HUMANEWATCH.ORG

		000		Return of Organization Exe	mpt Fro	m inc	ome Tax	(	OMB No. 1545-0047
Fon	n	990		ection 501(c), 527, or 4947(a)(1) of the Into	•				
		**		benefit trust or privat			олооро		2007
	ť	Į.		condit tract of privat	e ionination	,			
•		of the Treasury	▶ Tho	maninalian may have to use a second this		··- • · · · · · · ·			Cype (accomplished)
men		venue Service		organization may have to use a copy of this	s return to sa			quirements.	Charles of the Control of the Contro
	_	or the 2007 calenda	سسسن		·	, 2007, 8	nd ending	<del>,</del>	. 20
	Bo	Check if applicable:	Please use IRS	C Name of organization				D Employer identificati	ion number
	<u></u> ^	ddress change	label or	The Species Survival Networ	rk			52-21337	13
	ן א	fame change	print or	Number and street (or P O, box if mail is not delive	red to street add	ress)	Room/suite	E Telephone number	11120
	<u> </u>	nitial return	See	2100 L Street, NW				(301) 258	1430
	□ т	ermination	Specific Instruc-	City or town, state or country, and ZIP + 4				F Accounting method:	X Cash Accrual
		vnended return	tions.		C 20036	-8414		Other (specify)	<b>•</b>
	$\overline{\sqcap}$ ,	Application pending	Section	501(c)(3) organizations and 4947(a)(1) nonexempt ch	aribabha	Mondile	on and named	to section 527 organiz	ellene
•				ust atlach a completed Schedule A (Form 990 or 990		i	• •	-	Yes X No
						ł	this e group retu		
0 14	ebsite:	www.asn.o	***				Yes," enter num		<del></del>
	-			vI 2 . 4.	<del></del>		e all affiliates inc "No " attach a fe	tuded? 1 See instructions)	YesNo
		fion type (check only one		X 501(c) ( 3 ) ◀(Insert no ) 4847(a)(1)		1	this a separate n	-	
K C	eck he	ere	ganization is no	of a 509(a)(3) supporting organization and its gros	18	on	anization cover	ed by a group ruling?	Yes X No
rec	eipts e	are normally not more th	nan \$25,000. A	return is not required, but if the organization chooses		l Gr	oup Exemption I	tumber 🕨	
to	file a re	sturn, be sure to file a com	plete return.	· · · · · · · · · · · · · · · · · · ·	<del></del>	Mr C	heck ▶∭ if	the organization is	s not required
		celpts: Add lines 6b, 8b, 9b	, and 10b to lin	296,637		to	attach Sch.	B (Form 990, 990-	EZ, or 990-PF).
		Revenue, Ex	penses,	and Changes in Net Assets or F	und Balar	1008	(See the ins	tructions.)	] [ ]
	1			I similar amounts received:					
	а	Contributions to do	nor advised	funds			1a		
	ь	Direct public suppor	rt (not inclu	ded on line 1a)			1b	106,956	
	c	Indirect public supp	•	·			10		
	d		-	nts) (not included on line 1a) · · · · ·			1d		
	-	Total (add lines 1a			e		<del></del>	· · · · · · · 1e	106,956
	2				·	00)	,	) <del></del> -	<del></del> 11.
	_	<del>-</del>		ding government fees and contracts (from	Part VII, line	93) •	• • • • • •	2	159,186
	3	Membership dues a			• • • • • •	• • • •	• • • • •	3	30,495
	4			rary cash investments - · · · · · ·	• • • • • •	• • • •	• • • • • •	· · · · · · <u>4</u>	<u> </u>
	5	Dividends and inter	est from se	curities · · · · · · · · · · · · · · · · · · ·	• • • • • •	• • • •	• • • • • •	5	
	6a	Gross rents • • •	• • • • •		• • • • •	• • • •	6a		
	þ	Less: rental expens	es · · ·		• • • • • •	• • • •	6b		
R	C	Net rental income o	r (loss). Sul	btract line 6b from line 6a · · · · · ·		• • • •		• • • • • • 6c	
8	7	Other investment in	come (desc	xibe 🕨				) [7	
6	8a	Gross amount from	sales of as	sets other	(A) Secui	rities	(E	3) Other	
U		than inventory					8a		
	b	Less: cost or other	basis and s	ales expenses	<b>—</b>		8b		
		Gain or (loss) (attac		•			8c		
	d			e 8c, columns (A) and (B)				8d	
	9			ttach schedule). If any amount is from gan	ning check h	ere 🕨			
	-	Gross revenue (not		-	iing, check fi	016			
	-	•	•	b)		1	9a		
	L	•							
	p	Less: oliect expens	es other tha	in fundingsing expenses		• • • • •	9b		
	C			ial events. Subtract line 90 from line 9a	• • • • • •	• • • •		9c	
	10a		ntory, les <b>s</b> r	eturns and allowances · · · · · · · ·	• • • • • •	• • • •	10a		
	b	Less: cost of goods	sold	ું - MAY • <b>2 · 0</b> · 2008 ·   બ્	• • • • • •	• • • •	10b		<b>&amp;</b>
	C	Gross profit or (loss	) from sale:	of inventory (attach schedule). Sübiract II	ne 10b from	line 10a		• - • • • -   100	<u>:</u> _
	11	Other revenue (from	n Part VII) li	ne 103)		• • •		• • • • • • 11	
	12	Total revenue. Add	lines 1e, 2,	3, 4 (3) (6) D (2) And 10 L Jand 11 1		• • • •		- • • • • • 12	296,637
E	13	Program services (I			• • • • •	••••	• • • • •	13	346,952
E X	14	•		n line 44, column (C))				14	9,323
P e n	15	-		mn (D)) • • • • • • • • • • • • • • • • • •				15	1,068
8	16		-	chedule) · · · · · · · · · · · · · · · · · · ·				16	
	17	Total expenses. Ad	•	•				ļ	
N				Subtract line 17 from line 12 · · · · ·					
N	18		•						<del>                                     </del>
A	19			beginning of year (from line 73, column (A			• • • • •	<del></del>	
å	20	_		fund balances (attach explanation) - • •				20	
<u>.</u>	21			end of year. Combine lines 18, 19, and 20		• • • •	• • • • •	• • • • •   21	
For	Priva	cv Act and Paperwo	rk Reduction	on Act Notice, see the separate instruction	18.		FFA		Form 990 (2007)

DEC.	Functional Expenses organizations and section					
	Do not include amounts reported on line	11 494 /	(a)(1) nonexempt ca			e the instructions.)
1	6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundralsing
22.0	Grants paid from donor advised funds (attach schedule)	<b>FEET</b>		Services	and general	
** 4	(cash \$ noncash \$					
		20-		,		
32 h		22a				
22 U	Other grants and allocations (attach schedule)		ļ			
	(cash \$		ļ			
	If this amount includes foreign grants, check here	22b	<del></del>			
23	Specific assistance to individuals (attach		ļ			
	schedule)	23		<del></del>		
24	Benefits paid to or for members (attach	ì	İ			<b>并是一个主要的意</b>
	schedule) · · · · · · · · · · · · · · · · · · ·	24				
25 a	Compensation of current officers, directors,		i			
	key employees, etc. listed in Part V-A	25a				
b	Compensation of former officers, directors,	[ ]				
	key employees, etc. listed in Part V-B · · · · · · · ·	25b				
¢	Compensation and other distributions, not					
	included above, to disqualified persons (as		Ĭ			
	defined under section 4958(f)(1)) and persons					
	described in section 4958(c)(3)(B) - · · · · · · · · · ·	25c				
26	Salaries and wages of employees not included					
	on lines 25a, b, and c	26	105,709	100,385	4,259	1,06
27	Pension plan contributions not included on					
	lines 25a, b, and c	27				
28	Employee benefits not included on lines					
	25a - 27 · · · · · · · · · · · · · · · · · ·	28			u.	
29	Payroll taxes · · · · · · · · · · · · · · · · · · ·	29		<del></del>		
30	Professional fundralsing fees	30				
31	Accounting fees	31	700		700	
32	Legal fees · · · · · · · · · · · · · · · · · ·	32				
33	Supplies · · · · · · · · · · · · · · · · · · ·	33	46,112	46,112		<del></del>
34	Telephone · · · · · · · · · · · · · · · · · · ·	34	647	638	7	<del></del>
35	Postage and shipping	35	47	42		
36	Occupancy	36				
	Equipment rental and maintenance	37		····-		
37 			4 601	4 601		
38	Printing and publications	38	4,621	4,621		<del></del>
39	Travel	39	26,932	26,932		
40	Conferences, conventions, and meetings	40	161,983	161,983		
41	Interest · · · · · · · · · · · · · · · · · · ·	41				
42	Depreciation, depletion, etc. (attach schedule) • • • • •	42				
43	Other expenses not covered above (itemize):	1.1				
8	Bank Fees	43a	2,468		2,468	
þ	Training	43b	1,475	1,475		<del></del>
C	Dues & Subscriptions	43c				
d	General expenses	43d				·
ø	Insurance	43e	5,335	3,450	1,885	
f	Translation	43f	1,314	1,314		
g	Website expenses	43g				
44	Total functional expenses. Add lines 22a					
	through 43g (Organizations completing	1				
	columns (B)-(D), carry these totals to lines					
	13-15)	44	357,343	346,952	9,323	1,06
Joint	Costs. Check ▶ if you are following SOP 98-2.			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	ny joint costs from a combined educational campaign and fund	fraisino	solicitation reported	l in (B) Program sen	ices? · · · ·	· ▶ ☐Yes ☐N
	s," enter (I) the aggregate amount of these joint costs \$			ount allocated to Pro		
	ne amount allocated to Management and general \$			amount allocated to	_	
, 1	o amount of the second formal to the second of the second			EEA	· arranging w	Form 990 (2007

	Statement of Program Service Accomplishments (See the Instructions.)	
	m 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a	
	ticular organization. How the public perceives an organization in such cases may be determined by the information presented	
	its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's	Į
Wh	grams and accomplishments.  at is the organization's primary exempt purpose? Consrv. of endangered species	Program Service
	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number	Expenses (Required for 501(c)(3) and
	tients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4)	(4) orgs., and 4947(a)(1)
org	anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	trusts; but optional for others )
8	See SERVICES	
		1
		<u> </u>
	(Grants and allocations \$ ) If this amount includes foreign grants, check here	346,952
b		1
		İ
		}
		1
	(Grants and allocations \$ ) If this amount includes foreign grants, check here	
C		
		1
		}
		İ
		· I
	(Grants and allocations \$ ) If this amount includes foreign grants, check here	
đ		
		1
		1
		1
	(Grants and allocations \$ ) If this amount includes foreign grants, check here	
0	Other program services (attach schedule)	1
_	(Grants and allocations \$ ) If this amount includes foreign grants, check here	
1	Total of Program Service Expenses (should equal line 44, column (B), Program services)	346,952
	EEA	Form 990 (2007)

Fit	REAL PROPERTY.		<del></del>	<del></del> -		
	Note:	Where required, attached schedules and amounts within the de	scription	(A)	1	(B)
	1	column should be for end-of-year amounts only.  Cash - non-interest-bearing		Beginning of year		End of year
	46		<u>~</u>	136,139	45	75,433
	46	Savings and temporary cash investments	• • • • • • • • • • •		46	
	<b>!</b>					
	47 a	Accounts receivable 47a				
	b	Less: allowance for doubtful accounts 47b			47c	
						·
	48 a	Pledges receivable 48a				İ
	ь	Less: allowance for doubtful accounts 48b			48c	
	49	Grants receivable · · · · · · · · · · · · · · · · · · ·			49	
	50 a	Receivables from current and former officers, directors, trustees	s. end			
		key employees (attach schedule)	•		60a	[
Α	ь	Receivables from other disqualified persons (as defined under	<u> </u>		-	
8	-	4958(f)(1)) and persons described in section 4958(c)(3)(B) (atta			50b	
8	51 a	Other notes and loans receivable (attach				
9		schedule) · · · · · · · · · · · · · · · · · · ·	1			
t	١,	Less: allowance for doubtful accounts 61b		ŀ	84-	
R	52	Inventories for sale or use			51c	
•	53	Prepaid expenses and deferred charges	1_		53	<del>-</del>
	i		Cost   FMV	···		
		Investments - publicity-traded securities   Investments - other securities (attach schedule)			54a	<del></del>
	- b		- Cost   I-WV		54b	<del></del>
	05 H	investments - land, buildings, and equipment: basis 55a		i		
	١.	<b></b>				
	P	Less: accumulated depreciation (attach				
		schedule) 55b	L		55c	
	66	Investments - other (attach schedule)			56	<del></del>
	i	Land, buildings, and equipment: basis • • • • • • • 57a				
	Ь		1			
	l	schedule)		····	57c	
	58	Other assets, including program-related investments	. 1			
	ł	(describe >	)		58	
	59	Total assets (must equal line 74). Add lines 45 through 58 •		136,139		75,433
L	60	Accounts payable and accrued expenses			60	
į	61	Grants payable • • • • • • • • • • • • • • • • • • •			61	
8	62	Deferred revenue • • • • • • • • • • • • • • • • • • •	L-		62	<del> </del>
ī	63	Loans from officers, directors, trustees, and key employees (att				
- 1		schedule)			63	
Į	64 a	Tax-exempt bond liabilities (attach schedule) • • • • • • • •			64a	
ı	b	Mortgages and other notes payable (attach schedule) • • • •	•••••		64b	
	65	Other liabilities (describe			65	
8				_		_
	66	Total flabilities. Add lines 60 through 65		<u> </u>	66	0
	Orga	nizations that follow SFAS 117, check here	ete lines			
	]	67 through 69 and lines 73 and 74.	Ì			<b>55 400</b>
l F	67	Unrestricted	• • • • • • • • • • • • • • • • • • • •	136,139		75,433 0
u	68	Temporarily restricted • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		68	0
ď	69	Permanently restricted		q		<u>`</u>
١ _		nizations that do not follow SFAS 117, check here	•			
B	i	complete lines 70 through 74.	ļ	:		
<b>)</b>	70	Capital stock, trust principal, or current funds	· · · · · · · · · · · · · · · · · · ·		70	
a	71	Pald-in or capital surplus, or land, building, and equipment fund	<b>-</b>		71	<u> </u>
c	72	Retained earnings, endowment, accumulated income, or other	<del> -</del>		72	
9 6	73	Total net assets or fund balances. Add lines 67 through 69 or	,			
•	l	70 through 72. (Column (A) must equal line 19 and column (B)	must	136,139		75,433
	74	equal line 21)	172	136,139		75,433
_	74	Total liabilities and net assets/fund balances. Add lines 66 and		130,139	<b>/</b> -	Form 990 (2007)
		E	EA .			, 0,,,,, 400 (2001)

Fon	n 990 (2007) The Species Survival Network					52-23	133713	Page 5
	Reconciliation of Revenue per A instructions.)	udited Fi	nancial S	tater	nents With Rev	renue per l	Return	(See the
а,	Total revenue, gains, and other support per audited finan	icial stateme	nts • • •		• • • • • • • • •	· · · a		296,637
b	Amounts included on line a but not on Part I, line 12:							
1	Net unrealized gains on investments • • • • • • • • • • • • • • • • • • •			b1				
2	Donated services and use of facilities	• • • • •	• • • • •	b2				
3	Recoverles of prior year grants	• • • • •		b3				
4	Other (specify):				1			
				b4				
	Add lines b1 through b4 · · · · · · · · · · · · · · · · · ·	• • • • •	• • • • • •	• • •	• • • • • • • • •	· · · b		
C	Subtract line b from line a - · · · · · · · · · · · · · · · · · ·	• • • • • •		• • •	· · · · · · · · · · ·	с		296,637
d	Amounts included on Part I, line 12, but not on line a:							
1	Investment expenses not included on Part I, line 6b •	• • • • • •	• • • • • •	d1				
2	Other (specify):							
				d2				
	Add lines d1 and d2 · · · · · · · · · · · · · · · · · ·		• • • • • •	• • •		• • • d		
0	Total revenue (Part I, line 12). Add lines c and d · ·	• • • • • •	• • • • •	• • •	· · · · · · · · · · · ·	• <b>▶</b> e		296,637
	Reconciliation of Expenses per A		ancial S	taten	ents With Exp	enses per	Return	
a	Total expenses and losses per audited financial statement	nts · · ·	• • • • •	• • •	• • • • • • • • •	· · · a		357,343
b .	Amounts included on line a but not on Part I, line 17:							
1	Donated services and use of facilities	• • • • • •	• • • • • •	b1	<del></del>			
2	Prior year adjustments reported on Part I, line 20 · · ·			b2				
3	Losses reported on Part I, line 20 · · · · · · · ·	• • • • • •	• • • • •	b3				
4	Other (specify):	<del> </del>			ı			
	Addition by the second			_b4				
_	Add lines b1 through b4	• • • • • •	• • • • •	• • •	• • • • • • • • • •	ь		257 242
C	Subtract line b from line a	• • • • •	• • • • • •	• • •		· · · · · · · · · · · · · · · · · · ·		357,343
u _	Amounts included on Part I, line 17, but not on line a:			امدا				
1	Investment expenses not included on Part I, line 6b	• • • • •	• • • • •	d1	. <del> </del>			
2	Other (specify):		<del></del>	d2				
	Add lines d1 and d2 · · · · · · · · · · · · · · · · · ·		<del></del> -	02		d		
_	Total expenses (Part I, line 17) Add lines c and d			• • •				357,343
	The state of the s			<del></del>	s (List each perso		officer d	
ii ex	Current Officers, Directors, Truste or key employee at any time during the year e				•		i vilicei, a	irector, irustee,
	(A) Name and address	T	(B) werage hours position		(C) Compensation (If not paid, enter	(D) Contribution employee bene plans & deferre	efit (C)	Expense account other allowances
Wil	liam Travers	Presid			0-1	COmpensation	(ELITA)	
-	rove House Fo We		ه آ	)	1 6	d	ď	0
	esa Telecky	Vice P				<del> </del>	-	
	0 L Street NW Washington DC		٦	)	1 (	ł	d	0
	m Roberts	Treasu	rer		<del> </del>	<del> </del>		
PO	Box 32160 Washington DC	20007	7 0	1		4	d	0
Wan .	Carroll Muffet	Secret	ary					
702	H Street NW Washington DC	20001	<u> </u>				d	0
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Form 990 (2007)

. •						
Form	990 (200	) The Species Survival Network			52-2133713	Page 6
175	1000	Current Officers, Directors, Trustees, a	nd Key Employees	(continued)		Yes No.
75 a		total number of officers, directors, and trustees permi	itted to vote on organizati	on business at boa	ard	
	meetings					
b	_	fficers, directors, trustees, or key employees listed in	Form 900 Part \/. A or hi	inhaet components	<del></del>	
Ŭ				•	<b>X</b>	
		is listed in Schedule A, Part I, or highest compensated	•	•		
		rs listed in Schedule A, Part II-A or II-B, related to each				
		nips? If "Yes," attach a statement that identifies the inc			• • • • • • • •	• 75b X
C	Do any o	fficers, directors, trustees, or key employees listed in I	Form 990, Part V-A, or hi	ghest		
	compens	ated employees listed in Schedule A, Part I, or highes	t compensated professio	nai and other		
	independ	ent contractors listed in Schedule A, Part II-A or II-B,	receive compensation fro	m any other		
	organiza	ions, whether tax exempt or taxable, that are related t	o the omanization? See t	the instructions for		
		tion of "related organization."				75c X
		ittach a statement that includes the information descri	ihad in the instructions			
The state of	Commission of	organization have a written conflict of interest policy?			· · · · · · · · · · · · · · · · · · ·	• 75d X
	AV THE	Former Officers, Directors, Trustees, a				
		Benefits (If any former officer, director, trustee, or	r køy employee received :	compensation or of	ther benefits (descri	ibed b <del>el</del> ow)
		during the year, list that person below and enter the	amount of compensation	or other benefits in	n the appropriate co	lumn.
		See the instructions.)				
				(C) Compensation	(D) Contributions to	(E) Expense
		(A) Name and address	(B) Loans and Advances	(if not paid, enter -0-)	employee benefit plans & deferred compensation plans	account and other allowances
			<del>                                     </del>	61201-07	Compensacou pians	a contained
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<del>cionas</del>			<u> </u>	<u> </u>	<u>l</u>	
温煦		Other Information (See the instructions.)				Yes No
76	Did the o	rganization make a change in its activities or methods	of conducting activities?	If "Yes," attach a		
	detailed:	statement of each change				· 76 X
77	Were an	changes made in the organizing or governing docum	nents not reported to the	RS?		- 77 X
		attach a conformed copy of the changes.				
79 0	-	rganization have unrelated business gross income of	\$1,000 or many during th	a veer covered by		
108		•	a 1,000 of filore during th	e year covered by		- 78a X
	this retur				••••	
b	-	has it filed a tax return on Form 980-T for this year?	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • •	- 78b N/A
79	Was the	e a liquidation, dissolution, termination, or substantial	contraction during the ye	ar? If "Yes," attach	Ì	
	a statem	ant ••••••••••••••••••••••••••••••••••••	<b>.</b>	· • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	· 79 X
80 a	is the on	anization related (other than by association with a sta	itewide or nationwide org	anization) through		
	-	membership, governing bodies, trustees, officers, etc				
	organiza					- 80a X
	•	enter the name of the organization				
J	II ( <b>62)</b>	onter the figure of the organization	and check whether It	e D evemot o	r 🔲 nonexempt	

81b

Form 990 (2007)

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

b Did the organization file Form 1120-POL for this year?

Form	990 (2007) The Species Survival Network	52-2133713	F	age 7
	Other Information (continued)		Yes	No
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?	82a	1	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.) · · · · · · · · · · · · · · · · · · ·			
83a	Did the organization compty 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	
84a	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?	84b	N/A	
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A	
	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			
đ	Section 162(e) lobbying and political expenditures			
9	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices · · · · · · · · 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
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?	85h	N/A	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 · · · · 86a			
b	Gross receipts, included on line 12, for public use of club facilities			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders · · · · · · · · 87a			
b	Gross income from other sources. (Do not net amounts due or paid to other			
	sources against amounts due or received from them.) 87b			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			
	partnership, or an entity disregarded as separate from the organization under Regulations sections			
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		<u> </u>
Þ	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the	. 1		
	meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	यस्यक्रम् स्ट	X
89a	501(c)(3) organizations. Enter: Amount of tax Imposed on the organization during the year under.			
_	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
Þ	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	89b		X
C	Enter: Amount of tax imposed on the organization managers or disqualified			
_	persons during the year under sections 4912, 4955, and 4958 · · · · · · · · · · · · · · · · · · ·			
đ	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
0	transaction?	89e	-	X
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?			X
9	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the			
•	supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	89g		X
90a	List the states with which a copy of this return is filed	<u> </u>		
b	Number of employees employed in the pay period that includes March 12, 2007 (See			
	instructions.)	806		
91a	The books are in care of ▶ % Teresa Telecky Telephone no. ▶	301-217-0534		
	Located at ▶ 401 Baltimore Road Rockville MD ZIP+4 ▶ 20	950		
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		Yes	No
	account)?	91b	-	X
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
	EEA	Form	990 (	2007)

Form t	990 (2007) The Species Surviv	val Network				52-2133713	Page 8
	Other Information (conti	nued)			<del></del>		Yes No
C	At any time during the calendar year, did t	the organization r	naintain an office outsi	de of the United S	tates? · · · ·		91c X
•	' If "Yes," enter the name of the foreign cou	entry 🕨					
92	Section 4947(a)(1) nonexempt charitable	trusts filing Form	990 in lieu of Form 10	41 - Check here	• • • • • • •	<del></del>	••••▶ □
	and enter the amount of tax-exempt interes	est received or ac	crued during the tax ye	ar ····	• • • • • •	92	
	Analysis of Income-Proc	lucing Activi	ties (See the instruc	tions.)			
Note:	: Enter gross amounts unless otherwise		i businese income		section 512, 513, or 1	514	(E)
indlca	ated.	(A)	(B)	(C)	(D)		Related or
93	Program service revenue:	Business code	Amount	Exclusion code	Amount		xempt function Income
a	COP 14			6			84,875
b	Regional Work			06	<del></del>		74,311
c							
d			·	1			
e			· · · · · · · · · · · · · · · · · · ·				<del></del>
f	Medicare/Medicaid payments						——————————————————————————————————————
g	Fees and contracts from government agencies			<del>                                     </del>			
94	Membership dues and assessments · ·	l		3			30,495
96	Interest on savings & temporary cash investments			1			<del>- 1</del>
96	Dividends and Interest from securities •				<del></del>		<del>       </del>
97	Net rental income or (loss) from real estate:						
a	debt-financed property	- Carlo Carlo Control Carlo Carlo			Balana (Balana 2012)	derica finissia desi escendindind	
b	not debt-financed property	<del> </del>		<del></del>		<del></del>	<del></del>
98	Net rental income or (loss) from personal property	· · · · · · · · · · · · · · · · · · ·	<del></del>	<del> </del>	· · · · · · · · · · · · · · · · · · ·		<del></del>
99	Other investment income • • • • • •	<del>                                     </del>		<del></del>			<del></del>
100	Gain or (loss) from sales of assets other	<del>                                     </del>					<del>}</del>
101	Net Income or (loss) from special events				<del></del>		<del>  </del>
102	• •	<b></b>					
103	Gross profit or (toss) from sales of inventory  Other revenue: a	<u> </u>	· · · · · · · · · · · · · · · · · · ·				<del></del>
.00	Culci levelide a	<del></del>		-			<del></del>
ř		<del> </del>	<del></del>				<del></del>
ď		<del></del>		+			<del></del>
-		l			<u> </u>		<del></del>
104	Subtotal (add columns (B), (D), and (E))	11277 CHARLES	·	resonantia de la composición dela composición de la composición de la composición de la composición de la composición dela composición de la composición dela composición dela composición de la composición de la composición de la composición dela composición de la composición dela composición dela composición dela composición dela composición dela composición dela compos			189,681
105	Total (add line 104, columns (B), (D), and				L		189,681
	Line 105 plus line 1e, Part I, should equal t	,	o 49 Dorti			· • ———	205,002
Acres de la constante de la co					(Coo the Inc	taretions \	<del></del>
Line	of the organization's exempt purpo				riportantiy to trie	accomposiment	{ <del> </del>
93a	Y				h 7		<del></del>
93a					cry		<del></del>
93b							<del></del>
93b				ouservacton (	<u> </u>		
					(Coo the less	forestone \	
			diaries and Disre			(O)	(F)
	Name, address, and EIN of corporation partnership, or disregarded entity	on,	(B) Percentage of ownership interest	(C) Nature of	activities	(D) Total income	(E) End-of-year assets
			%				
			%				
			%				
			%				
	Information Regarding T	ransfers Ass	oclated with Pers	onal Benefit	Contracts (S	ee the Instructions	3.)
(a)						t contract? •	Yes X No
(b)		*					Yes X No
No	te: If "Yes" to (b), file Form 8870 and Form	4720 (see instru	ctions)				
				EEA			Form 990 (2007)
	•						

orm 990 (2						F	Page
	Information Registration is a controlling organization		fers To and From Con in section 512(b)(13).	trolled Entities. Co	mplete only if the organiza	ation	
1						Yes	N
			ers to a controlled entity as de w for each controlled entity.	fined in section 512(b)(13	) of		
7	(A)	no somedato som	(B)	(C)			1
ł	Name, address, of ea	ach	Employer Identification	Description	of .	(D)	
	controlled entity		Number	transfer	Amou	nt of transf	er
		<del></del>				·	
			-				
			_	<u>.</u>		<del></del>	
	Totals						
				A. Paris and making himselves and the A. T. Marie and the A. A.		Yes	No
			sfers from a controlled entity a				
512		s," complete the	schedule below for each contr		<del></del>		<u> </u>
-	(A) Name, address, of ea	ach	(B) Employer Identification	(C) Description	ed .	(D)	
1	controlled entity		Number	transfer	Amou	nt of transf	or
+		<del></del>			<del></del> -		
			]		}		
. <b> </b> -			4				
` <del> </del>			-				
;	<del></del>	<del></del>	1				
	Totals						
						Yes	No
08 Did	the omenization have a his	ndina written cor	tract in effect on August 17, 2	YOR covering the interest			
	s, royalties, and ennuities	-		, 00 (01 (1 m m m m m m m m m m m m m m m m m m			ŀ
	Under penalties of perjury, I dec	clare that I have exam	fried this return, including accompanyi				
	and belief, it is true, correct, and	i comptete Declaration	on of preparer (other than officer) is ba	ed on all information of which pr			_
lease	Mere	oa Y/1.	deley			12-08	<u></u>
ign	Signature of officer	40.4	-11	1) 00 11	→ Date		
ere	Teles		Telectup,	lice Presiden	<u> </u>		
	Type or print name and titl	) <del>0</del> .			Preparer's SSN or PTIN	/See Con Inc	1 Y
	Preparer's signature	ashna	ncb 05-	Check if self- employed	Frequents Son w Plin	(200 Gair III	-~
ald	1 -0 Y ( )AD 40		PA Services LLC		EIN		
reparer's							
reparer*e	Firm's name (or yours if seti-employed),	1 Research	n Court Suite 450		Phone no 🕨		
'ald 'reparer's ise Only	Firm's name (or yours	1 Research			866441504	14 Form 990 (	

## **SCHEDULE A** (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 601(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

2007

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Supplementary Information - (See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

ACCING OR DID ON	Jan 12 august			· Eutholox menticants to	WINGE
The Spec	ies Survival Network	52-2133713			
	Compensation of the Five High (See page 1 of the instructions. List each	est Paid Employees (	Other Than Office	rs, Directors, and	i Trustees
(a) Na SONE	me 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
		T		<del></del>	<del> </del>
		<del></del>			
		<u></u>			
<del></del> -		<del></del>	<del></del>	<del> </del>	
<del></del> -	<del></del>			]	
Cotal numbe	or of other employees paid over \$50,000	T			
		est Paid Independent	Contractors for	Professional Sen	ices
	(See page 2 of the instructions. List each				
NONE (	a) Name and address of each independent contractor pa	id more than \$50,000	(р) Тура	of service	(c) Compensation
		<del></del>	<del></del>	ļ	
					<u></u>
				Ì	
		<del></del>			
Total numbe	er of others receiving over \$50,000 for				
	services · · · · · · · · · · · ·				
amis:	Compensation of the Five High				
	(List each contractor who performed services of these services of these services of these services of these services of these services of these services of th		services, whether indivi	duals or	
IONE (	firms, if there are none, enter "None." See a) Name and address of each independent contractor pe		(b) Type	of service	(c) Compensation
		<del></del>			
<del></del>					
				4	
			<del></del>		
Fotal number	er of other contractors receiving over				

\$50,000 for other services

Sche	dule A (Form 990 or 990-EZ) 2007 The Species Survival Network	52-21337	13	F	age 2
	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 filling 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.		1		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.)	<b>.</b>			
a	Sale, exchange, or leasing of property?		2a		X
Þ	Lending of money or other extension of credit?	• • • • •	2b		x
c	Furnishing of goods, services, or facilities?	••••	2c		Х
d	See Part V-A, Form Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? • • • • • • • • • • • • • • • • • • •		2d	х	
9	Transfer of any part of its income or assets?		20		x
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		3a		х
b	Old the organization have a section 403(b) annuity plan for its employees?		3b		<u>x</u>
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve or space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement • • • •		3c		<u>x</u> _
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	• • • •	3d		<u>x</u>
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete				
	lines 4f and 4g · · · · · · · · · · · · · · · · · ·	• • • • •	48		<u>x</u>
b	Did the organization make any taxable distributions under section 4966?	• • • • •	4b		X
c	Did the organization make a distribution to a donor, donor advisor, or related person?	• • • • •	4c		x
đ	Enter the total number of donor advised funds owned at the end of the tax year	••••		<u></u>	
0	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	••••	<del></del>		
1	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	••••			·
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year	••••			

Reason for Non	-Private Four	ndation Status	(See pages 4 through 8	of the instru	ctions.)			
rtify that the organization is not a	private foundation	on because it is: (Ple	ase check only ONE app	licable box.)	· · · · · · · · · · · · · · · · · · ·			
A church, convention of c	hurches, or assoc	ciation of churches. S	Section 170(b)(1)(A)(i).					
A school. Section 170(b)(	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)							
A hospital or a cooperative	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).							
A federal, state, or local g	overnment or gov	vernmental unit. Sect	ion 170(b)(1)(A)(v).					
A medical research organ	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state							
	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.)							
	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.)							
b A community trust. Section	n 170(b)(1)(A)(vi)	. (Also complete the	Support Schedule in Pa	rt IV-A.)				
from activities related to it from gross Investment incorganization after June 30  An organization that is not requirements of section 50  Type I	come and unrelate 0, 1975. See sect t controlled by any	ed business taxable in tion 509(a)(2). (Also y disqualified persons	ncome (less section 511 complete the Support S s (other than foundation the type of supporting o	tax) from but chedule in Parmanagers) a rganization:	sinesses acqui art IV-A.)	red by the		
Provide the foil	owing informatio	on about the support	ed organizations. (See p	page 8 of the	instructions.)			
(a) Name(s) of supported organizat		(b) Employer Identification number (EIN)	(c) Type of Organization (described in lines 5 through 12 above or IRC section)	ls the sup organizatio the sup organiza gove	pported in porting ation's	(e) Amount of support		
	į			Yes	No			
<del></del>		<del></del> -						
	<del></del>		<u> </u>		<del></del>	<del></del>		
al				• • • • •	• • • • ▶			
An organization organized	and operated to	test for public safety.	. Section 509(a)(4). (See	page 8 of th		(Form 990 or 990-EZ) 2		

Sche		ies Survival			52-21337	
	Support Schedule (Complete only	y if you checked a	box on line 10, 11,	or 12.) Use cash r	nethod of account	ing.
Note:	You may use the worksheet in the instructions for or					
Caler	dar year (or fiscal year beginning in) •• •	(a) 2008	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received. (Do					
	not include unusual grants. See line 28.) • • •	170,605	38,061	188,191	93,409	490,266
16	Membership fees received	27,934	36,654	16,559	15,881	97,028
17	Gross receipts from admissions, merchandise	<del></del>	· - · · · · · · · · · · · · · · · · · ·			<del></del>
	sold or services performed, or furnishing of		i			
	facilities in any activity that is related to the organization's charitable, etc., purpose		d	d	له ا	0
18	Gross Income from interest, dividends.					<u>_</u>
	amounts received from payments on securities					
	loans (section 512(a)(5)), rents, royalties,					
	income from similar sources, and unrelated					
	business taxable income (less section 511 taxes) from businesses acquired by the		ŀ			
	organization after June 30, 1975	ĺ	ا	d	d	0
19	Net income from unrelated business		<del> </del>			<del>-</del>
	activities not included in line 18 · · · · · ·	ا ا	d	ď	d	0
20	Tax revenues levied for the organization's					<u>-</u>
	benefit and either paid to it or expended on		ļ			
	its behalf	,			أه	0
21	The value of services or facilities furnished to	<del>-</del>				
	the organization by a governmental unit		i			
	without charge. Do not include the value of		,			
	services or facilities generally furnished to the public without charge	١ ,	) .		٦	0
22	Other income. Attach a schedule. Do not		<del></del>			······································
	include gain or (loss) from sale of capital assets	٥	ا ا	a	d	0
23	Total of lines 15 through 22 · · · · · · ·	198,539	74,715	204,750	109,290	587,294
24	Line 23 minus line 17 · · · · · · · · · · ·	198,539				587,294
25	Enter 1% of line 23	1,985		2,048		
26	Organizations described on lines 10 or 11: a En	ter 2% of amount	in column (e), line 2		▶ 26a	11,746
ь	Prepare a list for your records to show the name of					
	governmental unit or publicly supported organizatio	n) whose total gift	s for 2003 through	2006 exceeded the		
	amount shown in line 26a. Do not file this list with	your return. Enter	the total of all thes	e excess amounts	▶ 26b	
c	Total support for section 509(a)(1) test: Enter line 2	-			▶ 26c	587,294
d	Add: Amounts from column (e) for lines: 18		19			
	22		26b		26d	**************************************
e	Public support (line 26c minus line 26d total) • •	<del></del> ,		<del></del>	26e	587,294
f	Public support percentage (line 26e (numerator) d	ivided by line 26c	(denominator))		26f	100.00%
27	Organizations described on line 12: a For amour		<del>```</del>	at were received fr	om a "disqualified	
	person," prepare a list for your records to show the					person."
	Do not file this list with your return. Enter the sum	of such amounts	for each year:			
	(2006) (2005)		(2004)		(2003)	
b	For any amount included in line 17 that was received	ed from each perso	on (other than "disc	ualified persons").	prepare a list for y	our records to
_	show the name of, and amount received for each ye	ear, 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 the difference between the amount received and the	5 through 11b, as t e lamer amount d	well as individuals.) escribed in (1) or (2	Do not file this lit Lenter the sum of	st with your return. These differences	After computing (the excess
	amounts) for each year:	o larger almount a		,, oncor allo balli o		(
	(2008)(2005)		(2004)		(2003)	
			- ` · <del></del>			
¢	Add: Amounts from column (e) for lines: 15		16			
	17 20		21		▶ 27c	
d	Add: Line 27a total • •	and line 27b total	• •		- · · · ▶ 27d	
8	Public support (line 27c total minus line 27d total)			••••••	▶ 27e	
f	Total support for section 509(a)(2) test. Enter amount		olumn (e)	· > 27f	o	
g	Public support percentage (line 27e (numerator) d				▶ 27g	%
Ď.	Investment income percentage (line 18, column (e			nominator))	▶ 27h	%
28	Unusual Grants: For an organization described in t					
	prepare a list for your records to show, for each year					ef
	description of the nature of the grant. Do not file th	is list with your re	tum. Do not includ	e these grants in li	ne 15.	

1	Private School Questionnaire (See page 9 of the instructions.)			
==	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29	100000	- Table 177
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,			
31	programs, and scholarships?	30	15 40 H	
J.	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way			
	that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	21 21		
	105, please describe, if 140, please explain. (if you need fill a space, attach a separate statement)			
			4	
32	Does the organization maintain the following:			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	1000000	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	一	<b>-</b>	
	basis?	32b		ļ .
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships? • • • • • • • • • • • • • • • • • • •	32c		]
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		15 F		
33	Does the organization discriminate by race in any way with respect to:			
	Students' rights or privileges?			
a	Students' rights or privileges?	33a	<u> </u>	├
_	Admissions policies?	335		
D	Admissions policies? · · · · · · · · · · · · · · · · · · ·	1 335	├─	<del> </del>
	Employment of faculty or administrative staff?	33c	İ	
•	Employment of faculty of authorist auto state?		$\vdash$	<del>                                     </del>
d	Scholarships or other financial assistance? • • • • • • • • • • • • • • • • • • •	33d		1
_	, and the state of			
	Educational policies? · · · · · · · · · · · · · · · · · · ·	339	l	ļ
				<del>                                     </del>
f	Use of facilities?	33f	Ì	1
8	Athletic programs?	33g		
h	Other extracumicular activities?	33h		- Corporate
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
240	Deep the experience manus any financial old or exciptance from a payoramental agree (	34a	]	1
34a	Does the organization receive any financial aid or assistance from a governmental agency?	-	<del>                                     </del>	<del> </del>
ь	Has the organization's right to such aid ever been revoked or suspended?	34ь	l	l
-	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
	is the supported to the state of the substitute and supported and supported assistants.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05			
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

	Lobbying Expenditures by E (To be completed ONLY by an eligible			e page 11 of the i	nstructions.)		
Check	k > a   if the organization belongs to an affilia	<del></del>		necked "a" and "li	mited control*	provisi	ions apply.
	Limits on Lobby (The term "expenditures" mea	•			(#) Affiliated grou totals	4p	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public op		<del></del>	36	1	$\dashv$	
	Total lobbying expenditures to influence a legislative body (direct lobbying)					$\neg \neg$	
	Total lobbying expenditures (add lines 36 and 37)					$\neg \neg$	
39	Other exempt purpose expenditures						<del></del>
40	Total exempt purpose expenditures (add lines 38 and 39)						***************************************
41	Lobbying nontaxable amount Enter the amount from the following table-						
	If the amount on line 40 is-	lobbying nontaxable	amount is-				
	Not over \$500,000 20%		· · · · -				
	Over \$500,000 but not over \$1,000,000 \$10						
	Over \$1,000,000 but not over \$1,500,000 • \$179			The second second			
	Over \$1,500,000 but not over \$17,000,000 - \$22	•		27777			
	Over \$17,000,000 \$1,0			lenner.			
	Grassroots nontaxable amount (enter 25% of line		· · · · · · · · ·	42	<u> </u>		<u> </u>
	Subtract line 42 from line 36. Enter -0- if line 42 is		• • • • • • • •	43			
14	Subtract line 41 from line 38. Enter -0- if line 41 is	more than line 38	• • • • • • • •	44		q	la de la companie de la companie de la companie de la companie de la companie de la companie de la companie de
	Caution: If there is an amount on either line 43 or	line 44, you must file	Form 4720.			e i	
	(Some organizations that made a sec	reraging Period tion 501(h) election d ns for lines 45 through	io not have to cor	nplete ail of the fiv		low.	
	Oct the libit color			res During 4-Year		erlod	
	Calendar year (or	(a)	(b)	(c)	(d)		(e)
	fiscal year beginning in)	2007	2006	2005	2004	1	Total
		/			1	一十	
15	Lobbying nontaxable amount - · · · · · · ·	1 1				ļ	
16	Lobbying ceiling amount (150% of line 45(e)) •						
17	Total lobbying expenditures - · · · · · ·		<del></del>				
48	Grassroots nontaxable amount						
19_	Grassroots ceiling amount (150% of line 48(e)) -						
		1 (		ļ	Ţ	ļ	
50	Grassroots lobbying expenditures • • • • • •	<u> </u>		<u> </u>			
	Lobbying Activity by Nonels (For reporting only by organizations to			age 14 of the instr	uctions.)		
During	g the year, did the organization attempt to influence	e national, state or lo	cal legislation, inc	luding any	Yes	No	Amount
attem	pt to influence public opinion on a legislative matte	er or referendum, thro	ough the use of:				
	Volunteers	• • • • • • • • •	• • • • • • • • •	• • • • • • •	• • •		
b	Paid staff or management (Include compensation	in expenses reported	d on lines c throug	ip pr)	· · ·		
C	Media advertisements • • • • • • • • • • • • • • • • • • •	• • • • • • • • •			· · ·		<u> </u>
đ	Mailings to members, legislators, or the public -			••••	· · ·	<del></del>	
0	Publications, or published or broadcast statement		• • • • • • • •		· · ·	<del></del> -}	
f	Grants to other organizations for lobbying purpose			• • • • • • •	· · ·		
_	Direct contact with legislators, their staffs, govern						
h	Rallies, demonstrations, seminars, conventions, s	-	any other means		40		
ı	Total lobbying expenditures (Add lines c through if "Yes" to any of the above, also attach a stateme						,
	II TES TO BITY OF THE BUOVE, BISO BUBICA B STRUCTURE	ur Aratif a caratiso o					000 or 000 ETA 2007
				EEA	acientis /	A CALCASTION IN	990 or 990-EZ) 2007