

**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

**2005**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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 **JUL 1, 2005** and ending **JUN 30, 2006**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>AMERICAN TINNITUS ASSOCIATION</b>	<b>D</b> Employer identification number <b>93-0749558</b>	
	Number and street (or P.O. box if mail is not delivered to street address) <b>PO BOX 5</b>	Room/suite 	<b>E</b> Telephone number <b>(503) 248-9985</b>
	City or town, state or country, and ZIP + 4 <b>PORTLAND, OR 97207-0005</b>	<b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	

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

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates?  Yes  No

H(b) If "Yes," enter number of affiliates **N/A**

H(c) Are all affiliates included? **N/A**  Yes  No (If "No," attach a list.)

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

**G** Website: **WWW.ATA.ORG**

**J** Organization type (check only one)  501(c) ( 3 ) (insert no.)  4947(a)(1) or  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.

**I** Group Exemption Number **N/A**

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **2,030,476.**

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	1,845,200.		
	b	Indirect public support	1b	61,150.		
	c	Government contributions (grants)	1c			
	d	Total (add lines 1a through 1c) (cash \$ 1,906,350. noncash \$ ) ...	1d	1,906,350.		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	54,536.		
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4	46,031.		
	5	Dividends and interest from securities	5	23,559.		
	6a	Gross rents	6a			
	6b	Less: rental expenses	6b			
	6c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe )	7				
Revenue	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	8a	
	b	Less: cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			
Revenue	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
9c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
Revenue	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11				
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	2,030,476.			
Expenses	13	Program services (from line 44, column (B))	13	833,958.		
	14	Management and general (from line 44, column (C))	14	126,684.		
	15	Fundraising (from line 44, column (D))	15	336,292.		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17	1,296,934.		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	733,542.		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,350,448.		
	20	Other changes in net assets or fund balances (attach explanation) <b>SEE STATEMENT 1</b>	20	4,052.		
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	2,088,042.		

**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.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ 199938, noncash \$ 0. If this amount includes foreign grants, check here <input type="checkbox"/> )	22 199,938.	199,938.	STATEMENT 4	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc. **	25 88,431.	51,966.	7,045.	29,420.
26 Other salaries and wages	26 353,055.	207,469.	27,527.	118,059.
27 Pension plan contributions	27			
28 Other employee benefits	28 53,409.	31,385.	4,164.	17,860.
29 Payroll taxes	29 52,888.	31,079.	4,124.	17,685.
30 Professional fundraising fees	30			
31 Accounting fees	31 9,300.	2,324.	5,968.	1,008.
32 Legal fees	32 31,178.	7,791.	20,009.	3,378.
33 Supplies	33			
34 Telephone	34 19,085.	13,266.	2,997.	2,822.
35 Postage and shipping	35 77,983.	31,229.	1,636.	45,118.
36 Occupancy	36 60,029.	35,276.	4,680.	20,073.
37 Equipment rental and maintenance	37			
38 Printing and publications	38 96,700.	64,906.	696.	31,098.
39 Travel	39 25,960.	15,500.	2,216.	8,244.
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc. (attach schedule)	42 5,188.	3,049.	404.	1,735.
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g SEE STATEMENT 2	43g 223,790.	138,780.	45,218.	39,792.
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 1,296,934.	833,958.	126,684.	336,292.

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 \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;  
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

\*\* SEE STATEMENT 3

**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? ► <b>SEE STATEMENT 9</b>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)	
<b>a SEE STATEMENT 5</b>         	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	302,771.
<b>b SEE STATEMENT 6</b>         	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	158,341.
<b>c SEE STATEMENT 7</b>         	
(Grants and allocations \$ 199,938.) If this amount includes foreign grants, check here ► <input type="checkbox"/>	238,769.
<b>d SEE STATEMENT 8</b>         	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	134,077.
<b>e</b> Other program services (attach schedule)	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) ►	833,958.

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)	
		Beginning of year		End of year	
Assets	45 Cash - non-interest-bearing .....	100.	45	100.	
	46 Savings and temporary cash investments .....	1,262,395.	46	1,858,678.	
	47 a Accounts receivable .....	32,945.			
	47a				
	b Less: allowance for doubtful accounts .....		47b		
	47b				
			21,327.	47c	32,945.
	48 a Pledges receivable .....			48a	
	48a				
	b Less: allowance for doubtful accounts .....			48b	
	48b				
	48c				
	49 Grants receivable .....			49	
	50 Receivables from officers, directors, trustees, and key employees .....			50	
	51 a Other notes and loans receivable .....			51a	
	51a				
	b Less: allowance for doubtful accounts .....			51b	
	51b				
51c					
52 Inventories for sale or use .....	8,033.	52		7,121.	
53 Prepaid expenses and deferred charges .....	25,683.	53		18,468.	
54 Investments - securities <b>STMT 10 STMT 11</b> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV .....	319,944.	54		373,996.	
55 a Investments - land, buildings, and equipment: basis .....			55a		
55a					
b Less: accumulated depreciation .....			55b		
55b					
55c					
56 Investments - other .....			56		
57 a Land, buildings, and equipment: basis .....	90,588.	57a			
57a					
b Less: accumulated depreciation .....	77,734.	57b			
57b					
57c	8,951.		57c	12,854.	
58 Other assets (describe <b>▶</b> .....			58		
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58 .....	1,646,433.	59		2,304,162.	
Liabilities	60 Accounts payable and accrued expenses .....	270,945.	60	194,535.	
	61 Grants payable .....		61		
	62 Deferred revenue .....		62		
	63 Loans from officers, directors, trustees, and key employees .....		63		
	64 a Tax-exempt bond liabilities .....		64a		
	64a				
	b Mortgages and other notes payable .....		64b		
64b					
65 Other liabilities (describe <b>▶</b> <b>SEE STATEMENT 12</b> ) .....	25,040.	65		21,585.	
66 <b>Total liabilities.</b> Add lines 60 through 65) .....	295,985.	66		216,120.	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted .....	982,998.	67	1,312,141.	
	68 Temporarily restricted .....	367,450.	68	775,901.	
	69 Permanently restricted .....		69		
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds .....		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund .....		71		
	72 Retained earnings, endowment, accumulated income, or other funds .....		72		
	73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) .....	1,350,448.	73		2,088,042.
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 .....	1,646,433.	74		2,304,162.





Part VI Other information (continued)

82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 82a X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b
83 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
84 a Did the organization solicit any contributions or gifts that were not tax deductible? 84a X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A 84b
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A 85a
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A 85b
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.
c Dues, assessments, and similar amounts from members 85c N/A
d Section 162(e) lobbying and political expenditures 85d N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A 85g
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A 85h
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A
b Gross receipts, included on line 12, for public use of club facilities 86b N/A
87 501(c)(12) 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.) 87b N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX 88 X
89 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.
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 X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.
d Enter: Amount of tax on line 89c, above, reimbursed by the organization 0.
90 a List the states with which a copy of this return is filed SEE STATEMENT 14
b Number of employees employed in the pay period that includes March 12, 2005 90b 8
91 a The books are in care of MICHAEL MALUSEVIC, ACCOUNTANT Telephone no. (503) 248-9985
Located at 65 SW YAMHILL ST., SUITE 200, PORTLAND, OR ZIP +4 97207
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 91b X
If "Yes," enter the name of the foreign country N/A
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c X
If "Yes," enter the name of the foreign country N/A
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

Table with 2 columns: Yes, No. Row 91b: Yes, No. Row 91c: Yes, No.

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(G) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a BOOKS, BROCHURES &					
b PUBLICATIONS					25,166.
c ADVERTISING/OTHER					29,370.
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	46,031.	
96 Dividends and interest from securities			14	23,559.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		69,590.	54,536.
105 Total (add line 104, columns (B), (D), and (E))					124,126.

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	THIS REVENUE IS USED TO PROVIDE EDUCATION TO SUFFERERS AND PROFESSIONALS WHO TREAT SUFFERERS.
93B	THIS REVENUE ALLOWS THE ASSOCIATION TO PROVIDE HELPFUL AND EDUCATIONAL INFORMATION ABOUT PRODUCTS INTENDED TO AID SUFFERERS.

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

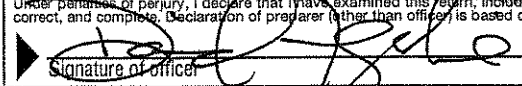
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			


**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

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

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

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:  11/04/06 David Faerlie CEO  
Signature of officer Date Type or print name and title.

Paid Preparer's Use Only: Preparer's signature  Date 11/10/06 Check if self-employed  Preparer's SSN or PTIN \_\_\_\_\_  
Firm's name (or yours if self-employed), address, and ZIP + 4 PERKINS & COMPANY, P.C.  
1211 SW FIFTH AVE, SUITE 1000  
PORTLAND, OR 97204-3710  
EIN \_\_\_\_\_ Phone no. (503) 221-0336

**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(c)(29), 501(c)(28),  
501(c)(17), or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

**2005**

Name of the organization **AMERICAN TINNITUS ASSOCIATION** Employer identification number **93 0749558**

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

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
HELEN CONNOR P.O. BOX 5, PORTLAND, OR 97207	DIR. OF MARKETING 40.00	52,650.	0.	0.
BARBARA SANDERS P.O. BOX 5, PORTLAND, OR 97207	ASSOC. DIR. & EDITOR 40.00	56,000.	0.	0.
Total number of other employees paid over \$50,000 ▶	0			

**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 ▶	0	

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

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶	0	

**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.) 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.		X
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? .....		X
b Lending of money or other extension of credit? .....		X
c Furnishing of goods, services, or facilities? .....		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V-A, FORM 990</b> .....	X	
e Transfer of any part of its income or assets? .....		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) .....		X
b Do you have a section 403(b) annuity plan for your employees? .....		X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? .....		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? .....		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services? .....		X

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

- The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)
- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
  - 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
  - 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
  - 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
  - 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ \_\_\_\_\_
  - 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
  - 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
  - 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
  - 12  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
  - 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) 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.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

**Part IV A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.  
**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,900,030.	1,256,305.	1,256,943.	1,029,970.	5,443,248.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	76,042.	32,485.	83,494.	64,350.	256,371.
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	27,773.	14,257.	20,391.	<18,085.>	44,336.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	2,003,845.	1,303,047.	1,360,828.	1,076,235.	5,743,955.
24 Line 23 minus line 17	1,927,803.	1,270,562.	1,277,334.	1,011,885.	5,487,584.
25 Enter 1% of line 23	20,038.	13,030.	13,608.	10,762.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 109,752.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 997,482.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 5,487,584.
d Add: Amounts from column (e) for lines: 18 44,336. 19 997,482. 22 26b					26d 1,041,818.
e Public support (line 26c minus line 26d total)					26e 4,445,766.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 81.0150%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2004) (2003) (2002) (2001)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 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: N/A					
(2004) (2003) (2002) (2001)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

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

**Part V Private School Questionnaire** (See page 7 of the instructions.)

N/A

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

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....		
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? .....		
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? .....		
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? .....		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....		
d	Copies of all material used by the organization or on its behalf to solicit contributions? .....		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
_____			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? .....		
b	Admissions policies? .....		
c	Employment of faculty or administrative staff? .....		
d	Scholarships or other financial assistance? .....		
e	Educational policies? .....		
f	Use of facilities? .....		
g	Athletic programs? .....		
h	Other extracurricular activities? .....		
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? .....		
b	Has the organization's right to such aid ever been revoked or suspended? .....		
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
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 .....		

**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)

N/A

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying) .....	37	
38	Total lobbying expenditures (add lines 36 and 37) .....	38	
39	Other exempt purpose expenditures .....	39	
40	Total exempt purpose expenditures (add lines 38 and 39) .....	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	<b>If the amount on line 40 is -</b>		
	<b>The lobbying nontaxable amount is -</b>		
	Not over \$500,000 .....	20% of the amount on line 40	
	Over \$500,000 but not over \$1,000,000 .....	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000 .....	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000 .....	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000 .....	\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41) .....	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....	44	

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

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

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

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(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 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers .....		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h.) .....		X	
c Media advertisements .....		X	
d Mailings to members, legislators, or the public .....		X	
e Publications, or published or broadcast statements .....		X	
f Grants to other organizations for lobbying purposes .....		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body .....		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....		X	
i Total lobbying expenditures (Add lines c through h.) .....			0.

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



FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 1

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	4,052.
TOTAL TO FORM 990, PART I, LINE 20	4,052.

FORM 990 OTHER EXPENSES STATEMENT 2

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
STAFF DEVELOPMENT	2,010.	1,181.	157.	672.
ADVERTISING	10,856.	10,673.	35.	148.
BOARD EXPENSE	45,836.	12,773.	31,472.	1,591.
ORGANIZATIONAL CONSULTING	27,529.	12,974.	2,354.	12,201.
COMPUTER CONSULTING	15,388.	9,723.	1,071.	4,594.
OFFICE EXPENSES	19,109.	11,932.	3,438.	3,739.
TINNITUS ASSISTANCE FUND	46,167.	46,167.	0.	0.
OTHER	31,130.	13,685.	5,649.	11,796.
INSURANCE	5,533.	3,252.	431.	1,850.
DUES & PUBLICATIONS	1,711.	1,579.	7.	125.
PROGRAMS CONSULTING	10,570.	10,353.	41.	176.
MAINTENANCE	7,951.	4,488.	563.	2,900.
TOTAL TO FM 990, LN 43	223,790.	138,780.	45,218.	39,792.

FORM 990

OFFICER COMPENSATION ALLOCATION  
PART II, LINE 25

STATEMENT 3

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
CHERYL D. MCGINNIS, MBA	60,350.	0.	0.	60,350.
A. PROGRAM SERVICES	35,464.			35,464.
B. MANAGEMENT AND GENERAL	4,808.			4,808.
C. FUNDRAISING	20,078.			20,078.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
DAVID FAGERLIE	28,081.	0.	0.	28,081.
A. PROGRAM SERVICES	16,502.			16,502.
B. MANAGEMENT AND GENERAL	2,237.			2,237.
C. FUNDRAISING	9,342.			9,342.

TOTAL PROGRAM SERVICES				51,966.
TOTAL MANAGEMENT AND GENERAL				7,045.
TOTAL FUNDRAISING				29,420.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B				88,431.

FORM 990

CASH GRANTS AND ALLOCATIONS

STATEMENT 4

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
RESEARCH	MASSACHUSETTS EYE AND EAR INFIRMARY	C/O JENNIFER MELCHER, PH.D., BOSTON, MA	NONE	199,938.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				199,938.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 5

DESCRIPTION OF PROGRAM SERVICE ONE

EDUCATION: THE ATA CONTINUED TO PROMOTE AWARENESS AND UNDERSTANDING OF TINNITUS THROUGH EDUCATION. THE ATA PRESENTED A FOUR-WEEK, INTERNET-BASED, INTERACTIVE COURSE FOR PROFESSIONALS THREE TIMES DURING THE YEAR, TO A TOTAL OF 60 PROFESSIONALS. THE ATA PUBLISHED A QUARTERLY JOURNAL, "TINNITUS TODAY," AND INFORMATIONAL BROCHURES. THE ATA PROVIDED WORKPLACE AND CLASSROOM SEMINARS, PUBLIC FORUMS, TARGETED MAILINGS, AND MEDIA PLACEMENTS.

TO FORM 990, PART III, LINE A

GRANTS

EXPENSES

302,771.

DESCRIPTION OF PROGRAM SERVICE TWO

ADVOCACY: THE ATA ADVOCATES FOR TINNITUS IN THE DEVELOPMENT AND IMPLEMENTATION OF PUBLIC AND PRIVATE POLICIES BY SERVING AS A CREDITABLE RESOURCE FOR OBJECTIVE INFORMATION FOR CONGRESSIONAL LEADERS AND OTHER POLICY MAKERS. THE ATA CO-SPONSORED THE CONGRESSIONAL HEARING HEALTH CAUCUS IN MAY, 2006 AT THE U.S. CAPITOL IN WASHINGTON, D.C. WHICH WAS ATTENDED BY MEMBERS OF BOTH THE HOUSE AND THE SENATE. THE ATA EMBARKED ON A CAMPAIGN TO RAISE AWARENESS OF THE NEED FOR ADDITIONAL FUNDING, TARGETING THE U.S. DEPT. OF VETERANS AFFAIRS AND THE U.S. DEPT. OF DEFENSE. ATA STAFF MET WITH VETERANS' ORGANIZATIONS AND CONGRESSIONAL REPRESENTATIVES TO ADVOCATE ON BEHALF OF THOSE WHO SUFFER FROM TINNITUS.

TO FORM 990, PART III, LINE B

GRANTS

EXPENSES

	158,341.
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DESCRIPTION OF PROGRAM SERVICE THREE

RESEARCH: THE ATA STIMULATES TINNITUS RESEARCH BY PROVIDING FUNDS IN THE FORM OF GRANTS TO RESEARCHERS. DURING THE YEAR, THE ATA LAUNCHED A PROGRAM CALLED, "ROADMAP TO A CURE" TO 1) ACT AS A GUIDE FOR TINNITUS RESEARCHERS BY DEFINING HIGH-PRIORITY RESEARCH AREAS AND 2) TO SHOW HOW DIFFERENT AREAS OF TINNITUS RESEARCH IN THE LAB AND IN THE CLINIC TIE TOGETHER AND COMPLEMENT EACH OTHER. A RESEARCHER AT THE MASSACHUSETTS EYE AND EAR INFIRMARY WAS AWARDED A GRANT TO DETERMINE HOW ACTIVITY IN A PARTICULAR PART OF THE BRAIN (THE INFERIOR COLLICULUS) MAY DIFFER BETWEEN THOSE WITH AND WITHOUT TINNITUS. ALSO DURING THE YEAR, THE ATA ADDED FOUR NEW MEMBERS TO ITS SCIENTIFIC ADVISORY COMMITTEE.

TO FORM 990, PART III, LINE C

GRANTS	EXPENSES
199,938.	238,769.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 8

DESCRIPTION OF PROGRAM SERVICE FOUR

SUPPORT: THE ATA PROVIDES AND FACILITATES SUPPORT FOR PEOPLE AFFECTED BY TINNITUS THROUGH WRITTEN MATERIALS, SUPPORT GROUPS, TELECOMMUNICATION, AND THE INTERNET. THE ATA'S ASSISTANCE FUND PROVIDES GRANTS TO THOSE IN FINANCIAL NEED, FOR CARE AND TREATMENT THEY COULD NOT OTHERWISE AFFORD. THIS YEAR THE MAXIMUM AWARD WAS DOUBLED FROM \$750 TO \$1500. NEARLY 90% OF THOSE WHO APPLIED RECEIVED FULL OR PARTIAL FUNDING. ATA SPONSORS 41 SELF-HELP GROUPS IN 22 STATES AND 141 TELEPHONE/LETTER-WRITING/EMAIL VOLUNTEERS IN 33 STATES.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE D		134,077.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 9  
PART III

EXPLANATION

THE AMERICAN TINNITUS ASSOCIATION IS ORGANIZED TO PROMOTE RELIEF, PREVENTION AND THE EVENTUAL CURE OF TINNITUS FOR THE BENEFIT OF PRESENT AND FUTURE GENERATIONS.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 10

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
LORD ABBETT LARGE VALUE EQUITY PRFTFLIO	FMV			68,259.	68,259.
TCW LARGE CAP GROWTH PORTFOLIO	FMV			155,082.	155,082.
HIBERNIA NATIONAL BANK LA - C/D MATURING 10/14/11	FMV			26,565.	26,565.
BMW BANK OF NA-UT, MATURING 01/04/08	FMV			69,702.	69,702.
TO FORM 990, LINE 54, COL B				319,608.	319,608.

FORM 990 GOVERNMENT SECURITIES STATEMENT 11

DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
US TREASURY NOTES 2/15/06	FMV	0.		
TENNESSEE VALLEY AUTH CPN STRIPS 5/1/07	FMV		19,123.	19,123.
TENNESSEE VALLEY AUTH CPN STRIPS 5/1/08	FMV		18,112.	18,112.
TENNESSEE VALLEY AUTH CPN STRIPS 5/1/09	FMV		17,153.	17,153.
TOTAL TO FORM 990, LINE 54, COL B			54,388.	54,388.

FORM 990 OTHER LIABILITIES STATEMENT 12

DESCRIPTION	AMOUNT
DEFERRED RENT PAYABLE	725.
VACATION ACCRUAL	20,860.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	
	21,585.

FORM 990

PART V-A - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DAVID FAGERLIE P.O. BOX 5 PORTLAND, OR 97207	CEO, PART-YEAR 40.00	28,081.	0.	0.
SCOTT C. MITCHELL, JD, CPA P.O. BOX 5 PORTLAND, OR 97207	CHAIR, BOARD MEMBER 0.50	0.	0.	0.
GARY P. REUL, ED.D. P.O. BOX 5 PORTLAND, OR 97207	VICE-CHAIR, BOARD MEMBER 0.50	0.	0.	0.
J. SCOTT SIMONS P.O. BOX 5 PORTLAND, OR 97207	TREASURER, BOARD MEMBER 0.50	0.	0.	0.
JOHN R. BATES P.O. BOX 5 PORTLAND, OR 97207	SECRETARY, BOARD MEMBER 0.50	0.	0.	0.
DAVID R. ANDERSON, JD P.O. BOX 5 PORTLAND, OR 97207	BOARD MEMBER 0.50	0.	0.	0.
BARBARA KENNEDY P.O. BOX 5 PORTLAND, OR 97207	BOARD MEMBER 0.50	0.	0.	0.
RICHARD SALVI, PH.D. P.O. BOX 5 PORTLAND, OR 97207	BOARD MEMBER 0.50	0.	0.	0.
JODI KLEIN P.O. BOX 5 PORTLAND, OR 97207	BOARD MEMBER 0.50	0.	0.	0.
W.F.S. HOPMEIER, BC-HIS P.O. BOX 5 PORTLAND, OR 97207	BOARD MEMBER 0.50	0.	0.	0.
PHILLIP O. MORTON P.O. BOX 5 PORTLAND, OR 97207	BOARD MEMBER 0.50	0.	0.	0.



American Tinnitus Association  
 EIN# 93-0749558  
 Statement 16 - Fixed Asset Schedule

AssetID	AssetDescription	Date Acquired	Disposal Date	Life	2004/2005 Cost/Basis	2005/2006 Cost Basis	2004/2005 Additions	Disposals	2005/2006 Expense	Beginning Accumulated Depreciation	Disposals	Ending Accumulated Depreciation
<b>Computer Hardware</b>												
92	Computer	07/21/1989	03/30/2001	5	-	-	-	-	-	-	-	-
93	Biflexed Computer	06/30/1990	03/30/2001	5	-	-	-	-	-	-	-	-
94	Computer Equipment - various	07/15/1990	03/30/2001	5	-	-	-	-	-	-	-	-
95	Computer Equipment - Various	12/31/1991	03/30/2001	5	-	-	-	-	-	-	-	-
13	3COM LAN Card	07/12/1996		5	146	146				146		146
14	Computer (Tiger)	04/08/1997		5	2,561	2,561				2,561		2,561
38	Tape Drive	05/28/1997	04/30/2001	5	-	-	-	-	-	-	-	-
28	17" Sony Computer Monitor	07/01/1997	06/30/2001	5	139	139				139		139
22	Computer Upgrade - Various	07/01/1997		5	1,512	1,512			25	1,487		1,512
27	Computer Upgrade - Various	08/27/1997		5	926	926				926		926
21	Various Computer Upgrades	10/07/1997		5	318	318				318		318
24	Computer Upgrade - Various	01/13/1998		5	796	796				796		796
20	Pentium Pro Upgrade	01/31/1998		5	1,246	1,246				1,246		1,246
37	Computer (Pentium 200)	04/01/1998		5	-	-	-	-	-	-	-	-
31	Hitachi VisionBook Pro (Laptop Computer)	10/05/1998	06/30/2001	5	2,664	2,664				2,664		2,664
30	Computer (Dell Dimension)	11/06/1998		5	2,862	2,862				2,862		2,862
50	Computer (Dell Dimension XPS T450MHz Pentium	07/06/1999		5	1,673	1,673				1,673		1,673
40	Computer (Tiger Pentium III)	12/31/1999		5	1,400	1,400				1,400		1,400
41	GB SCSI Tape Drive	03/31/2000		5	999	999				999		999
42	Computer (Tiger PIII-500)	05/31/2000		5	999	999				999		999
43	Computer (Tiger PIII-500)	05/31/2000		5	999	999				999		999
81	Tiger Pro Series (Computer)	04/01/2001		5	1,086	1,086			164	1,988		1,096
106	Sony R505 Notebook Computer	03/19/2002		5	2,621	2,621			513	322		1,911
107	AMD Duron 1.3 Ghz Computer	09/23/2002		5	582	582			116	342		439
109	AMD XP 2000+	01/31/2003		5	709	709			142	142		484
113	AMD Athlon 2600 computer	10/20/2004		5	524	524			105	32		137
114	AMD 3000 Sempron Server	04/13/2005		5	640	640			128	101		229
118	3 AMD 2800 Computers & Parts	03/14/2006		5	1,200	1,200	1200		72	-		72
119	Acer Laptop B150	04/17/2006		5	1,309	1,309	1309		55	-		55
120	Acer Laptop	06/13/2006		5	742	742	742		7	-		7
121	2 Samsung 80G Laptop Hard Drives	06/14/2006		5	260	260	260		3	-		3
<b>Subtotal Computer Hardware: (26)</b>					\$ 24,415	\$ 27,928	\$ 3,511	\$ -	\$ 1,330	\$ 21,344	\$ -	\$ 22,674
<b>Computer Software</b>												
51	Office 2000 Software	07/08/1999		3	1,128	1,128				1,128		1,128
44	DonorPerfect Software	12/31/1999		3	7,478	7,478				7,478		7,478
45	Adobe PageMaker Plus Software	05/12/2000		3	458	458				458		458
110	Upgrade DonorPerfect to Visual Edition	09/30/2002		3	3,509	3,509			643	2,866		3,509
112	Parachat Software	08/21/2003		3	1,500	1,500			571	929		1,500
115	Adobe Acrobat 7.0	05/04/2005		3	588	588			199	32		231
116	MS Office Upgrade	10/04/2005		3	580	580	580		139	-		139
117	Listmaster Database Software	03/03/2006		3	5,000	5,000	5,000		550	-		550
<b>Subtotal Computer Software: (6)</b>					\$ 14,670	\$ 20,250	\$ 5,580	\$ -	\$ 2,103	\$ 12,889	\$ -	\$ 14,992
<b>Office Furniture &amp; Equipment</b>												
1	Carousel Projector	01/29/1979	03/30/2001	10	-	-	-	-	-	-	-	-
3	4-Drawer Filing Cabinet	10/28/1983		10	175	175				175		175
4	Computer Table	04/04/1983	03/30/2001	10	-	-	-	-	-	-	-	-
5	4-Drawer Filing Cabinet	11/01/1983		10	150	150				150		150
6	4-Drawer Filing Cabinet	11/01/1983		10	150	150				150		150

