>
</tr>
<tr>
<td>55 a Investments—land, buildings, and equipment: basis</td>
<td>55a</td>
</tr>
<tr>
<td>b Less accumulated depreciation (attach schedule)</td>
<td>55b</td>
</tr>
<tr>
<td>56 Investments—other (attach schedule)</td>
<td>56</td>
</tr>
<tr>
<td>57 a Land, buildings, and equipment basis</td>
<td>57a</td>
</tr>
<tr>
<td>b Less accumulated depreciation (attach schedule)</td>
<td>57b</td>
</tr>
<tr>
<td>58 Other assets (describe )</td>
<td>58</td>
</tr>
<tr>
<td>59 Total assets (must equal line 74) Add lines 45 through 58</td>
<td>72,313</td>
</tr>
<tr>
<td>60 Accounts payable and accrued expenses</td>
<td>1,285</td>
</tr>
<tr>
<td>61 Grants payable</td>
<td>61</td>
</tr>
<tr>
<td>62 Deferred revenue</td>
<td>11,187</td>
</tr>
<tr>
<td>63 Loans from officers, directors, trustees, and key employees (attach schedule)</td>
<td>63</td>
</tr>
<tr>
<td>64 a Tax-exempt bond liabilities (attach schedule)</td>
<td>64a</td>
</tr>
<tr>
<td>b Mortgages and other notes payable (attach schedule)</td>
<td>64b</td>
</tr>
<tr>
<td>65 Other liabilities (describe )</td>
<td>Health Care Associates of Brevard</td>
</tr>
<tr>
<td>66 Total liabilities. Add lines 60 through 65</td>
<td>37,472</td>
</tr>
</tbody>
</table>

**Organizations that follow SFAS 117, check here and complete lines 67 through 69 and lines 73 and 74**

| 67 Unrestricted | 67 |
| 68 Temporarily restricted | 68 |
| 69 Permanently restricted | 69 |

**Organizations that do not follow SFAS 117, check here and complete lines 70 through 74**

| 70 Capital stock, trust principal, or current funds | 70 |
| 71 Paid-in or capital surplus, or land, building, and equipment fund | 71 |
| 72 Retained earnings, endowment, accumulated income, or other funds | 34,841 | 72 | 499,910 |

**Net Assets or Fund Balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)**

| 73 Total net assets or fund balances | 34,841 | 73 | 499,910 |

**Total liabilities and net assets/fund balances. Add lines 66 and 73**

| 74 Total liabilities and net assets/fund balances | 72,313 | 74 | 543,180 |
### Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See the instructions)

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Amounts included on line a but not on Part I, line 12</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Net unrealized gains on investments</td>
<td>b1</td>
</tr>
<tr>
<td></td>
<td>2 Donated services and use of facilities</td>
<td>b2</td>
</tr>
<tr>
<td></td>
<td>3 Recoveries of prior year grants</td>
<td>b3</td>
</tr>
<tr>
<td></td>
<td>4 Other (specify)</td>
<td>b4</td>
</tr>
</tbody>
</table>

Add lines b1 through b4

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>c</td>
<td>Subtract line b from line a</td>
</tr>
</tbody>
</table>

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>d</td>
<td>Amounts included on Part I, line 12, but not on line a:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Investment expenses not included on Part I, line 6b</td>
<td>d1</td>
</tr>
<tr>
<td></td>
<td>2 Other (specify)</td>
<td>d2</td>
</tr>
</tbody>
</table>

Add lines d1 and d2

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>e</td>
<td>Total revenue (Part I, line 12) Add lines c and d</td>
</tr>
</tbody>
</table>

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Total expenses and losses per audited financial statements</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Amounts included on line a but not on Part I, line 17</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Donated services and use of facilities</td>
<td>b1</td>
</tr>
<tr>
<td></td>
<td>2 Prior year adjustments reported on Part I, line 20</td>
<td>b2</td>
</tr>
<tr>
<td></td>
<td>3 Losses reported on Part I, line 20</td>
<td>b3</td>
</tr>
<tr>
<td></td>
<td>4 Other (specify)</td>
<td>b4</td>
</tr>
</tbody>
</table>

Add lines b1 through b4

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>c</td>
<td>Subtract line b from line a</td>
</tr>
</tbody>
</table>

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>d</td>
<td>Amounts included on Part I, line 17, but not on line a:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Investment expenses not included on Part I, line 6b</td>
<td>d1</td>
</tr>
<tr>
<td></td>
<td>2 Other (specify)</td>
<td>d2</td>
</tr>
</tbody>
</table>

Add lines d1 and d2

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>e</td>
<td>Total expenses (Part I, line 17) Add lines c and d</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Title</th>
<th>Employment Status</th>
<th>Compensation (if applicable)</th>
<th>Contributions to employee benefits plans &amp; deferred compensation plans</th>
<th>Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>James Bradstreet</td>
<td>3800 W Eau Galle ST</td>
<td>President</td>
<td>Hr/WK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Henry Dekker</td>
<td>1260 Hollow Brook ST</td>
<td>Director</td>
<td>Hr/WK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>John Padgett</td>
<td>10350 Log House Rd</td>
<td>Director</td>
<td>Hr/WK</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>N/A</td>
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<td>Title</td>
<td>Hr/WK</td>
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<td>N/A</td>
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<td>Hr/WK</td>
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<tr>
<td>N/A</td>
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<td>Title</td>
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<tr>
<td>N/A</td>
<td></td>
<td>Title</td>
<td>Hr/WK</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part V-A  Current Officers, Directors, Trustees, and Key Employees (continued)

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings.

| 75b | Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s).
| 75c | Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note: Related organizations include section 509(a)(3) supporting organizations.

If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.

| 75d | 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 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.)

<table>
<thead>
<tr>
<th>(A) Name and address</th>
<th>(B) Loans and Advances</th>
<th>(C) Compensation</th>
<th>(D) Contributions to employee benefit plans &amp; deferred compensation plans</th>
<th>(E) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name N/A</td>
<td>Sr.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>ST  ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name N/A</td>
<td>Sr.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>ST  ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name N/A</td>
<td>Sr.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>ST  ZIP</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Name N/A</td>
<td>Sr.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>ST  ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name N/A</td>
<td>Sr.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>ST  ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name N/A</td>
<td>Sr.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>ST  ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name N/A</td>
<td>Sr.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>ST  ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name N/A</td>
<td>Sr.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>ST  ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VI  Other Information (See the instructions.)

| 76 | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.
| 77 | Were any changes made in the organizing or governing documents not reported to the IRS? If "Yes," attach a conformed copy of the changes.

| 78a | Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year?

| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement.

| 80a | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? If "Yes," enter the name of the organization and check whether it is exempt or nonexempt.

| 81a | Enter direct and indirect political expenditures (See line 81 instructions.)

| 81b | Did the organization file Form 1120-POL for this year?
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?  
82b N/A

83a Did the organization comply with the public inspection requirements for returns and exemption applications?  
83b X

84a Did the organization solicit any contributions or gifts that were not tax deductible?  
84b N/A

85 501(c)(4), (5), or (6) organizations  
- a Were substantially all dues nondeductible by members?  
- b Did the organization make only in-house lobbying expenditures of $2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year  
85c Dues, assessments, and similar amounts from members
85d Lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  
85h

86 501(c)(7) orgs  
86a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities

87 501(c)(12) orgs  
- a Gross income from members or shareholders
- b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX  

89a 501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911. Enter "x" in all other answer lines.  
89b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction  
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization

90a List the states with which a copy of this return is filed  
90b

91a The books are in care of  
Name: James J. Bradstreet, MD  
Telephone no: (321) 953-0277

Located at 1688 Hibiscus Boulevard, City: ST. ZIP + 4: 32901

91b

91c

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

92 N/A
### Part VII: Analysis of Income-Producing Activities (See the instructions)

**Note:** Enter gross amounts unless otherwise indicated.

<table>
<thead>
<tr>
<th>(A) Business code</th>
<th>(B) Amount</th>
<th>(C) Exclusion code</th>
<th>(D) Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>93 Program service revenue</td>
<td>6,200</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Program Fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Fees from school</td>
<td>106,897</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Medicare/Medicaid payments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Fees and contracts from government agencies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>94 Membership dues and assessments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>95 Interest on savings and temporary cash investments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>96 Dividends and interest from securities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>97 Net rental income or (loss) from real estate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a debt-financed property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b not debt-financed property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>98 Net rental income or (loss) from personal property</td>
<td>95,165</td>
<td></td>
<td></td>
</tr>
<tr>
<td>99 Other investment income</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>100 Gain or (loss) from sales of assets other than inventory</td>
<td>24,335</td>
<td></td>
<td></td>
</tr>
<tr>
<td>101 Net income or (loss) from special events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>102 Gross profit or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>103 Other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>c</td>
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<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>104 Subtotal (add columns (B), (D), and (E))</td>
<td></td>
<td></td>
<td>232,597</td>
</tr>
<tr>
<td>105 Total (add line 104, columns (B), (D), and (E))</td>
<td></td>
<td></td>
<td>232,597</td>
</tr>
</tbody>
</table>

**Note:** Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

### Part VIII: Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)

**Line No.**

- Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)

93a, 93b Info was provided to parents and professionals on the latest therapeutic approach to treatment of developmental disorders by speaking at conferences, working with medical & research professionals, providing a training program, promoting medical treatments combined with behavioral and nutritional therapies, and providing therapy and support for families on how to live with their situation and how to make the best of their lives. McKnight scholarships provided to students attending the school.

### Part IX: Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)

<table>
<thead>
<tr>
<th>(A) Name, address, and EIN of corporation, partnership, or disregarded entity</th>
<th>(B) Percentage of ownership interest</th>
<th>(C) Nature of activities</th>
<th>(D) Total income</th>
<th>(E) End-of-year assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part X: Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **X** Yes □ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **X** Yes □ No

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

---

Please Sign Here:

- Signature of officer: □
- Signature of President: □
- Type or print name and title: □

Paid Preparer’s Use Only:

- Preparer’s signature: □
- Firm’s name (or you if self-employed): □
- Address and ZIP + 4: □
- Date: □
- Check if self-employed: □
- Preparer’s SSN or PTIN (See Gen Inst W): □
- EIN: □
- EIN: □
- Phone no: □

---

Form 990 (2005)

8/13/07
## SCHEDULE A
(Form 990 or 990-EZ)

**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

---

### Part I
Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

<table>
<thead>
<tr>
<th>(a) Name and address of each employee paid more than $50,000</th>
<th>(b) Title and average hours per week devoted to position</th>
<th>(c) Compensation</th>
<th>(d) Contributions to employee benefit plans &amp; deferred compensation</th>
<th>(e) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
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<td></td>
<td></td>
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<tr>
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<tr>
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<td></td>
</tr>
</tbody>
</table>

**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")

<table>
<thead>
<tr>
<th>(a) Name and address of each independent contractor paid more than $50,000</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total number of others receiving over $50,000 for professional services ▶**

### Part II-B
Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions)

<table>
<thead>
<tr>
<th>(a) Name and address of each independent contractor paid more than $50,000</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
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<td></td>
</tr>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Total number of other contractors receiving over $50,000 for other services ▶**

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For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2005 (HTA)
### Part III  Statements About Activities (See page 2 of the instructions)

1. During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ __________________ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)

   - 1  X

   Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

2. During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributor, trustee, director, officer, employee, key employee, or member of its 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?
   - b  Lending of money or other extension of credit?
   - c  Furnishing of goods, services, or facilities?
   - d  Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?
   - e  Transfer of any part of its income or assets?

   - 2a  X
   - 2b  X
   - 2c  X
   - 2d  X
   - 2e  X

### Part IV  Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

- The organization is not a private foundation because it is (Please check only ONE applicable box)

   - 5  □  A church, convention of churches, or association of churches
   - 6  □  A school Section 170(b)(1)(A)(i)
   - 7  □  A hospital or a cooperative hospital service organization
   - 8  □  A Federal, state, or local government or governmental unit
   - 9  □  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(ii) Enter the hospital's name, city, and state ▶ __________________________ City __________________________ State __________________________ Country __________________________
   - 10 □  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
   - 11  □  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
   - 11  X  □  A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
   - 12  □  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc. functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)
   - 13  □  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization ▶ □  Type 1 □  Type 2 □  Type 3

   - Provide the following information about the supported organizations (See page 6 of the instructions)

<table>
<thead>
<tr>
<th>(a) Name(s) of supported organization(s)</th>
<th>(b) Line number from above</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   - 14 □  An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)
### Part IV-A Support Schedule

(Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2004</th>
<th>(b) 2003</th>
<th>(c) 2002</th>
<th>(d) 2001</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Gifts, grants, and contributions received (Do not include unusual grants See line 28 )</td>
<td>352,823</td>
<td>252,709</td>
<td>384,718</td>
<td>356,063</td>
<td>1,346,313</td>
</tr>
<tr>
<td>16 Membership fees received</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>314,806</td>
<td>196,336</td>
<td>77,381</td>
<td>172,655</td>
<td>761,178</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Net income from unrelated business activities not included in line 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets</td>
<td></td>
<td></td>
<td>225</td>
<td></td>
<td>225</td>
</tr>
<tr>
<td>23 Total of lines 15 through 22</td>
<td>667,629</td>
<td>449,270</td>
<td>462,099</td>
<td>528,718</td>
<td>2,107,716</td>
</tr>
<tr>
<td>24 Line 23 minus line 17</td>
<td>352,823</td>
<td>252,834</td>
<td>384,718</td>
<td>356,063</td>
<td>1,346,313</td>
</tr>
<tr>
<td>25 Enter 1% of line 23</td>
<td>6,676</td>
<td>4,493</td>
<td>4,621</td>
<td></td>
<td>5,287</td>
</tr>
<tr>
<td>26 Organizations described on lines 10 or 11:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Enter 2% of amount in column (e), line 24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Prepare a list for your records to show the name of and amount contributed by each person or governmental unit or publicly supported organization whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Total support for section 509(a)(1) test. Enter line 24, column (e)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Add Amounts from column (e) for lines 18 to 19</td>
<td>225</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Public support (line 26c minus line 26d total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Public support percentage (line 26e numerator divided by line 26c denominator)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27 Organizations described on line 12:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a For amounts included in lines 15, 16, and 17 that were received from a &quot;disqualified person.&quot; Prepare a list for your records to show the name of, and total amounts received in each year from, each &quot;disqualified person.&quot; Do not file this list with your return. Enter the sum of such amounts for each year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b For any amount included in line 17 that was received from a person (other than &quot;disqualified persons&quot;), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) $5,000 (include in the list organizations described in lines 5 through 11b, as well as individuals). Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add Amounts from column (e) for lines 15 to 19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Add Line 27a total and line 27b total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Public support (line 27c total minus line 27d total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Public support percentage (line 27e numerator divided by line 27f denominator)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Investment income percentage (line 27g numerator divided by line 27f denominator)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?</td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>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?</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If &quot;Yes,&quot; please describe, if &quot;No,&quot; please explain (If you need more space, attach a separate statement)</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Does the organization maintain the following</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Records indicating the racial composition of the student body, faculty, and administrative staff?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Copies of all material used by the organization or on its behalf to solicit contributions?</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Does the organization discriminate by race in any way with respect to</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Students' rights or privileges?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Admissions policies?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Employment of faculty or administrative staff?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Scholarships or other financial assistance?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Educational policies?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>f Use of facilities?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Athletic programs?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>h Other extracurricular activities?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If you answered &quot;Yes&quot; to any of the above, please explain (If you need more space, attach a separate statement)</td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>a Does the organization receive any financial aid or assistance from a governmental agency?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Has the organization's right to such aid ever been revoked or suspended? If you answered &quot;Yes&quot; to either 34a or b, please explain using an attached statement</td>
<td></td>
</tr>
<tr>
<td>35</td>
<td>Does the organization certify that it has complied with the applicable requirements of sections 401 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If &quot;No,&quot; attach an explanation</td>
<td></td>
</tr>
</tbody>
</table>
### Part VI-A: Lobbying Expenditures by Electing Public Charities

(See page 9 of the instructions)

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

#### Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(a) Affiliated group totals</th>
<th>(b) To be completed for ALL electing organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>36</td>
<td>Total lobbying expenditures to influence public opinion (grassroots lobbying)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>37</td>
<td>Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>38</td>
<td>Total lobbying expenditures (add lines 36 and 37)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>39</td>
<td>Other exempt purpose expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>40</td>
<td>Total exempt purpose expenditures (add lines 38 and 39)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>41</td>
<td>Lobbying nontaxable amount Enter the amount from the following table—</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the amount on line 40 is—</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The lobbying nontaxable amount is—</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not over $500,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$100,000 plus 15% of the excess over $500,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Over $1,000,000 but not over $1,500,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$175,000 plus 10% of the excess over $1,000,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Over $1,500,000 but not over $17,000,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$225,000 plus 5% of the excess over $1,500,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Over $17,000,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$1,000,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>42</td>
<td>Grassroots nontaxable amount (enter 25% of line 41)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>43</td>
<td>Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36</td>
<td></td>
<td></td>
</tr>
<tr>
<td>44</td>
<td>Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

### 4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

(See the instructions for lines 45 through 50 on page 11 of the instructions)

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2005</th>
<th>(b) 2004</th>
<th>(c) 2003</th>
<th>(d) 2002</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>45</td>
<td>Lobbying nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>46</td>
<td>Lobbying ceiling amount (150% of line 45(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>47</td>
<td>Total lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>48</td>
<td>Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>49</td>
<td>Grassroots ceiling amount (150% of line 48(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>50</td>
<td>Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

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

<table>
<thead>
<tr>
<th>Letter</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Volunteers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Paid staff or management (Include compensation in expenses reported on lines c through h.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Media advertisements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Mailings to members, legislators, or the public</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Publications, or published or broadcast statements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Grants to other organizations for lobbying purposes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Total lobbying expenditures (Add lines c through h.)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities
### Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>51a(i)</td>
<td></td>
</tr>
<tr>
<td>a(ii)</td>
<td></td>
</tr>
</tbody>
</table>

- a Transfers from the reporting organization to a noncharitable exempt organization of
  - (i) Cash
  - (ii) Other assets

- b Other transactions
  - (i) Sales or exchanges of assets with a noncharitable exempt organization
  - (ii) Purchases of assets from a noncharitable exempt organization
  - (iii) Rental of facilities, equipment, or other assets
  - (iv) Reimbursement arrangements
  - (v) Loans or loan guarantees
  - (vi) Performance of services or membership or fundraising solicitations

- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

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

<table>
<thead>
<tr>
<th>(a) Line no</th>
<th>(b) Amount involved</th>
<th>(c) Name of noncharitable exempt organization</th>
<th>(d) Description of transfers, transactions, and sharing arrangements</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 52 Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 

- a |

- b If "Yes," complete the following schedule

<table>
<thead>
<tr>
<th>(a) Name of organization</th>
<th>(b) Type of organization</th>
<th>(c) Description of relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part I - Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

<table>
<thead>
<tr>
<th></th>
<th>Maximum amount</th>
<th>See the instructions for a higher limit for certain businesses</th>
<th>1</th>
<th>105,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Total cost of section 179 property placed in service</td>
<td>See instructions</td>
<td>2</td>
<td>420,000</td>
</tr>
<tr>
<td>3</td>
<td>Threshold cost of section 179 property before reduction in limitation</td>
<td>Subtract line 3 from line 2. If zero or less, enter -0-</td>
<td>3</td>
<td>420,000</td>
</tr>
<tr>
<td>4</td>
<td>Reduction in limitation</td>
<td>Subtract line 3 from line 2. If zero or less, enter -0-</td>
<td>4</td>
<td>105,000</td>
</tr>
<tr>
<td>5</td>
<td>Dollar limitation for tax year</td>
<td>Subtract line 4 from line 1. If zero or less, enter -0-</td>
<td>5</td>
<td>105,000</td>
</tr>
<tr>
<td></td>
<td>Description of property</td>
<td>Elected cost</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Listed property</td>
<td>Enter the amount from line 29</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Total elected cost of section 179 property</td>
<td>Add amounts in column (c), lines 6 and 7</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Tentative deduction</td>
<td>Enter the smaller of line 5 or line 8</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Carryover of disallowed deduction from line 13 of your 2004 Form 4562</td>
<td></td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Business income limitation</td>
<td>Enter the smaller of business income (not less than zero) or line 5 (see instructions)</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Section 179 expense deduction</td>
<td>Add lines 9 and 10, but do not enter more than line 11</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Carryover of disallowed deduction to 2006. Add line 9 and 10, less line 12</td>
<td></td>
<td>13</td>
<td></td>
</tr>
</tbody>
</table>

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

## Part II - Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

|   | Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property (other than listed property) placed in service during the tax year | 14 |  |
|   | Property subject to section 168(f)(1) election | 15 |  |
|   | Other depreciation (including ACRS) | 16 |  |

## Part III - MACRS Depreciation (Do not include listed property) (See instructions)

### Section A

<table>
<thead>
<tr>
<th></th>
<th>MACRS deductions for assets placed in service in tax years beginning before 2005</th>
<th>17</th>
<th>922</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B - Assets Placed in Service During 2005 Tax Year Using the General Depreciation System

<table>
<thead>
<tr>
<th></th>
<th>Classification of property</th>
<th>Month and year placed in service</th>
<th>Basis for depreciation</th>
<th>Recovery period</th>
<th>Convention</th>
<th>Depreciation deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>a 3-year property</td>
<td>See Attached Statement</td>
<td></td>
<td></td>
<td></td>
<td>119,387</td>
</tr>
<tr>
<td></td>
<td>b 5-year property</td>
<td>See Attached Statement</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c 7-year property</td>
<td>See Attached Statement</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d 10-year property</td>
<td>See Attached Statement</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e 15-year property</td>
<td>See Attached Statement</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>f 20-year property</td>
<td>See Attached Statement</td>
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<td>g 25-year property</td>
<td>See Attached Statement</td>
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<td></td>
<td>h Residential real property</td>
<td>See Attached Statement</td>
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<tr>
<td></td>
<td>i Nonresidential real property</td>
<td>See Attached Statement</td>
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</table>

### Section C - Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System

<table>
<thead>
<tr>
<th></th>
<th>Classification of property</th>
<th>Month and year placed in service</th>
<th>Basis for depreciation</th>
<th>Recovery period</th>
<th>Convention</th>
<th>Depreciation deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>a Class life</td>
<td>See Attached Statement</td>
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<td>b 12-year</td>
<td>See Attached Statement</td>
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<td>c 40-year</td>
<td>See Attached Statement</td>
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</table>

## Part IV - Summary (see instructions)

|   | Listed property: Enter amount from line 28 | 21 | 4,568 |
|   | 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 | 22 | 124,877 |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs |  |  |

For Paperwork Reduction Act Notice, see separate instructions.
## Form 4562 (2005) (Rev 1-2006)

### Part V  Listed Property

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

#### Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

<p>| | | | | | | |</p>
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</tr>
</thead>
<tbody>
<tr>
<td>24a</td>
<td>Do you have evidence to support the business/investment use claimed?</td>
<td>Yes</td>
<td>No</td>
<td>24b</td>
<td>If &quot;Yes,&quot; is the evidence written?</td>
<td>Yes</td>
</tr>
<tr>
<td>(a) Type of property</td>
<td>(b) Date placed in service</td>
<td>(c) Business/investment use percentage</td>
<td>(d) Cost or other basis for depreciation</td>
<td>(e) Basis for depreciation recovery period</td>
<td>(f) Method/Convention</td>
<td>(g) Depreciation deduction</td>
</tr>
<tr>
<td>25</td>
<td>Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)</td>
<td>Yes</td>
<td>No</td>
<td>S/L</td>
<td>S/L</td>
<td>S/L</td>
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</table>

#### Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

|   |   |   |   |   |
|---|---|---|---|
| 30 | Total business/investment miles driven during the year (do not include commuting miles) |
| 31 | Total commuting miles driven during the year |
| 32 | Total other personal (noncommuting) miles driven |
| 33 | Total miles driven during the year |
| 34 | Was the vehicle available for personal use during off-duty hours? |
| 35 | Was the vehicle used primarily by a more than 5% owner or related person? |
| 36 | Is another vehicle available for personal use? |

#### Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>37</td>
<td>Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?</td>
<td></td>
</tr>
<tr>
<td>38</td>
<td>Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees?</td>
<td></td>
</tr>
<tr>
<td>39</td>
<td>Do you treat all use of vehicles by employees as personal use?</td>
<td></td>
</tr>
<tr>
<td>40</td>
<td>Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?</td>
<td></td>
</tr>
<tr>
<td>41</td>
<td>Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)</td>
<td></td>
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</tbody>
</table>

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

### Part VI Amortization

<table>
<thead>
<tr>
<th></th>
<th>(a) Description of costs</th>
<th>(b) Date amortization begins</th>
<th>(c) Amortizable amount</th>
<th>(d) Code section</th>
<th>(e) Amortization period or percentage</th>
<th>(f) Amortization for this year</th>
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</thead>
<tbody>
<tr>
<td>42</td>
<td>Amortization of costs that begins during your 2005 tax year (see instructions)</td>
<td></td>
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<tr>
<td>43</td>
<td>Amortization of costs that began before your 2005 tax year</td>
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<td>44</td>
<td>Total. Add amounts in column (f). See the instructions for where to report</td>
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<tr>
<td>Line 1a - Direct public support</td>
<td>Cash</td>
<td>Non Cash</td>
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<td>1 Contributions</td>
<td>217,517</td>
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<tr>
<td>2 Membership dues and assessments (contributions from the public)</td>
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<td>3 Commercial co-venture</td>
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<td>4 Special events contributions (Line 9 - Special Events)</td>
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<td>5 Hormel Foods stock contrib (31 shares)</td>
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<tr>
<td>Line 1b - Indirect public support</td>
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<td>Line 1c - Government contributions (grants)</td>
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<td>696,756</td>
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</table>
# Line 8 (990) - Gain/loss from sale of assets other than inventory

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<thead>
<tr>
<th>Index</th>
<th>Description</th>
<th>Gross sales</th>
<th>Cost, other basis and expenses</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Public Securities</td>
<td>Gross sales</td>
<td>Cost, other basis and expenses</td>
</tr>
<tr>
<td></td>
<td>Non-Public Securities</td>
<td>basis and expenses</td>
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<tr>
<td></td>
<td>Other sales</td>
<td>basis and expenses</td>
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<tr>
<td>1</td>
<td>Hyperbanc Chamber</td>
<td>61,495</td>
<td>37,160</td>
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</table>

<table>
<thead>
<tr>
<th>Index</th>
<th>Description</th>
<th>Check if gain/loss is from sale of public securities</th>
<th>Check if gain/loss is from sale of non public securities</th>
<th>Check if purchaser is a business</th>
<th>Purchaser</th>
<th>Date acquired</th>
<th>Acquisition method</th>
<th>Date sold</th>
<th>Gross sales price</th>
<th>Cost</th>
<th>Donated value</th>
<th>Expense of sale and cost of improvements</th>
<th>Depreciation</th>
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<tbody>
<tr>
<td>1</td>
<td>Hyperbanc Chamber</td>
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<td>Purchase</td>
<td>9/14/2006</td>
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<td>(C) Management and general</td>
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## Line 54 (990) - Investments - Securities

Check one box below to indicate how securities are reported

[X] Cost

☐ End of year market value (FMV)

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<th>Securities at end of year</th>
<th>Number of shares/ face value</th>
<th>Value at time of donation</th>
<th>Beginning balance book value Cost</th>
<th>Ending balance book value Cost</th>
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# Line 55 (990) - Investments land, buildings, and equipment

## Land (net of any amortization)

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## Buildings and equipment

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<th>Category or Item</th>
<th>Cost/Other Basis</th>
<th>Accumulated Depreciation</th>
<th>Book Value</th>
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## Accumulated depreciation

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Total MACRS deductions for prior years (Line 17) 9,197 7,437 6,284 922 7,206

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<td>21</td>
<td>Hyperbaric Chambers</td>
<td>6/15/2006</td>
<td>F-7</td>
<td>100.00%</td>
<td>58,000</td>
<td>58,000</td>
<td>5</td>
<td>200DB</td>
<td>HY</td>
<td>11,600</td>
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<td>Oxygen Concentrators</td>
<td>8/30/2006</td>
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<td>100.00%</td>
<td>1,450</td>
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<td>200DB</td>
<td>HY</td>
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<tr>
<td>23</td>
<td>Hyperbaric Chambers</td>
<td>8/30/2006</td>
<td>F-7</td>
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<td>14,500</td>
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<td>200DB</td>
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<td>24</td>
<td>Hyperbaric Chambers</td>
<td>9/27/2006</td>
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Total GDS 5-year property (Line 19b) 596,935 596,935 119,387 119,387

<table>
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<th>Subtotal</th>
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<td>606,132</td>
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<td>120,309</td>
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<tr>
<th>Listed property with more than 50% business use (Line 25 and 26)</th>
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<tr>
<td>6</td>
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<tr>
<td>24</td>
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<td>22</td>
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<td>23</td>
</tr>
<tr>
<td>26</td>
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<tr>
<td>25</td>
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</table>

Total listed prop with > 50% business use 28,595 25,527 7,096 4,568 11,664

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<th>Subtotal Listed Property</th>
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<td>25,527</td>
<td>7,096</td>
<td>4,568</td>
<td>11,664</td>
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<tr>
<th>Form 4562 Reconciliation</th>
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<tbody>
<tr>
<td>Annual depreciation and amortization</td>
</tr>
<tr>
<td>Special allowance except listed property (Line 14)</td>
</tr>
<tr>
<td>Listed property special allowance (Line 25)</td>
</tr>
<tr>
<td>Item No</td>
</tr>
<tr>
<td>---------</td>
</tr>
<tr>
<td></td>
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</tbody>
</table>

Section 179 deduction claimed (includes prior year disallowed)
Section 179 deduction carried forward to future year
Section 179 deduction (Line 12)
Less amortization included in total annual depreciation and amortization (Line 44)

Form 4562, Line 22

124,877
Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box.
- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I  Automatic 3-Month Extension of Time—Only submit original (no copies needed)

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

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns

Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

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

Type or print

Name of Exempt Organization

Intl Child Develop Rsch Center & Good News Doctor Foundation

Employer identification number

59-3473087

File by the

due date for

filing your return See instructions

1688 Hibiscus Boulevard

Cty, town or post office, state, and ZIP code For a foreign address, see instructions

Melbourne, FL 32901

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

X Form 990

Form 990-T (corporation)

Form 9720

Form 990-BL

Form 990-T (sec 401(a) or 408(a) trust)

Form 5227

Form 990-EZ

Form 990-T (trust other than above)

Form 6069

Form 990-PF

Form 1041-A

Form 8870

The books are in the care of

See attached worksheet

Telephone No.  (321) 953-0277  FAX No.

If the organization does not have an office or place of business in the United States, check this box

If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) if this is for the whole group, check this box

If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until

5/15/2007

to file the exempt organization return for the organization named above. The extension is for the organization's return for

calendar year

or

tax year beginning

10/1/2005

and ending

9/30/2006

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

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

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions
**Form 8868 (Rev 12-2004)**

**Page 2**

**Part II Additional (not automatic) 3-Month Extension of Time—Must File Original and One Copy.**

<table>
<thead>
<tr>
<th>Type or print</th>
<th>Name of Exempt Organization</th>
<th>Employer Identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Intl Child Develop Rsch Center &amp; Good News Doctor Foundation</td>
<td>59-3473087</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>File by the extended due date for filing the return (See instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1688 Hibiscus Boulevard</td>
</tr>
<tr>
<td>City, town or post office, state, and ZIP code For a foreign address, see instructions</td>
</tr>
<tr>
<td>Melbourne, FL 32901</td>
</tr>
</tbody>
</table>

**Check type of return to be filed (File a separate application for each return)**

- [x] Form 990
- [ ] Form 990-T (sec 401(a) or 408(a) trust)
- [ ] Form 990-T (trust other than above)
- [ ] Form 5227
- [ ] Form 6069
- [ ] Form 1041-A
- [ ] Form 4720
- [ ] Form 8870

**STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

1. The books are in the care of: James Bradstreet, MD
   
   Telephone No: (321) 953-0277  
   FAX No: ________________________

2. If the organization does not have an office or place of business in the United States, check this box [ ]

3. If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ________________________.
   If this is for the whole group, check this box [x]. If it is for part of the group, check this box [ ] and attach a list with the names and EINs of all members the extension is for.

4. I request an additional 3-month extension of time until 8/15/2007

5. For calendar year ________, or other tax year beginning ________, and ending ________

6. If this tax year is for less than 12 months, check reason [ ] initial return [ ] Final return [ ] Change in accounting period

7. State in detail why you need the extension More time is requested to acquire all information needed to complete and file an accurate return

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

   $ ____________

8. b. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868

   $ ____________

8. c. Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

   $ ____________

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature: [Signature]  
Title: CPA  
Date: 5/13/2007

**Notice to Applicant—To Be Completed by the IRS**

- [ ] We have approved this application Please attach this form to the organization's return

- [ ] We have not approved this application However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return Please attach this form to the organization's return

- [ ] We have not approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting a 10-day grace period

- [ ] We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested

- [ ] Other

   By ___________________________________________________________________

   Date ____________

**Alternate Mailing Address** — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

<table>
<thead>
<tr>
<th>Type or print</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Joseph CPA PA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number and street (include suite, room, or apt. no.) or a P.O. box number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1811 S Patrick Drive</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City or town, province or state, and country (including postal or ZIP code)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indian Harbour Beach, FL 32937-4323</td>
</tr>
</tbody>
</table>

Form 8868 (Rev 12-2004)