

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)

2006

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2006 calendar year, or tax year beginning

, 2006, and ending

, 20

- B Check if applicable
[X] Address change
[ ] Name change
[ ] Initial return
[ ] Final return
[ ] Amended return
[ ] Application pending

C Name of organization: EQUALITY FEDERATION
D Employer identification number: 81-0670152
E Telephone number: (877) 790-2674
F Accounting method: [ ] Cash [X] Accrual

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

H and I are not applicable to section 527 organizations

- H(a) Is this a group return for affiliates? [ ] Yes [X] No
H(b) If "Yes," enter number of affiliates
H(c) Are all affiliates included? [ ] Yes [ ] No
H(d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [ ] No

G Website:

J Organization type (check only one) [X] 501(c)(4) (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 12 108,139

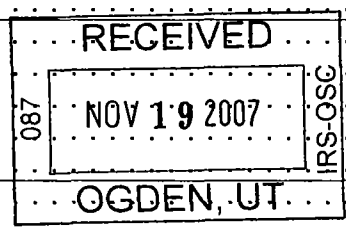
I Group Exemption Number

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

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

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, and Amount. Includes sections for Contributions, Program Service Revenue, Investment Income, and Expenses.

SCANNED DEC 18 2007



12-11

**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
<b>22 a</b>	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>			
<b>22 b</b>	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>			
<b>23</b>	Specific assistance to individuals (attach schedule)	<b>23</b>			
<b>24</b>	Benefits paid to or for members (attach schedule)	<b>24</b>			
<b>25 a</b>	Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule)	<b>25a</b>	7,357	4,514	1,789
<b>b</b>	Compensation of former officers, directors, key employees, etc listed in Part V-B (attach schedule)	<b>25b</b>			
<b>c</b>	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)	<b>25c</b>			
<b>26</b>	Salaries and wages of employees not included on lines 25a, b, and c	<b>26</b>	10,506	4,775	2,141
<b>27</b>	Pension plan contributions not included on lines 25a, b, and c	<b>27</b>			
<b>28</b>	Employee benefits not included on lines 25a - 27	<b>28</b>			
<b>29</b>	Payroll taxes	<b>29</b>	1,573	818	346
<b>30</b>	Professional fundraising fees	<b>30</b>			
<b>31</b>	Accounting fees	<b>31</b>	1,291		1,291
<b>32</b>	Legal fees	<b>32</b>	1,283		1,283
<b>33</b>	Supplies	<b>33</b>	342	178	75
<b>34</b>	Telephone	<b>34</b>	831	432	183
<b>35</b>	Postage and shipping	<b>35</b>	229		59
<b>36</b>	Occupancy	<b>36</b>	1,328	691	292
<b>37</b>	Equipment rental and maintenance	<b>37</b>			
<b>38</b>	Printing and publications	<b>38</b>	761	68	105
<b>39</b>	Travel	<b>39</b>			
<b>40</b>	Conferences, conventions, and meetings	<b>40</b>	6,471	6,471	
<b>41</b>	Interest	<b>41</b>			
<b>42</b>	Depreciation, depletion, etc (attach schedule)	<b>42</b>	514		514
<b>43</b>	Other expenses not covered above (itemize)	<b>43</b>	52,741	52,368	54
<b>a</b>	BANK SERVICE CHARGES	<b>43a</b>	182		170
<b>b</b>	ONLINE FUNDRAISING FEES	<b>43b</b>	851		
<b>c</b>	WORKERS COMP	<b>43c</b>	763	397	168
<b>d</b>	RECRUITMENT	<b>43d</b>	150		150
<b>e</b>	SMALL EQUIPMENT	<b>43e</b>	524	273	115
<b>f</b>	TAXES LICENSES PERMITS	<b>43f</b>	55		55
<b>g</b>	MARKETING EXPENSE	<b>43g</b>	123		123
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	87,875	70,985	8,913

**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? ► SEE STATEMENT 2

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** See SERVICES

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Grants and allocations \$ \_\_\_\_\_ ) If this amount includes foreign grants, check here ►

70,985

**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)

(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) . . . . . ►

70,985

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

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A)		(B)	
		Beginning of year		End of year	
A s s e t s	45	Cash - non-interest-bearing . . . . .	336	45	8,876
	46	Savings and temporary cash investments . . . . .	1,066	46	
	47 a	Accounts receivable . . . . .	27,509		
	b	Less allowance for doubtful accounts . . . . .		47c	27,509
	48 a	Pledges receivable . . . . .			
	b	Less allowance for doubtful accounts . . . . .		48c	
	49	Grants receivable . . . . .		49	
	50 a	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	
	51 a	Other notes and loans receivable (attach schedule) . . . . .			
	b	Less allowance for doubtful accounts . . . . .		51c	
	52	Inventories for sale or use . . . . .		52	
	53	Prepaid expenses and deferred charges . . . . .		53	1,824
	54 a	Investments - publicly-traded securities . . . . . <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b	Investments - other securities (attach schedule) . . . . . <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
	55 a	Investments - land, buildings, and equipment basis . . . . .			
	b	Less accumulated depreciation (attach schedule) . . . . .		55c	
	56	Investments - other (attach schedule) . . . . .		56	
	57 a	Land, buildings, and equipment basis . . . . .	8,211		
b	Less accumulated depreciation (attach schedule) . . . . . STM116	821	57c	7,390	
58	Other assets, including program-related investments (describe ► )		58		
59	<b>Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .	18,185	59	45,599	
L i a b i l i t i e s	60	Accounts payable and accrued expenses . . . . .	8,133	60	16,752
	61	Grants payable . . . . .		61	
	62	Deferred revenue . . . . .		62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		63	
	64 a	Tax-exempt bond liabilities (attach schedule) . . . . .		64a	
	b	Mortgages and other notes payable (attach schedule) . . . . .		64b	
	65	Other liabilities (describe ► STM121 )	1,453	65	(16)
66	<b>Total liabilities.</b> Add lines 60 through 65 . . . . .	9,586	66	16,736	
N F u n d A s s e t A n c e s	<b>Organizations that follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted . . . . .		67	
	68	Temporarily restricted . . . . .		68	
	69	Permanently restricted . . . . .		69	
	<b>Organizations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal, or current funds . . . . .	0	70	8,599
	71	Paid-in or capital surplus, or land, building, and equipment fund . . . . .	0	71	0
	72	Retained earnings, endowment, accumulated income, or other funds . . . . .	8,599	72	20,264
73	<b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21) . . . . .	8,599	73	28,863	
74	<b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 . . . . .	18,185	74	45,599	





<b>Part VI Other Information</b> (continued)		Yes	No
<b>82 a</b>	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? . . . . .	<b>82a</b>	X
<b>b</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) . . . . . <b>82b</b>			
<b>83 a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications? . . . . .	<b>83a</b>	X
<b>b</b>	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . . . .	<b>83b</b>	X
<b>84 a</b>	Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .	<b>84a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>84b</b>	X
<b>85</b>	<b>501(c)(4), (5), or (6) organizations</b> <b>a</b> Were substantially all dues nondeductible by members? . . . . .	<b>85a</b>	X
<b>b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	<b>85b</b>	X
If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
<b>c</b>	Dues, assessments, and similar amounts from members . . . . . <b>85c</b>		
<b>d</b>	Section 162(e) lobbying and political expenditures . . . . . <b>85d</b>		
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . . <b>85e</b>		
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . . <b>85f</b>		
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . . .	<b>85g</b>	N/A
<b>h</b>	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? . . . . .	<b>85h</b>	N/A
<b>86</b>	<b>501(c)(7) orgs</b> Enter <b>a</b> Initiation fees and capital contributions included on line 12 . . . . . <b>86a</b>		
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities . . . . . <b>86b</b>		
<b>87</b>	<b>501(c)(12) orgs</b> Enter <b>a</b> Gross income from members or shareholders . . . . . <b>87a</b>		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . . <b>87b</b>		
<b>88 a</b>	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 . . . . .	<b>88a</b>	X
<b>b</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 . . . . .	<b>88b</b>	X
<b>89 a</b>	<b>501(c)(3) organizations</b> Enter Amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
<b>b</b>	<b>501(c)(3) and 501(c)(4) orgs</b> 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 . . . . .	<b>89b</b>	X
<b>c</b>	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ _____		
<b>d</b>	Enter Amount of tax on line 89c, above, reimbursed by the organization . . . . . ▶ _____		
<b>e</b>	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? . . . . .	<b>89e</b>	X
<b>f</b>	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? . . . . .	<b>89f</b>	X
<b>g</b>	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? . . . . .	<b>89g</b>	X
<b>90 a</b>	List the states with which a copy of this return is filed ▶ <u>CA</u>		
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2006 (See instructions) . . . . . <b>90b</b>		
<b>91 a</b>	The books are in care of ▶ <u>ML ASSOCIATES LLC</u> Telephone no ▶ <u>310-385-7300</u> Located at ▶ <u>9056 S MONICA 307 W HOLLYWOOD CA</u> ZIP + 4 ▶ <u>90069</u>		
<b>b</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)? . . . . .	<b>91b</b>	X
If "Yes," enter the name of the foreign country ▶ _____			
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b>			

**Part VI Other Information** (continued)

**c** At any time during the calendar year, did the organization maintain an office outside of the United States? 91c  Yes  No  
 If "Yes," enter the name of the foreign country ▶ \_\_\_\_\_

**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	
<b>93</b> Program service revenue					
<b>a</b> ONLINE MEMBER SVCS					14,504
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments . . . . .					73,729
<b>95</b> Interest on savings & temporary cash investments			14	3	
<b>96</b> Dividends and interest from securities . . . . .					
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property . . . . .					
<b>b</b> not debt-financed property. . . . .					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory . . . . .					
<b>103</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E))				3	88,233
<b>105</b> Total (add line 104, columns (B), (D), and (E)) <span style="float:right">▶</span>					88,236

**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)
94	ORG PROVIDES VARIOUS DISCOUNTED FUNDRAISING AND ADMIN SVCS TO MEM ORGS (SEE PART II OF RETURN FOR MORE DETAILS)

**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
	%			
	%			
	%			
	%			

**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 Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

**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 Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

**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: *Toni Broaddus* Date: 11/13/07

Type or print name and title: TONI BROADDUS, PRESIDENT

**Paid Preparer's Use Only**

Preparer's signature: *Lou Anne Myle* Date: 11-12-2007 Check if self-employed:

Firm's name (or yours if self-employed) address, and ZIP + 4: ML Associates LLC  
9056 Santa Monica Blvd., #307  
West Hollywood, CA 90069

Preparer's SSN or PTIN (See Gen Inst X):  EIN:  Phone no: 310-385-7300





# Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury  
Internal Revenue Service

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

**2006**  
Attachment  
Sequence No **67**

Name(s) shown on return <b>EQUALITY FEDERATION</b>	Business or activity to which this form relates <b>MANAGEMENT/GENERAL - 1</b>	Identifying number <b>81-0670152</b>
---	--	---

**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	
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	
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	
<b>6</b>			
	(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	

**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	
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 . . . . .	<input type="checkbox"/>	

**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 STATEMENT # 50						821
c 7-year property						
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	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

**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	<b>Total.</b> 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	821
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	

**Federal Supporting Statements**

2006 PG 01

Name(s) as shown on return

FEIN

EQUALITY FEDERATION

81-0670152

**FORM 990, SCH FOR PART II, LINE 42  
DEPRECIATION AND DEPLETION SCHEDULE**

Statement #108

<u>Description</u>	<u>Total</u>	<u>Program Services</u>	<u>Management &amp; General</u>	<u>Fundraising</u>
DEPR NET OF REIMBUR	514	_____	514	_____
TOTAL	<u>514</u>	<u>_____</u>	<u>514</u>	<u>_____</u>

**FORM 990, SCH FOR PART IV, LINE 57  
LAND ETC. SCHEDULE**

PG 01  
Statement #116

<u>Category or Item</u>	<u>Basis</u>	<u>Accumulated Depreciation</u>	<u>End of Year</u>
EQUIPMENT	8,211	821	7,390
TOTAL	<u>8,211</u>	<u>821</u>	<u>7,390</u>

**FORM 990, SCH FOR PART IV, LINE 65  
OTHER LIABILITIES SCHEDULE 2**

PG 01  
Statement #121

<u>Description</u>	<u>Beginning of year</u>	<u>End of year</u>
ACCRUED PAID LEAVE	436	(16)
ACCRUED PAYROLL	1,017	_____
TOTAL	<u>1,453</u>	<u>(16)</u>

**Federal Supporting Statements**

**2006 PG 01**

Name(s) as shown on return

FEIN

**EQUALITY FEDERATION**

**81-0670152**

**FORM 990, PART V-A, LINE 75c  
COMPENSATION SCHEDULE**

Statement #126

**Name** TONI BROADDUS  
**Related Organization** EQUALITY CALIFORNIA INSTITUTE  
**EIN** 81-0670151  
**Relationship** RELATED  
**Compensation amount** \$45,151  
**Benefit contribution** \$  
**Expense account** \$  
**Compensation desc.** EXECUTIVE DIRECTOR OF RELATED ORGANIZATION

**FORM 4562 - LINE 19B**

PG01  
STATEMENT # 50

<u>BASIS</u>	<u>RP</u>	<u>CV</u>	<u>METHOD</u>	<u>DEDUCTION</u>
1,500	5	HY	S/L	150
3,362	5	HY	S/L	336
1,349	5	HY	S/L	135
2,000	5	HY	S/L	200
<b>TOTALS</b>				<u><u>821</u></u>

**990 PART II, LINE 43  
OTHER EXPENSES (OVERFLOW)**

PG01  
Statement #167

<u>Description</u>	<u>Total</u>	<u>Program Services</u>	<u>Management &amp; General</u>	<u>Fundraising</u>
FUNDRAISING EXPENSE	330		11	319
PAYROLL EXPENSE	28		28	
WEBSITE INTERNET	680	665	15	
MEMBER TECHNOLOGY	<u>51,703</u>	<u>51,703</u>		
<b>TOTAL</b>	<u><u>52,741</u></u>	<u><u>52,368</u></u>	<u><u>54</u></u>	<u><u>319</u></u>

Federal Supporting Statements

2006

Name(s) as shown on return

FEIN

Statement #A01

CARMEN VAZQUEZ

Explanation  
VOLUNTEERS

Statement #A02

STRATTON POLLITZER

Explanation  
VOLUNTEERS

Statement #A03

ALEXIS BLIZMAN

Explanation  
VOLUNTEER

**Federal Supporting Statements**

**2006**

Name(s) as shown on return

FEIN

Statement #A04

JEREMY PITTMAN

Explanation  
VOLUNTEER

Statement #A05

JOSH FRIEDES

Explanation  
VOLUNTEER

Statement #A06

MONICA MEYER

Explanation  
VOLUNTEER

**Federal Supporting Statements**

**2006**

Name(s) as shown on return

FEIN

Statement #A07

LYNNE BOWMAN

Explanation  
VOLUNTEER

Statement #A08

RHONDA WHITE

Explanation  
VOLUNTEER

Statement #A09

STACEY SOBEL

Explanation  
VOLUNTEER

Federal Supporting Statements

2006

Name(s) as shown on return

FEIN

Statement #A10

SEAN KOSOFSKY

Explanation  
VOLUNTEER

Statement #A11

HOWARD BAYLESS

Explanation  
VOLUNTEER

Statement #A12

IAN PALMQUIST

Explanation  
VOLUNTEER

**Federal Supporting Statements**

**2006**

Name(s) as shown on return

FEIN

Statement #A13

JULIE BRUEGGEMANN

Explanation  
VOLUNTEER