Form **990**

Return of Organization Exempt From Income Tax

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

20U/

OMB No. 1545-0047

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	FOI II	ne 2007 C	alendar	year, or tax year beginning	ig	, 2007, and	ending		, 20
В	Check if applicable:		Please	C Name of organization				D Emplo	yer identification number
	Address	use IRS label or Quantum Future Group					30	0204116	
$\overline{\Box}$	Name o	e change print or Number and street (or P.O. box if mail is not delivered to street address) Room/suite					E Teleph	none number	
_		itial return see Chateau St Martin Belacasse						(335	63048231
		Specific City on town and 7ID 4							ing method: Cash Accrual
		ed return	tions.	82100 Castelsarrasin,	Tarn-et-Garonne, Fra	ance			ther (specify)
			• Sec	tion 501(c)(3) organizations	and 4047(a)(1) nanayama	at aboutable	H and I are no		e to section 527 organizations.
Ш.	Applicat	ion pending		sts must attach a completed					n for affiliates? Yes No
G	Websit	e: > ww		tumfuture.net		ŕ	H(b) If "Yes."	enter numb	per of affiliates ▶
		****	w.quur.	tamataremet			H(c) Are all aff		
J	Organi	zation type	(check o	nly one) > 2 501(c) (3)	√ (insert no.) √ 4947(a)(1)) or 🔲 527			t. See instructions.)
ĸ	Check	here ▶ □	if the o	organization is not a 509(a)(3)	supporting organization ar	nd its arose	H(d) Is this a se	eparate retu	rn filed by an
				ore than \$25,000. A return is not			organizatio	on covered l	by a group ruling? 🔲 Yes 🔲 No
	to file a	return, be	sure to file	a complete return.	•		I Group Ex	emption N	úmber ▶
	_						M Check ▶	▶ if	the organization is not required
				s 6b, 8b, 9b, and 10b to lin			to attach	Sch. B (F	Form 990, 990-EZ, or 990-PF).
P	art I	Reven	ue, Ex	penses, and Change:	s in Net Assets or	Fund Bala	nces (See th	ne instru	ctions.)
	1 .	Contribu	utions, g	gifts, grants, and similar	amounts received:				
	а			o donor advised funds		1a			
	b			upport (not included on I		1b	281,84	47	
	1			support (not included or	•	1c			
	4			intributions (grants) (not		1d			
	e			1a through 1d) (cash \$				1e	281,847
	2							2	4,221
	3			revenue including govern			t VII, line 93)	3	4,441
	4						-	7.17	
, "	100							4	***
	5	_				1 - 1		5	
	6a	Gross re				6a		_	
	b			oenses		6b			
	С			ne or (loss). Subtract lin	e 6b from line 6a .			6c	
e	7	Other in	vestme	nt income (describe >)	7	
Revenue	8a	Gross a	mount 1	from sales of assets oth	er (A) Securities	(E	3) Other	_	
Re		than inv	entory			8a			
	b	Less: cos	st or oth	er basis and sales expense	s	8b			
	ŧ			attach schedule)		8c			
	d	Net gain	or (loss	s). Combine line 8c, colun	nns (A) and (B)		_	8d	
	9			d activities (attach schedule			ck here ▶ □		
	а			(not including \$	of	gug, one			
				eported on line 1b)		9a			
	b			penses other than fundra		9b			
	1			(loss) from special event				9c	
	10a			inventory, less returns a		10a	58,91		
	b			oods sold		10b		-	
	1			ss) from sales of inventory			and line 10a	10c	58,912
	11	Other re	venue i	(from Part VII, line 103)					30,912
	12	Total re	venue.	Add lines 1e, 2, 3, 4, 5, 6		 11		10	244.000
	 								344,980
es	13			es (from line 44, column			• , • • • •	13	279,513
Expenses	14	ivianage	rnent ai	nd general (from line 44,				14	32,767
×	15	rundrais	sing (tro	om line 44, column (D))				15	26,512
ш	16 17	Tatal a	is to at	filiates (attach schedule)				16	
				s. Add lines 16 and 44,				17	338,792
Net Assets	18	(18	6,188		
Ass	19	The state of the s					19	(142,375)	
et	20	Other ch	nanges	in net assets or fund ba	lances (attach explan	ation)		20	
_	21	Net asse	ts or fu	nd balances at end of yea	ar. Combine lines 18, 1	9, and 20		21	(136,186)

Part II All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) Statement of Functional Expenses organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.) Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I. services and general 22a Grants paid from donor advised funds (attach schedule) (cash-\$ _____ noncash \$ __ If this amount includes foreign grants, check here $\,\blacktriangleright\,\,\Box$ 22a 22b Other grants and allocations (attach schedule) (cash \$ ______ 8,257 noncash \$ _ If this amount includes foreign grants, check here ightharpoonup8,257 8,257 Specific assistance to individuals (attach 23 24 Benefits paid to or for members (attach 24 25a Compensation of current officers, directors, 25a 8,821 6,616 1,323 key employees, etc. listed in Part V-A . . . 882 **b** Compensation of former officers, directors, 25b key employees, etc. listed in Part V-B . . . c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons 25c described in section 4958(c)(3)(B) . . . 26 Salaries and wages of employees not included on lines 25a, b, and c $\,$ 26 27 Pension plan contributions not included on 27 lines 25a, b, and c Employee benefits not included on lines 28 5,701 25a – 27 28 4,276 855 570 Payroll taxes 29 29 30 30 Professional fundraising fees . . . 31 Accounting fees 31 776 Legal fees 32 3,103 2,327 32 77,784 70,006 33 7,778 33 Supplies 20,104 17.089 34 1.005 2,010 34 Telephone 35 Postage and shipping . . . 35 8,569 7,712 857 71,073 58.635 5,330 7,107 36 Occupancy 37 6,532 4,899 980 653 37 Equipment rental and maintenance. 38 630 630 38 Printing and publications 30,457 4,569 39 24,365 39 1,523 40 Conferences, conventions, and meetings. . . 40 32,749 32,749 41 41 42 43,635 32,726 6,545 4,364 42 Depreciation, depletion, etc. (attach schedule) 43 Other expenses not covered above (itemize): a Advertsing & PR 4,179 3,134 1.045 43a Bank charges & FX gains/losses 8.956 43b 1.343 h 7,612 Foreign taxes and customs charges 788 79 43c 709 C Directors expenses 7.454 5,591 1,118 43d 745 43e 43f 43g Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 338,792 279,513 32,767 26,512 Joint Costs. Check ▶ ☐ if you are following SOP 98-2. If "Yes," enter (i) the aggregate amount of these joint costs \$_ _; (ii) the amount allocated to Program services \$_ (iii) the amount allocated to Management and general \$

; and (iv) the amount allocated to Fundraising \$

Part III Statement of Program Service Accomplishments (See the instructions.)

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

٨ŀ	nat is the organization's primary exempt purpose? (see Explanatory Attachments)	Program Service								
٩IJ	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number	Expenses (Required for 501(c)(3) and								
ot orc	clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) panizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(4) orgs., and 4947(a)(1) trusts; but optional for								
	Academic. Assisted the establishment of a new faculty at the University Paul Sabatier, Toulouse.	others.)								
a	2 papers were published in the area of Quantum Theory. (1) "Quantum Fractals on n-spheres,"									
	A. Jadczyk, (Advances in Applied Clifford Algebra, vol 17 (2007), p. 201-240). (2) "Comments on									
	"Spin Connection Resonance in Gravitational General Relativity"", Gerhard W. Bruhn, Friedrich									
	W. Hehl, Arkadiusz Jadczyk, Acta Physica Polonica B, 39 no 1 (2008), pp. 51-58									
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	27,044								
b	Web based publications - Daily traffic to the QFG and related websites was maintained. The news									
	resource website published 199 editorials and in excess of 20,000 articles. Forum (in 3 languages)									
	activity increased - 590 new users joined. Substantial additions were made to the site and its data-									
	-base in Spanish and French (total 6 languages). 6 overseas research trips to research megaliths									
	and archaeology - data and hypotheses were applied in our web publications and contribute									
	to forthcoming books. Continued to support research and data collection on abnormal psychology.									
	(Grants and allocations \$ 2,890) If this amount includes foreign grants, check here ▶ ☑	117,621								
C	Conferences, workshops and training - held four conferences, 5 workshops and hosted a number									
	of visiting researchers and academics. Guests and speakers came from the US, UK, Brasil,									
	Cost Rica, throughout Europe, Canada and Asia. In addition to the educational/academic nature of									
	these events, participants were able to further develop and refine their critical thinking, networking									
	cooperation and communication skills as well as further personal development.									
	(Grants and allocations \$ 5,367) If this amount includes foreign grants, check here ▶ ✓	70.470								
, , ,	Paper-based publications - Hardcopies of the papers listed in (a) above; publication of 2500 Strand,	70,470								
u	Beyond the Veil, Wave 5 and Wave 6. Revised editions of Political Ponerology, Wave 1 and Wave 2									
	Spanish language editions of [] was published plus prepartion were made for further									
	editions of English language titles in French and Spanish. All these publications, addressing the									
	fundamental issues and experiences of humankind, are core to the wide dissemination of									
	information contributing to the better understanding of humankind and the planet.									
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	64,378								
е	Other program services (attach schedule)	07,370								
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □									
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	279,513								

-	m 990 (2	,			Page 4
P	art 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) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing	16,191	45	° 29,231
	46	Savings and temporary cash investments		46	
		Accounts receivable		47c	
	5	Less. allowance for doubtful accounts.	· · · · · · · · · · · · · · · · · · ·	476	
		Pledges receivable			
	1	Less: allowance for doubtful accounts . 48b		48c	
	49	Grants receivable		49	
		Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
şţ	51a	Other notes and loans receivable (attach schedule)			
Assets	b	Less: allowance for doubtful accounts . 51b		51c	
⋖	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges		53	
		Investments—publicly-traded securities D Cost D FMV		54a	
	1	Investments—other securities (attach schedule) ▶ ☐ Cost ☐ FMV		54b	
	55a	Investments—land, buildings, and equipment: basis			
	b	Less: accumulated depreciation (attach			
		schedule)		55c	
		Investments—other (attach schedule)		56	
	₩ þ	Less: accumulated depreciation (attach schedule)		57c	
	58	Other assets, including program-related investments (describe ►		58	
-	59	Total assets (must equal line 74). Add lines 45 through 58	16,191	59	29,231
	60	Accounts payable and accrued expenses		60	
	61	Grants payable		61	
	62	Deferred revenue		62	
ies	63	Loans from officers, directors, trustees, and key employees (attach			
Liabilities		schedule)	158,566		165,418
<u>E</u>	64a	Tax-exempt bond liabilities (attach schedule)		64a	
	65	Mortgages and other notes payable (attach schedule)		64b	
	00	Other habilities (describe)		65	
	66	Total liabilities. Add lines 60 through 65	158,566	66	165,418
	ı	inizations that follow SFAS 117, check here ▶ □ and complete lines	,,,,,,,,,,		100,710
S		67 through 69 and lines 73 and 74.			
ည	67	Unrestricted		67	
alar	68	Temporarily restricted		68	
m	69	Permanently restricted		69	
Fund Balances		nizations that do not follow SFAS 117, check here ► ✓ and complete lines 70 through 74.			
ō	70	Capital stock, trust principal, or current funds		70	
ets	71	Paid-in or capital surplus, or land, building, and equipment fund .		71	
SS	72	Retained earnings, endowment, accumulated income, or other funds	(142,375)	72	(136,186)
Net Assets		Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must			
		equal line 21) Total liabilities and net assets/fund balances. Add lines 66 and 73	(142,375)	73	(136,186)

Pa	rt IV-A Reconciliation of Revenue per Aud instructions.)	lited Financial Statem	ents With Rev	enue per Returr	(See the
a b 1	Total revenue, gains, and other support per audit Amounts included on line a but not on Part I, line Net unrealized gains on investments	e 12:		a	<i>*</i>
2 3 4	Donated services and use of facilities Recoveries of prior year grants Other (specify):		b2 b3		
С	Add lines b1 through b4			1 . 1	
d 1 2	Amounts included on Part I, line 12, but not on line Investment expenses not included on Part I, line Other (specify):	ne a: 6b	d1 d2		
e Pa	Add lines d1 and d2			▶ e	
-					
a b 1 2 3 4	Total expenses and losses per audited financial s Amounts included on line a but not on Part I, line Donated services and use of facilities Prior year adjustments reported on Part I, line 20 Losses reported on Part I, line 20 Other (specify):	9 17: 	b1 b2 b3		
c d 1	Add lines b1 through b4 Subtract line b from line a Amounts included on Part I, line 17, but not on line linvestment expenses not included on Part I, line Other (specify):				
e Pa	Total expenses (Part I, line 17). Add lines c and rt V-A Current Officers, Directors, Trustees	, and Key Employees	List each perso	▶ e n who was an office	er, director, trustee
	or key employee at any time during the year	ar even if they were not (B) Title and average hours per week devoted to position	compensated.) (S	Gee the instructions (D) Contributions to employ benefit plans & deferred	.)
	v Jadczyk, Chateau St Martin Belacasse 100 Castelsarrasin, Tarn-et-Garonne, France	President - 60	-0/	compensation plans	0 1,242
82	ura Knight-Jadczyk, Chateau St Martin Belacass 100 Castelsarrasin, Tarn-et-Garonne, France	Vice President - 60	- 0 -	1,47	1,242
82	nry See, Chateau St Martin Belacasse 100 Castelsarrasin, Tarn-et-Garonne, France e Quinn, Chateau St Martin Belacasse	Director - 60	- 0 -	1,47	1,242
Sc	100 Castelsarrasin, Tarn-et-Garonne, France ott Ogrin, Chateau St Martin Belacasse	Director - 60	- 0 -	1,47	
Ari	100 Castelsarrasin, Tarn-et-Garonne, France anna Martin, Chateau St Martin Belacasse 100 Castelsarrasin, Tarn-et-Garonne, France	Director - 60	-0-	1,47	
Sir	non Davies, 257B Sixth Ave, Dynasty Gdns 1 gapore 276556	Director - 20	-0-	1,47	

Pai	t V-A Current Officers, Directors, Trustees	s, and Key Employe	es (continued)		Yes No				
75a	Enter the total number of officers, directors, and trumeetings		ote on organizatio	n business at board Seven					
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)								
С	c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."								
d	Does the organization have a written conflict of ir	iterest policy?			75d 🗸				
Pai	t V-B Former Officers, Directors, Trustees, and officer, director, trustee, or key employee reperson below and enter the amount of comp	Key Employees That I ceived compensation o	Received Comper r other benefits (de its in the appropria	nsation or Other Bendescribed below) during	efits (If any former the year, list that				
	. (A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances				
		-							
	·								
	n								
	65 ⁻ 꺗								
	· · · · · · · · · · · · · · · · · · ·								
Par	t VI Other Information (See the instruction	s.)			Yes No				
76	Did the organization make a change in its activitie detailed statement of each change	es or methods of con		? If "Yes," attach a	76				
77	Were any changes made in the organizing or governous of the changes attach a conformed copy of the changes	erning documents bu		the IRS?	77 🗸				
	Did the organization have unrelated business grothis return?				78a 🗸				
b	If "Yes," has it filed a tax return on Form 990-T for				78b				
79	Was there a liquidation, dissolution, termination, c a statement				79 🗸				
	Is the organization related (other than by association common membership, governing bodies, trusted organization?	es, officers, etc., to	any other exer	mpt or nonexempt	80a 🗸				
b	If "Yes," enter the name of the organization ▶	*******							
81a b	Enter direct and indirect political expenditures. (So Did the organization file Form 1120-POL for this	ee line 81 instructions	s) 81a	•	81b 🗸				

Pa	rt VI 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		V
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 comply with the public inspection requirements for returns and exemption applications?	83a	V	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	V	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	***	V
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	84b		
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	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.			
	Dues, assessments, and similar amounts from members			
	Section 162(e) lobbying and political expenditures			
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
	Taxable amount of lobbying and political expenditures (line 85d less 85e)	05-		
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
n	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		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12			
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.)			
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		V
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		·
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶			
b	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		V
С	Enter: Amount of tax imposed on the organization managers or disqualified			
	persons during the year under sections 4912, 4955, and 4958			
đ	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		V
f		89f		V
g	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		
	List the states with which a copy of this return is filed ▶			
	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)			-0-
	The books are in care of ► Simon Davies c/o Chateau St Martin Located at ► 82100 Castelsarrasin, Tarn-et-Garonne, France ZIP + 4 ►		4823	1
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	Yes	No
	If "Yes," enter the name of the foreign country ▶	- 10		-
······································	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			

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Part VI	Other Information (continued)					Yes No
If "\	any time during the calendar year, did the Yes," enter the name of the foreign country tion 4947(a)(1) nonexempt charitable trusts	y ► France				
and	l enter the amount of tax-exempt interest r	eceived or accr	ued during the ta	ax year	. ► 92	
	Analysis of Income-Producing Act					
	er gross amounts unless otherwise		usiness income	<u> </u>	tion 512, 513, or 514	
indicated.	5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5	(A)	(B)	(C)	(D)	Related or exempt function
93 Pro	ogram service revenue:	Business code	Amount	Exclusion code		income
	onferences, workshops & training					4,221
b						
c						
d						
е						
f Me	edicare/Medicaid payments					
	es and contracts from government agencies	s				
94 Me	embership dues and assessments					
	erest on savings and temporary cash investments	s				•
	ridends and interest from securities					
97 Ne	t rental income or (loss) from real estate:					
a del	bt-financed property					
	t debt-financed property					
98 Net	rental income or (loss) from personal property					
99 Oth	ner investment income					
100 Gai	n or (loss) from sales of assets other than inventory	<i>'</i>				
101 Ne	t income or (loss) from special events .	•				
102 Gro	oss profit or (loss) from sales of inventory					58,912
103 Oth	ner revenue: a					
b "						
C		_				
d`		_				
е						
	btotal (add columns (B), (D), and (E)) .					63,133
105 To	tal (add line 104, columns (B), (D), and (E))				-	63,133
Part VIII	e 105 plus line 1e, Part I, should equal the					
Li-						
Line No.	Explain how each activity for which income of the organization's exempt purposes (oth	e is reported in co ner than by provid	olumn (E) of Part V ling funds for such	/II contributed n purposes).	importantly to the	e accomplishment
93a 102	(see Explanatory Attachments)					
102	(see Explanatory Attachments)					

Part IX	Information Regarding Taxable Subs	sidiaries and Di	erogardod Entit	tion (Coo the	inatruations \	
	(A)	(B)				T (E)
Nar	me, address, and EIN of corporation, partnership, or disregarded entity ow	Percentage of vnership interest	Nature of ac	ctivities	(D) Total income	(E) End-of-year assets
		%				
		%				
		<u>%</u>				
Part X	Information Regarding Transfers Asso	ciated with Per	sonal Benefit Co	ntracts (See t	he instructions	
(a) Did (b) Did	the organization, during the year, receive any funds, d the organization, during the year, pay prei "Yes" to (b) , file Form 8870 and Form 473	irectly or indirectly, t miums, directly o	o pay premiums on a	a personal benefi	t contract? .	☐ Yes ☑ No
		,	-/·			· · · · · ·

Part	Information Regarding is a controlling organization	Fransfers To and Fron on as defined in section	n Controlled E n 512(b)(13).	ntities. C	omplete onl	y if the org	ganiz	ation	
106	Did the reporting organization mathe Code? If "Yes," complete the	ike any transfers to a con schedule below for each	strolled entity as controlled entity	defined in	section 512(b	o)(13) of	Yes	No	
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Desc	(C) ription of ansfer		(D) Amount of	transf	er	
а					·				
b									
С									
	Totals								
107	Did the reporting organization rec 512(b)(13) of the Code? If "Yes,"	ceive any transfers from a complete the schedule be	a controlled entitelow for each co	y as define	ed in section tity.		Yes	No	
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer			(D) Amount of t			
а									
b	ካ ምን					100		···	
С									
	Totals								
108	Did the organization have a bindir rents, royalties, and annuities des			, 2006, cov	vering the inte	erest,	Yes	No	
Please Sign Here Under penalties of perjury, I declare that I have and belief, it is true, correct, and complete. Description of the penalties of perjury, I declare that I have and belief, it is true, correct, and complete. Description of the penalties of perjury, I declare that I have and belief, it is true, correct, and complete. Description of the penalties of perjury, I declare that I have and belief, it is true, correct, and complete. Description of the penalties of perjury, I declare that I have and belief, it is true, correct, and complete. Description of the penalties of perjury, I declare that I have and belief, it is true, correct, and complete. Description of the penalties of penjury, I declare that I have and belief, it is true, correct, and complete. Description of the penalties of penjury, I declare that I have and belief, it is true, correct, and complete. Description of the penalties of the pen		have examined this return, includ te. Declaration of preparer (other	ling accompanying so than officer) is base	chedules and s d on all inform	statements, and to aation of which po Date	o the best of m	y know y know	vledge vledge.	
Paid Prepare		Date Check if self-employe			ed ►			Inst. X)	
Use On	if self-employed), address, and ZIP + 4		71 -	EII Ph	one no. ► ()			