

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)
The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2006

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

NORTH HILLS YOUTH MINISTRY, INC.

Number and street (or P.O. box if mail is not delivered to street address)

802 MCKNIGHT PARK DRIVE

Room/suite

City or town, state or country, and ZIP + 4

PITTSBURGH

PA 15237

D Employer identification number

25-1196957

E Telephone number

412-366-1300

F Accounting method: ☐ Cash

☒ Accrual ☐ 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 are not applicable to section 527 organizations. I

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

H(b) If "Yes," enter number of affiliates ☐ Yes ☐ No

H(c) Are all affiliates included? ☐ Yes ☐ No

(If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an

organization covered by a group ruling? ☐ Yes ☐ No

I Group Exemption Number ☐ Yes ☐ No

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

G Website: **NHYMCC.ORG**

J Organization type

(check only one) ☒ 501(c) (3) (Insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **449,187**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1 Contributions, gifts, and similar amounts received:			
a Contributions to donor advised funds	1a		
b Direct public support (not included on line 1a)	1b	156,379	
c Indirect public support (not included on line 1a)	1c		
d Government contributions (grants) (not included on line 1a)	1d		
e Total (add lines 1a through 1d) (cash \$ 141,397 noncash \$ 14,982)			1e 156,379
2 Program service revenue including government fees and contracts (from Part VII, line 93)			2 102,096
3 Membership dues and assessments			3
4 Interest on savings and temporary cash investments			4 3,116
5 Dividends and interest from securities			5 3,708
6a Gross rents	6a		
b Less: rental expenses	6b		
c Net rental income or (loss). Subtract line 6b from line 6a			6c
7 Other investment income (describe)			7
8a Gross amount from sales of assets other than inventory	(A) Securities 86,311	(B) Other 8,105	
b Less: cost or other basis and sales expenses	91,088	8b	
c Gain or (loss) (attach schedule)	-4,777	8c	
d Net gain or (loss). Combine line 8c, columns (A) and (B)	See Stmt 1	See Stmt 2	8d 3,328
9 Special events and activities (attach schedule). If any amount is from gaming, check here ☐			
a Gross revenue (not including \$ of contributions reported on line 1b)	9a	82,417	
b Less: direct expenses other than fundraising expenses	9b		
c Net income or (loss) from special events. Subtract line 9b from line 9a			9c 82,417
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 7,055
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12 358,099
13 Program services (from line 44, column (B))			13 260,037
14 Management and general (from line 44, column (C))			14 32,229
15 Fundraising (from line 44, column (D))			15 75,744
16 Payments to affiliates (attach schedule)			16
17 Total expenses. Add lines 16 and 44, column (A)			17 368,010
18 Excess or (deficit) for the year. Subtract line 17 from line 12			18 -9,911
19 Net assets or fund balances at beginning of year (from line 73, column (A))			19 937,232
20 Other changes in net assets or fund balances (attach explanation)	See Statement 3		20 34,049
21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20			21 961,370

Part II**Statement of
Functional Expenses**

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

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here ☐				
22b Other grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here ☐				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule) See Statement 4	37,000	37,000		
25b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)				
25c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				
26 Salaries and wages of employees not included on lines 25a, b, and c	178,664	123,564	19,600	35,500
27 Pension plan contributions not included on lines 25a, b, and c	4,666	4,666		
28 Employee benefits not included on lines 25a - 27	27,735	27,735		
29 Payroll taxes	14,509	10,880	1,291	2,338
30 Professional fundraising fees				
31 Accounting fees	2,500		2,500	
32 Legal fees				
33 Supplies	6,863			6,863
34 Telephone				
35 Postage and shipping	6,111		6,111	
36 Occupancy	14,235			14,235
37 Equipment rental and maintenance	1,123	1,123		
38 Printing and publications	7,173	1,070	550	5,553
39 Travel				
40 Conferences, conventions, and meetings	2,526	1,008	374	1,144
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)	28,751	28,751		
43 Other expenses not covered above (itemize): a See Statement 5	36,154	24,240	1,803	10,111
b				
c				
d				
e				
f				
g				
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	368,010	260,037	32,229	75,744

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____ ; (ii) the amount allocated to Program services \$ _____ ;

(iii) the amount allocated to Management and general \$ _____ ; and (iv) the amount allocated to Fundraising \$ _____

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

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

What is the organization's primary exempt purpose?

► COUNSELING YOUTHS AND FAMILIES

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.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a
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.....
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.....
.....
(Grants and allocations \$) If this amount includes foreign grants, check here ☐

b
.....
.....
.....
.....
.....
(Grants and allocations \$) If this amount includes foreign grants, check here ☐

c
.....
.....
.....
.....
.....
(Grants and allocations \$) If this amount includes foreign grants, check here ☐

d
.....
.....
.....
.....
.....
(Grants and allocations \$) If this amount includes foreign grants, check here ☐

e Other program services (attach schedule) **See Stmt 6**
(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) **260,037**
260,037

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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) Beginning of year	(B) End of year	
Assets	45 Cash-non-interest-bearing	50	50	
	46 Savings and temporary cash investments	111,714	95,354	
	47a Accounts receivable	6,747		
	b Less: allowance for doubtful accounts	5,337	6,747	
	48a Pledges receivable	48,578		
	b Less: allowance for doubtful accounts	2,429	46,149	
	49 Grants receivable		16,000	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (att. schedule)			
	51a Other notes and loans receivable (attach schedule)			
	b Less: allowance for doubtful accounts			
	52 Inventories for sale or use			
	53 Prepaid expenses and deferred charges			
	54a Investments—publicly-traded securities			
	b Investments—other securities (attach schedule)			
	55a Investments—land, buildings, and equipment: basis			
	b Less: accumulated depreciation (attach schedule)			
	56 Investments—other (attach schedule)	See Stmt 7		
	57a Land, buildings, and equipment: basis	725,938	269,896	
	b Less: accumulated depreciation (attach schedule)	See Statement 8		
58 Other assets, including program-related investments (describe ► See Statement 9)	202,217	535,717		
59 Total assets (must equal line 74). Add lines 45 through 58	258,753	941,441		
Liabilities	60 Accounts payable and accrued expenses	4,209	8,543	
	61 Grants payable			
	62 Deferred revenue			
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			
	64a Tax-exempt bond liabilities (attach schedule)			
	b Mortgages and other notes payable (attach schedule)			
	65 Other liabilities (describe ►)			
	66 Total liabilities. Add lines 60 through 65	4,209	8,543	
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 67 through 69 and lines 73 and 74.		
		67 Unrestricted	767,052	835,003
68 Temporarily restricted		170,180	126,367	
69 Permanently restricted				
Organizations that do not follow SFAS 117, check here ☐ and complete lines 70 through 74.				
70 Capital stock, trust principal, or current funds				
71 Paid-in or capital surplus, or land, building, and equipment fund				
72 Retained earnings, endowment, accumulated income, or other funds				
73 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)		937,232	961,370	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		941,441	969,913	

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Yes	No
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75b	X
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75c	X
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75d	X
-----	---

75d	X
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Other Benefits

N/A

Yes	No
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76		X
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77		X
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78a	X
-----	---

78b		
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79	X
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80a	X
-----	---

81a

816	V
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Part 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	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	36,713
83a	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
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
85	501(c)(4), (5), or (6) organizations. a 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? 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.	85b	N/A
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	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	86b	
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	X
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	X
89a	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) 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		0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
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	X
90a	List the states with which a copy of this return is filed PA		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b	13
91a	The books are in care of NORTH HILLS YOUTH MINISTRY 802 MCKNIGHT PARK DR Located at PITTSBURGH, PA Telephone no. 15237		
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)? If "Yes," enter the name of the foreign country	91b	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

- c At any time during the calendar year, did the organization maintain an office outside of the United States? Yes ☐ No ☒
If "Yes," enter the name of the foreign country 91c ☐
- 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year ☐ 92 ☐

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	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a COUNSELING					87,748
b WORKSHOPS AND TUTORING					14,348
c					
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	3,116	
96 Dividends and interest from securities			14	3,708	
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			25	3,328	
101 Net income or (loss) from special events			1	82,417	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b MISCELLANEOUS INCOME			2	7,055	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		99,624	102,096
105 Total (add line 104, columns (B), (D), and (E))					201,720

Note: Line 105 plus line 1e, 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	FEES FOR COUNSELING - ONE OF OUR EXEMPT PURPOSES
93b	FEES FOR EDUCATION AND COMMUNITY OUTREACH - ONE OF OUR EXEMPT PURPOSES

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).

Part XI

Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	☒

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	☒

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

Please
Sign
Here

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.

Signature of officer: Richard P. Bruckman, TREAS.

Date: Oct. 17, 2007

Type or print name and title: RICHARD P. BRUCKMAN, TREAS.

Paid
Preparer's
Use Only

Preparer's
signature

Foran O'Connor

Date

10/02/07

Check if
self-
employed

☐

Preparer's SSN or PTIN
(See Gen. Instr. X)
P00447837

Firm's name (or yours
if self-employed),
address, and ZIP + 4

Small, O'Connor & Pagano, CPAS
800 Vinial St Ste 412
Pittsburgh, PA 15212-5128

EIN

Phone

no. 412-231-6422

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.)		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial 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)? See Part V-A, Form 990 See Statement 13	X	
e Transfer of any part of its income or assets?		X
3a 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.)		X
b Did the organization have a section 403(b) annuity plan for its employees?		X
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
b Did the organization make any taxable distributions under section 4966?		
c Did the organization make a distribution to a donor, donor advisor, or related person?		
d Enter the total number of donor advised funds owned at the end of the tax year ► _____		
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► _____		
f 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 ► _____		0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► _____		0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)I certify that 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
- ☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☒ Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
THE NORTH HILLS YOUTH MINISTRY WAS FORMED BY THE				X	
NORTH HILLS MINISTERIAL ASSOC. (TWENTY-SIX CHURCHES)				X	
TO GIVE GUIDANCE TO YOUNG PEOPLE AND FAMILIES.				X	
Total					

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)					
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					
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					
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					
24 Line 23 minus line 17					
25 Enter 1% of line 23					
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					
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 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					
c Total support for section 509(a)(1) test: Enter line 24, column (e)					
d Add: Amounts from column (e) for lines: 18 19 22 26b					
e Public support (line 26c minus line 26d total)					
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
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:					
(2005) (2004) (2003) (2002)					
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:					
(2005) (2004) (2003) (2002)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					
d Add: Line 27a total and line 27b total					
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, 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.					

N/A

N/A

Part V 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)

	N/A	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?	29		
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?	30		
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?	31		
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?	32a		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
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.)			
.....			
.....			
33 Does the organization discriminate by race in any way with respect to:			
a Students' rights or privileges?	33a		
b Admissions policies?	33b		
c Employment of faculty or administrative staff?	33c		
d Scholarships or other financial assistance?	33d		
e Educational policies?	33e		
f Use of facilities?	33f		
g Athletic programs?	33g		
h Other extracurricular activities?	33h		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
.....			
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b Has the organization's right to such aid ever been revoked or suspended?	34b		
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	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 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.**Limits on Lobbying Expenditures**

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

		(a) Affiliated group totals	(b) To be completed for all electing organizations
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-			
If the amount on line 40 is-	The lobbying nontaxable amount is-		
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	41	
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 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.) **N/A**

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			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

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

Schedule of Contributors
Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2006

Name of organization

Employer identification number

NORTH HILLS YOUTH MINISTRY, INC.

25-1196957

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.)

General Rule-

☒ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

☐ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)

► \$

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

NORTH HILLS YOUTH MINISTRY, INC.

Employer identification number

25-1196957

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	STRATEGIC ENERGY LLC 2 GATEWAY CENTER PITTSBURGH PA 15222	\$ 6,500	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
2	THRIVENT FINANCIAL 1603 CARMODY COURT, # 301 SEWICKLEY PA 15143	\$ 6,600	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
3	MR. AND MRS. GARY R. CLAUS 4207 WEMBLETON DRIVE ALLISON PARK PA 15101	\$ 5,740	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
4	MRS. PEGGY C. KNOTT 48 TREASURE LAKE DUBOIS PA 15801	\$ 16,982	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II if there is a noncash contribution.)
5	MR. AND MRS. KENNETH WILKINS 133 COUNTRY LANE PITTSBURGH PA 15229	\$ 13,350	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
6	MRS. JOYCE FAKO 4191 ROTHSCHILD COURT ALLISON PARK PA 15101	\$ 7,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

Name of organization

NORTH HILLS YOUTH MINISTRY, INC.

Employer identification number

25-1196957

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	BAIERL FAMILY OF DEALERSHIPS 10430 PERRY HIGHWAY WEXFORD PA 15090	\$ 20,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
8	HIGHMARK BLUE CROSS BLUE SHIELD FIFTH AVENUE PLACE 120 FIFTH AVENUE PITTSBURGH PA 15222	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
9	HILLMAN FOUNDATION 330 GRANT STREET SUITE 2000 PITTSBURGH PA 15219	\$ 25,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
10	ROY A. HUNT FOUNDATION ONE BIGELOW SQUARE SUITE 630 PITTSBURGH PA 15219	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
11	CHARLES M. MORRIS CHARITABLE TRUST NATIONAL CITY BANK OF PENNSYLVANIA 20 STANWIX STREET PITTSBURGH PA 15222	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

For calendar year 2006, or tax year beginning

and ending

Name

Employer Identification Number

NORTH HILLS YOUTH MINISTRY, INC.

25-1196957

	(A)	(B)	(C)	Others	Total
Gross receipts	46,406	34,749	1,262	0	82,417
Less contributions	0	0	0	0	0
Gross revenue	46,406	34,749	1,262	0	82,417
Less direct expenses	0	0	0	0	0
Net income (loss)	46,406	34,749	1,262	0	82,417

Description:	(A)	GOLF TOURNAMENT
	(B)	BOOK SALE
	(C)	MUSIC FESTIVAL
	Others	

Federal Statements

Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
Publicly Traded Securities								
Total					\$ 86,311	\$ 91,088	\$	\$ -4,777
					\$ 86,311	\$ 91,088	\$ 0	\$ -4,777

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
Total					\$ 8,105	\$	\$	\$ 8,105
					\$ 8,105	\$ 0	\$ 0	\$ 8,105

Statement 3 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

<u>Description</u>	<u>Amount</u>
Net Unrealized Gains on Investments	\$ 19,049
Donated Services and Use of Facilities	15,000
Total	<u>\$ 34,049</u>

Federal Statements

Statement 4 - Form 990, Part II, Line 25a - Compensation of Current Officers

<u>Name</u>	<u>Program Services</u>	<u>Management & General</u>	<u>Fundraising</u>
Expenses	\$	\$	\$
Officer Compensation	37,000		
Compensation			
Total	\$ 37,000	\$ 0	\$ 0

Federal Statements

Statement 5 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
BOOK SALE				
Advertising	278			278
Expenses				
ASSOCIATION FEE	4,392	4,392		
COMMUNITY OUTREACH, EDUCATION	888	888		
INSURANCE	3,238	2,335	903	
MARKETING	968			968
MEMBERSHIPS AND FEES	1,901	1,751	150	
MISCELLANEOUS	9,229	1,669	505	7,055
OFFICE	2,572	2,327	245	
REPAIRS AND MAINTENANCE	718	718		
SOLICITATIONS	1,810			1,810
UTILITIES	7,753	7,753		
VEHICLE EXPENSES	2,407	2,407		
Total	\$ 36,154	\$ 24,240	\$ 1,803	\$ 10,111

Statement 6 - Form 990, Part III, Line e - Other Program ServicesDescription

CRISIS INTERVENTION, INDIVIDUAL AND FAMILY COUNSELING,
AND SUPPORTIVE, PREVENTIVE, EDUCATIONAL AND ADVOCACY
SERVICES TO LOCAL YOUTH AND THEIR FAMILIES.

Federal Statements

Statement 7 - Form 990, Part IV, Line 56 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation
CERTIFICATE OF DEPOSIT	\$ 21,615	\$ 20,169	Market
MUTUAL FUNDS	185,689	199,885	Market
BANK OF AMERICA NOTE	25,702	25,232	Market
CITIGROUP INC. NOTE	25,090		Market
FEDERAL HOME LOAN MORTGAGE CORP NOTE		24,610	Market
Total	\$ 258,096	\$ 269,896	

Statement 8 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
	\$ 363,687	\$ 161,470	\$ 725,938	\$ 190,221
Total	\$ 363,687	\$ 161,470	\$ 725,938	\$ 190,221

Statement 9 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
PROJECT IN PROCESS	\$ 258,753	\$
Total	\$ 258,753	\$ 0

Federal Statements

Statement 10 - Form 990, Part IV-A - Other Revenue Included on Return

Description	Amount
SPECIAL EVENTS EXPENSES NETTED WITH INCOME ON STMTS.	\$ 21,918
Total	\$ 21,918

Statement 11 - Form 990, Part IV-B - Other Expenses included on Return

Description	Amount
SPECIAL EVENTS EXPENSES NETTED WITH INCOME ON STMTS.	\$ 21,918
Total	\$ 21,918

Federal Statements

Statement 12 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
BARBARA G ANDERSON 308 RUSTIN WAY WEXFORD PA 15090	DIRECTOR	1	0	0	0
RENEE J BAKER 1001 WOODHILL DR GIBSONIA PA 15044	DIRECTOR	1	0	0	0
E ALAN BATES 9803 BRAEWICK DR ALLISON PARK PA 15101	DIRECTOR	1	0	0	0
P FRED BEORN 2526 LINDENWOOD DR WEXFORD PA 15090	DIRECTOR	1	0	0	0
RICHARD P BRUCKMAN 7978 REMINGTON DR PITTSBURGH PA 15237	TREASURER	2.4	0	0	0
ARTHUR G CANTRELL 581 JOAN ST CRANBERRY TWP PA 16066	DIRECTOR	1	0	0	0
BRIAN J EDWARDS 3000 CONIFER CT WEXFORD PA 15090	DIRECTOR	1	0	0	0
KENNETH R FREDERICK 865 HARRISON CITY RD LEVEL GREEN PA 15085	DIRECTOR	1	0	0	0
JEFFREY J GMUER 3016 E BARDONNER DR GIBSONIA PA 15044	DIRECTOR	1	0	0	0
BRIAN T GONGAWARE 310 BARBERRY CT	PRESIDENT	2.4	0	0	0

Federal Statements

Statement 12 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
MARS PA 16046					
JOHN C MACKIE 135 BELLWOOD CT CRANBERRY TWP PA 16066	DIRECTOR	1	0	0	0
RONALD M PUSIC 126 ROSE AVE PITTSBURGH PA 15229	DIRECTOR	1	0	0	0
RICHARD S SPAHR 9119 WILLOUGHBY RD PITTSBURGH PA 15237	DIRECTOR	1	0	0	0
SR BETTY J SUNDRY 9000 BABCOCK BLVD ALLISON PARK PA 15101	DIRECTOR	1	0	0	0
ALFRED E THOMSON IV 4335 MT ROYAL BLVD ALLISON PARK PA 15101	DIRECTOR	1	0	0	0
DAVID L WESSEL 8205 MARQUIS DR PITTSBURGH PA 15237	DIRECTOR	1	0	0	0
MARTHA C WISEMAN 696 BROOKSHIRE DR PITTSBURGH PA 15237	DIRECTOR	1	0	0	0
MICHAEL R YOUNG 115 PINEHURST LANE GIBSONIA PA 15044	DIRECTOR	1	0	0	0
RICHARD A ZACHARIASON 501 KNOLL COURT WEXFORD PA 15090	VICE PRES	1	0	0	0

Federal Statements

Statement 12 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
REV RON BARNES 2313 WYLAND AVE ALLISON PARK PA 15101	EX DIRECTOR	50	37,000	4,666	27,735

Statement 13 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of
Exp

Description

SEE STATEMENT #7

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2006Attachment
Sequence No. **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

NORTH HILLS YOUTH MINISTRY, INC.

Identifying number

25-1196957

Business or activity to which this form relates

Indirect Depreciation**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	108,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	430,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2007. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	15

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2006	17	10,817
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B-Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		21,282	5.0	HY	200DB	4,256
c 7-year property		56,193	7.0	HY	200DB	8,027
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property	3/13/06	232,099	39 yrs.	MM	S/L	4,594
	Various	52,678	39.0	MM	S/L	1,042

Section C-Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr.	22	28,751
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2006)

There are no amounts for Page 2

