						Short F	orm				1 0	MB No. 1545-1150	0	
Form 990-EZ		R	leturn of	Organia			om Inc	ome Ta	ax	rentan	00 07			
		Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code												
		(except black lung benefit trust or private foundation) ► Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the							On	en to Pub	lic			
		the Treasury	1.40112.222		ene	d of the year may	/ use this form.					Inspection	and the second	
-		ue Service		The organization or tax year beg		use a copy of this		7, and end		7IS.		, 20		
		pplicable:	PROPERTY OF TAXABLE PARTY.	C Name of organi	Contractor of the local diversion of the loca		, 200	r, and cha	COLUMN TWO IS NOT THE OWNER.) Emplo	ver iden	tification number	r	
_	Address c		use IRS label or	Life bo.	1	indution			o girlt this	80	003	4805		
_	Name cha nitial retu	•	print or type.	1100	- ·		delivered to stree	t address) R	oom/suite	Teleph				
_	erminatio		See Specific			ralda A	venue	Not .	0.50			329-018	0	
	Amended		Instruc-	City or town, st		y, and $ZIP + 4$	22		and a la	F Group	Exempt	tion		
		on pending	tions.	Minle tions and 1917	and the particular second second	ompt charitab	lo truste must	attach	G Accourt			Cash Ac	crual	
5	Section	on 501(c)(3)	organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). G Accounting Other (spec											
	-	1	11 1	11 1-1 1	1	Charles a Neo	kan series an	a section of	H Check		if the or	ganization	Ng	
	Vebsit			11 litebo			ades lasbu	igni trillori			to attach			
				y one)—X 501			4947(a)(1) or	527				990-EZ, or 990-		
				n is not a section ation chooses to					ts are norm	ally not r	nore tha	in \$25,000. A ret	urn is	
				e 9 to determine g					d of Form 99	0-EZ.	▶\$	67,009.	87	
AND DESCRIPTION OF	rt I	and a second	and the second se	ses, and Ch	And the second	the second s		Contraction of the second s			the ins	tructions.)	the C	
	1	Contributio	ns, gifts,	grants, and sin	milar amour	nts received.					1	66,504.	00	
-	2			evenue includir			contracts .				2	393.	71	
	3			and assessme	ents				• • • • •		3 4	111.90		
	4		ent income								4	1110 70		
	5a b		mount from sale of assets other than inventory									0		
	c		ost or other basis and sales expenses								5c			
anu	6		pecial events and activities (attach schedule). If any amount is from gaming , check here											
Revenue	а	Gross revenue (not including \$ of contributions												
Å		reported on line 1)								0005		0		
X			Less: direct expenses other than fundraising expenses								6c	unagiolerii biG		
	с 7а		ss sales of inventory, less returns and allowances									Mars and una	1	
1	b		cost of goods sold									0		
	С		Gross profit or (loss) from sales of inventory. Subtract line 7b from line 7a								7c	2	25	
	8 Other revenue (describe ►).									8	7 000	0-		
-	9					the second s	and the second				9 6 10	12,000	00	
	10 11			amounts paid for members		,					11	12.6	8	
S	12	Salaries o	ther com	npensation, an	 nd emplove	e benefits	Leitne tenue se				12	0	20	
sus	13	Profession	al fees a	and other payn	nents to in	dependent co	ontractors .		18,90	,2.28	13	Spaced	Ø	
Expenses	14	Occupancy	y, rent, u	utilities, and ma	aintenance	ni.edin the in	deep es doed	fined or Inc	1.2010/00	al er pe	14	6,057.4	10	
W	15	Printing, p	ublication	ns, postage, a	and shippin	ig	· · · · · · ·		· · · · ·		15	3,061.	2	
	16 17	Other expe	enses (de	escribe ► dd lines 10 th	rough 16	LOAVENI	on or lowly	Martin	7209	48	16 17	Contraction of the second	156	
	18								/		18	9,294.5	52	
Net Assets	19		or (deficit) for the year. Subtract line 17 from line 9									2 2 - 0	A	
As	10		nd-of-year figure reported on prior year's return).								19	3,259.2	14	
Vet	20			net assets or fu							20	0	7/	
	21 rt II			balances at e If Total asse							21		16	
Pa		Dalance		e page 60 of) are \$200,00	o or more		nning of y		(B) End of year		
22	Casl	h savings		stments .						.24	22	9,358.	16	
23		d and buildi								0	23	0		
24				(omp)		95.0		3,195.00		
25		al assets .							3,2	59.2		\$ 12,553	5.76	
26 27	Tota	al liabilities	(describe	ances (line 27	of column	(B) muet ag	ree with line ?)	3 2	059.2	26 4 27	12,553.7	16	
and the second division of the	and the second se	And the second	And the second se	Reduction Act	and the second	NAMES OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY.	and the second		Cat No 10		- 1 21	Form 990-EZ	Include the Party of the Party	

Form	990-EZ (2007)						P	age 2	
	t III Statement of Program Service Accom					Expen	ises		
Wha	t is the organization's primary exempt purpose?	Educate About Dan	igers of Human	n Expiration	(Req	uired fo (4) org			
Desc	ribe what was achieved in carrying out the organizative ribe the services provided, the number of persons ber	ation's exempt purposes. In	a clear and cond	cise manner,	and	4947(a) onal for	(1) tru	usts;	
28	Participation in TVUT Convertio	2 + Navy mer	ting			- abiques	in the second	- mandal -	
	Included Flying in speaker from	1		o Film	10,0119	17,1	15	67	
-	him Tailed massing booth		iterials oft	V67	28a	• • • •		84	
-	in al the train all	- 11 17 1	1.4		204				
29 -	EM Larach Competition to de						reidel III		
	h-man extinction.	has a strate strategies		<u>.</u>		12/	000	,00	
((udes foreign grants, check	here		29a				
30	Created environal boschures		at	ne enstearing	00.00	(c)+08.0	lotion		
		10 ar 20 CC		Completed 5	-	2,5	55 1	6.30	
			100 million 100 million		00-				
7		udes foreign grants, check	nere	. 🕨 📋	30a				
		udes foreign grants, check			31a				
7	otal program service expenses. Add lines 28a th				32	316	72	12	
COLONNAL COL	t IV List of Officers, Directors, Trustees, and Key I			d. See page 6)	
T en	Landin want but to 25 and had been here		(C) Compensation	(D) Contributio	ons to	(E)	Expens	e	
(A) Name and address hours per week devoted to position enter -0) deferred compensation of								account and other allowances	
Ľ	ric Klien, 3550 W. Plumblane	Prestert	0	0	vane r		0		
	1200, NV 89509	60 hours/werk	aloscovasia	le has deut		nôme.V			
	ary searcy 1015 E. Milling U. Fill) vice President	0	0			0		
	(0713 0 Ale, AL 85260	os hours I werk	<u>di nento Messa k</u>						
				CREAT INFO					
		. If any amount is from all	ab dearing deathal a	eduitos bris i	-	Anderson C	3	81	
D			Lington attack MA	e (not includ	- Change	1 a strict	Vac	NI	
Pa				11 60	<u>il an h</u>	1	Yes	NO	
33	Did the organization make a change in its activitie	s or methods of conductin	ng activities? If "Y	es," attach a	a	33	d.,	X	
~	detailed statement of each change		· · · · · · ·		• •	00			
34	Were any changes made to the organizing or gov attach a conformed copy of the changes	•	reported to the IF	AS? IT Yes,"		34		×	
35	If the organization had income from business activities, s			a others) but	not				
55	reported on Form 990-T, attach a statement explaining y				not	Autom			
a	Did the organization have unrelated business gross				and	n leto i		1	
-		hedulet.				35a	0	X	
b	If "Yes," has it filed a tax return on Form 990-T for			to ot for me	blog i	35b	T.		
36	Was there a liquidation, dissolution, termination, c			"Yes," attac	ha	Balarias	2	~	
	statement			into pris end	i, lanoi	36		×	
37a	Enter amount of political expenditures, direct or ind	irect, as described in the ins	structions.	a O	N. VORB			~	
	Did the organization file Form 1120-POL for this y					37b		×	
38a	Did the organization borrow from, or make any loa							~1	
	any such loans made in a prior year and still unpa			return? .		38a		X	
b	If "Yes," attach the schedule specified in the line			h					
-	involved	of year (rom line 27, col			in sis.	-			
39	501(c)(7) organizations. Enter: Initiation fees and capital contributions included o	n lino 9	39	a					
	Gross receipts, included on line 9, for public use				TO Stor				
	, , , , , , , , , , , , , , , , , , ,				1.5				

Form **990-EZ** (2007)

Form	990-EZ	(2007)						Page 3
Par	rt V	Other Information (Note the stater	nent requirement in Ger	neral Instru	uction V.)	(Conti	inued)	
40a		c)(3) organizations. Enter amount of tax im on 4911 ▶ ; section 4						
b	501(c	c)(3) and (4) organizations. Did the organization or did it become aware of an excess benefi						
с		r amount of tax imposed on organization rear under sections 4912, 4955, and 4958						
		r amount of tax on line 40c reimbursed by				0		
		rganizations. At any time during the tax ye action?						40e ×
41 42a	List the	ted at \blacktriangleright 3550 \checkmark Plank Land			Telep	phone r	10. • (7	75,329-0180
		ted at ► <u>5550 contract</u> Can by time during the calendar year, did the o						
d		a financial account in a foreign country	(such as a bank account,	securities a		or othe	r financi	
		es," enter the name of the foreign country			And Sector	1990 (M	8. 1993 A.A	
		the instructions for exceptions and filing r				~ ~		42c ×
С		ny time during the calendar year, did the c es," enter the name of the foreign country		fice outside	e of the U	.5.7		. 420
43	Sectio	ion 4947(a)(1) nonexempt charitable trusts	filing Form 990-EZ in lieu					▶□
	2	Under penalties of perjury, I declare that I have ex and belief, it is true, correct, and complete. Decl	amined this return, including acco	ompanying scl	hedules and	stateme	nts, and to	the best of my knowledge eparer has any knowledge.
Plea Sigr						N	1971:	5,2008
Her		Signature of officer Eric Klien, Pressi	Arat			Date		
		Type or print name and title.		ate	Check if		Dronovor's	CON as DTIN (Cap Cap Inst V)
Paid		Preparer's signature		ale	self- employed		Preparer s	SSN or PTIN (See Gen. Inst. X)
Prep Use	arer's	Firm's name (or yours				EIN	•	
036	Only	if self-employed), address, and ZIP + 4			ł	^o hone no	. ► ()
								Form 990-EZ (2007)
								1 1 . 5. 22
								maginthis air