

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)

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 **APR 1, 2006** and ending **MAR 31, 2007**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization CENTER FOR NATIONAL INDEPENDENCE IN POLITICS	D Employer identification number 85-0364261
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite ONE COMMON GROUND	E Telephone number (406) 859-8683	
	City or town, state or country, and ZIP + 4 PHILIPSBURG, MT 59858	F Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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).

Hand I are not applicable to section 527 organizations.

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

H(b) If "Yes," enter number of affiliates ▶ **N/A**

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶ **WWW.VOTE-SMART.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.

I Group Exemption Number ▶ **N/A**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,671,220.**

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

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a			
	b Direct public support (not included on line 1a)	1b	1,345,632.		
	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 \$ 1,317,152. noncash \$ 28,480.)	1e			1,345,632.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			
	5 Dividends and interest from securities	5			62,278.
	6 a 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 MORTGAGE INTEREST INCOME)	7			11,732.	
8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	251,578.	8a			
	242,558.	8b			
	9,020.	8c			
d Net gain or (loss). Combine line 8c, columns (A) and (B) STMT 1	8d			9,020.	
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a				
b Less: direct expenses other than fundraising expenses	9b				
c Net income or (loss) from special events. Subtract line 9b from line 9a	9c				
10 a 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				
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			1,428,662.	
Expenses	13 Program services (from line 44, column (B))	13		1,034,166.	
	14 Management and general (from line 44, column (C))	14		181,457.	
	15 Fundraising (from line 44, column (D))	15		153,832.	
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses. Add lines 16 and 44, column (A)	17			1,369,455.
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18		59,207.	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		3,811,566.	
	20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 2	20		37,047.	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21			3,907,820.

**CENTER FOR NATIONAL INDEPENDENCE IN
POLITICS**

Form 990 (2006)

85-0364261 Page 2

**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.

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
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 STMT 4	122,696.	87,639.	17,529.	17,528.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
c 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)				
26 Salaries and wages of employees not included on lines 25a, b, and c	502,890.	403,647.	57,853.	41,390.
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27	51,259.	40,254.	6,177.	4,828.
29 Payroll taxes	49,827.	39,130.	6,004.	4,693.
30 Professional fundraising fees				
31 Accounting fees	10,001.		10,001.	
32 Legal fees				
33 Supplies				
34 Telephone	40,666.	31,936.	4,900.	3,830.
35 Postage and shipping	104,211.	64,685.	11,984.	27,542.
36 Occupancy	36,928.	29,000.	4,450.	3,478.
37 Equipment rental and maintenance	9,995.	9,995.		
38 Printing and publications	140,193.	105,145.	7,009.	28,039.
39 Travel	35,807.	28,120.	4,315.	3,372.
40 Conferences, conventions, and meetings				
41 Interest	1,919.	1,919.		
42 Depreciation, depletion, etc. (attach schedule)	77,974.	74,075.	3,899.	
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 3	185,089.	118,621.	47,336.	19,132.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	1,369,455.	1,034,166.	181,457.	153,832.

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 \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

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? EDUCATION:NON-PARTISAN INFORMATION ABOUT POLITICAL CANDIDATES.	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)	
a 1-800 VOTER RESEARCH HOTLINE & COMPUTER ON-LINE THESE ALLOW ACCESS TO NONPARTISAN INFORMATION ABOUT NATIONAL CANDIDATES AND ELECTED OFFICIALS VIA THE INTERNET AND BULLETIN BOARDS.	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	302,545.
b OUTREACH PROGRAMS: LIBRARY PARTNERSHIPS, YOUTH ORGANIZATION PARTNERSHIPS AND INTERN PROGRAMS WHERE STUDENTS AND MEMBERS FROM ACROSS THE COUNTRY CAN WORK AT PROJECT VOTE SMART.	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	165,686.
c NATIONAL POLITICAL AWARENESS TEST: AN ISSUES QUESTIONNAIRE SENT TO EVERY CANDIDATE FOR FEDERAL OFFICE TO DETERMINE THEIR STANCE ON ISSUES THEY WOULD LIKELY FACE IF ELECTED. RESPONSES AVAILABLE THROUGH THE 1-800 RESEARCH HOTLINE.	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	258,822.
d PUBLICATIONS: REPORTERS' RESOURCE BOOK, US GOVT OWNERS MANUAL, VOTER'S SELF-DEFENSE MANUAL, WEB YELLOW PAGES ALL AVAILABLE THROUGH PROJECT VOTE SMART	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	167,238.
e Other program services (attach schedule) SEE STATEMENT 5	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	139,875.
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	1,034,166.

Form 990 (2006)

**CENTER FOR NATIONAL INDEPENDENCE IN
POLITICS**

Form 990 (2006)

85-0364261 Page 4

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	77,417.	45	76,185.	
	46 Savings and temporary cash investments	1,492,812.	46	1,563,178.	
	47 a Accounts receivable	47a			
	b Less: allowance for doubtful accounts	47b		47c	
	48 a Pledges receivable	48a			
	b Less: allowance for doubtful accounts	48b		48c	
	49 Grants receivable			49	
	50 a Receivables from current and former officers, directors, trustees, and key employees			50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			50b	
	51 a Other notes and loans receivable	179,029.	51a		
	b Less: allowance for doubtful accounts		51b		
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges			53	
	54 a Investments - publicly-traded securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments - other securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
55 a Investments - land, buildings, and equipment: basis	55a				
b Less: accumulated depreciation	55b		55c		
56 Investments - other	SEE STATEMENT 6	319,067.	56	356,525.	
57 a Land, buildings, and equipment: basis	2,365,563.	57a			
b Less: accumulated depreciation STMT 7	628,270.	57b			
58 Other assets, including program-related investments (describe ▶ EMPLOYEE RECEIVABLE)	5,000.		58	3,410.	
59 Total assets (must equal line 74). Add lines 45 through 58	3,825,422.		59	3,915,620.	
Liabilities	60 Accounts payable and accrued expenses		60		
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities		64a		
	b Mortgages and other notes payable		64b		
	65 Other liabilities (describe ▶ CREDIT CARDS PAYABLE)	13,856.		65	7,800.
66 Total liabilities. Add lines 60 through 65	13,856.		66	7,800.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	3,299,126.	67	3,360,890.	
	68 Temporarily restricted	18,529.	68	19,372.	
	69 Permanently restricted	493,911.	69	527,558.	
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	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)	3,811,566.	73		3,907,820.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	3,825,422.	74		3,915,620.

Form 990 (2006)

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a Total revenue, gains, and other support per audited financial statements		a	N/A
b Amounts included on line a but not on Part I, line 12:			
1 Net unrealized gains on investments	b1		
2 Donated services and use of facilities	b2		
3 Recoveries of prior year grants	b3		
4 Other (specify):	b4		
Add lines b1 through b4		b	
c Subtract line b from line a		c	
d Amounts included on Part I, line 12, but not on line a :			
1 Investment expenses not included on Part I, line 6b	d1		
2 Other (specify):	d2		
Add lines d1 and d2		d	
e Total revenue (Part I, line 12). Add lines c and d		e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a Total expenses and losses per audited financial statements		a	N/A
b Amounts included on line a but not on Part I, line 17:			
1 Donated services and use of facilities	b1		
2 Prior year adjustments reported on Part I, line 20	b2		
3 Losses reported on Part I, line 20	b3		
4 Other (specify):	b4		
Add lines b1 through b4		b	
c Subtract line b from line a		c	
d Amounts included on Part I, line 17, but not on line a :			
1 Investment expenses not included on Part I, line 6b	d1		
2 Other (specify):	d2		
Add lines d1 and d2		d	
e Total expenses (Part I, line 17). Add lines c and d		e	

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
----- SEE STATEMENT 8		122,696.	0.	0.

CENTER FOR NATIONAL INDEPENDENCE IN POLITICS

Form 990 (2006)

85-0364261 Page 6

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) Yes No
75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 39
75 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? SEE STATEMENT 9
75 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? X
75 d Does the organization have a written conflict of interest policy? X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)
Table with 5 columns: (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. All entries are NONE.

Part VI Other Information (See the instructions.) Yes No
76 Did the organization make a change in its activities or methods of conducting activities? X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X
78 b If "Yes," has it filed a tax return on Form 990-T for this year? N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? X
80 b If "Yes," enter the name of the organization N/A
81 a Enter direct or indirect political expenditures. (See line 81 instructions.) 81a 0
81 b Did the organization file Form 1120-POL for this year? X

Form 990 (2006)

**CENTER FOR NATIONAL INDEPENDENCE IN
POLITICS**

Form 990 (2006)

85-0364261 Page 7

Part VI Other Information (continued)		Yes	No
82 a	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	
83 a	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	
84 a	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	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	
b	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.			
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
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) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	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
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ <u>0.</u> ; section 4912 ▶ <u>0.</u> ; section 4955 ▶ <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations. 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
90 a	List the states with which a copy of this return is filed ▶ NONE		
b	Number of employees employed in the pay period that includes March 12, 2006	90b	26
91 a	The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ (406) 859-8683 Located at ▶ ONE COMMON GROUND, PHILIPSBURG, MT ZIP + 4 ▶ 59858		
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	X
If "Yes," enter the name of the foreign country ▶ N/A			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.			

Form 990 (2006)

**CENTER FOR NATIONAL INDEPENDENCE IN
POLITICS**

Form 990 (2006)

85-0364261 Page **8**

Part VI Other Information (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c
 If "Yes," enter the name of the foreign country N/A

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 N/A

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) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
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 ...					
96 Dividends and interest from securities			14	62,278.	
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			14	11,732.	
100 Gain or (loss) from sales of assets other than inventory			18	9,020.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		83,030.	0.
105 Total (add line 104, columns (B), (D), and (E))					83,030.

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).
▼	

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).

**CENTER FOR NATIONAL INDEPENDENCE IN
POLITICS**

Form 990 (2006)

85-0364261 Page 9

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). **N/A**

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	----- ----- -----			
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 Identification 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

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.

Please Sign Here	Signature of officer _____	Date _____	
	Type or print name and title _____		
Paid Preparer's Use Only	Preparer's signature _____	Date _____	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 _____	EIN _____	Preparer's SSN or PTIN (See Gen. Inst. X) _____
		Phone no. _____	

Form 990 (2006)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2006

Name of the organization **CENTER FOR NATIONAL INDEPENDENCE IN POLITICS** Employer identification number **85 0364261**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
CLINTON ADAMS 3800 PARKVIEW LANE, 2C, IRVINE, CA 92714	I.T. DIRECTOR 40.00	50,846.	0.	0.
Total number of other employees paid over \$50,000	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	0	

CENTER FOR NATIONAL INDEPENDENCE IN

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.) 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.	1	X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?	2a	X
b	Lending of money or other extension of credit?	2b	X
c	Furnishing of goods, services, or facilities?	2c	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	2d	X
e	Transfer of any part of its income or assets?	2e	X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) SEE STATEMENT 10	3a	X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	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	3c	X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	X
b	Did the organization make any taxable distributions under section 4966?	4b	X
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	X
d	Enter the total number of donor advised funds owned at the end of the tax year		0
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		0.
f	Enter the total number of separate funds or accounts owned at the end of the 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 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	
Total					▶

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

CENTER FOR NATIONAL INDEPENDENCE IN

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.)	1,451,608.	1,455,204.	1,367,640.	1,542,330.	5,816,782.
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	66,904.	47,117.	43,089.	28,768.	185,878.
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	16,692.	-24,966.	SEE STATEMENT 11 43,948.	-25,540.	10,134.
23 Total of lines 15 through 22	1,535,204.	1,477,355.	1,454,677.	1,545,558.	6,012,794.
24 Line 23 minus line 17	1,535,204.	1,477,355.	1,454,677.	1,545,558.	6,012,794.
25 Enter 1% of line 23	15,352.	14,774.	14,547.	15,456.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 120,256.
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					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 6,012,794.
d Add: Amounts from column (e) for lines: 18 185,878. 19 _____ 22 10,134. 26b _____					26d 196,012.
e Public support (line 26c minus line 26d total)					26e 5,816,782.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 96.7401%
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: N/A (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: N/A (2005) _____ (2004) _____ (2003) _____ (2002) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

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.

NONE

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		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?		
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?		
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?		
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.)			

34 a	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.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

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
		N/A	
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				N/A
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

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 .)			0.

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

Table with 3 columns: Question, Yes, No. Rows include 51a(i) Cash, a(ii) Other assets, b(i) Sales or exchanges of assets, b(ii) Purchases of assets, b(iii) Rental of facilities, b(iv) Reimbursement arrangements, b(v) Loans or loan guarantees, b(vi) Performance of services, and c Sharing of facilities.

- (i) Cash
(ii) Other assets
b Other transactions:
(i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: N/A

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule: N/A

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	BUILDINGS							
115	MT 2 WOODSTOVES							
	031300	SL	7.00	16	1,000.		870.	130.
116	MT MAIN OFFICE REMODEL							
	033100	SL	40.00	16	33,236.		4,986.	831.
117	MT SEPTIC DRAINFIELD							
	033100	SL	20.00	16	10,705.		3,210.	535.
118	MT ALL PHASE REMODEL							
	033100	SL	40.00	16	26,373.		3,954.	659.
119	MT LODGE REMODEL							
	033100	SL	40.00	16	1,786.		270.	45.
120	MT CABIN REMODEL							
	033100	SL	40.00	16	1,472.		222.	37.
121	MT OFFICE REMODEL							
	033100	SL	40.00	16	680.		102.	17.
123	BUILDING (MONTANA)							
	063099	SL	40.00	16	250,238.		42,228.	6,256.
124	BUILDING (MONTANA)							
	063099	SL	40.00	16	1,000,951.		168,912.	25,024.
127	2 WATER HEATERS							
	050400	SL	10.00	16	1,732.		1,024.	173.
133	TENNIS & BASKETBALL COURT							
	072800	SL	20.00	16	23,084.		6,539.	1,154.
137	SEWER LINE							
	100401	SL	20.00	16	5,000.		1,125.	250.
138	DRAINFIELD							
	110601	SL	20.00	16	5,795.		1,281.	290.
139	MAIN OFFICE							
	092701	SL	40.00	16	153,571.		17,276.	3,839.
140	CABIN							
	090401	SL	40.00	16	7,440.		853.	186.
144	RIP RAP ROCK							
	072301	SL	20.00	16	600.		140.	30.
149	FIBER CABLE							
	051101	SL	20.00	16	1,128.		276.	56.
151	LODGE DINING ROOM/BASEMENT							
	022803	SL	40.00	16	122,075.		9,410.	3,052.
152	SMALL CABIN #1							
	060402	SL	40.00	16	25,000.		2,396.	625.
153	SMALL CABIN #2							
	060402	SL	40.00	16	25,000.		2,396.	625.
154	LARGE CABIN							
	060402	SL	40.00	16	35,134.		3,366.	878.
155	HOMESTEAD CABIN							
	091002	SL	40.00	16	12,550.		1,125.	314.
156	BARN/BRIDGE IMPROVEMENTS							
	091002	SL	40.00	16	4,092.		366.	102.
157	WINDOWS - BACK OFFICE							
	071102	SL	7.00	16	1,420.		761.	203.
158	CARPET/VINYL - LODGE, CABINS							
	011303	SL	7.00	16	5,349.		2,483.	764.
159	RENOVATION - BIG HOUSE							
	033103	SL	40.00	16	6,000.		450.	150.

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
167	IMPROVEMENTS, 03-04							
	09/01/03	SL	40.00	16	53,868.		3,480.	1,347.
169	ROOF REPLACEMENT							
	10/01/04	SL	39.50	16	6,194.		235.	157.
170	BRIDGE REPLACEMENT							
	06/01/04	SL	15.00	16	7,000.		856.	467.
171	LODGE IMPROVEMENT							
	01/01/06	SL	40.00	16	10,000.		63.	250.
192	BARN IMPROVEMENTS							
	01/01/06	SL	20.00	16	5,000.		63.	250.
203	LIBRARY							
	05/31/06	SL	40.00	16	38,593.			804.
214	OFFICE EXTENSION							
	01/01/06	SL	40.00	16	50,326.		315.	1,258.
225	FENCING							
	06/06/05	SL	15.00	16	4,920.		273.	328.
274	FENCING							
	07/31/06	SL	15.00	16	7,327.			326.
296	NEW ROOF - VALLEY FORGE BUILDING							
	04/30/06	SL	20.00	16	18,500.			848.
	* 990 PAGE 2 TOTAL BUILDINGS							
					1,963,139.	0.	281,306.	52,260.
	FURNITURE & FIXTURES							
125	20 BUNK BEDS/40 TWIN MATTRESSES							
	04/17/00	SL	7.00	16	9,175.		7,756.	1,311.
126	10 DRESSERS							
	04/17/00	SL	7.00	16	500.		420.	71.
130	9 OFFICE CHAIRS							
	04/05/00	SL	7.00	16	630.		540.	90.
147	CARPET							
	08/30/01	SL	7.00	16	737.		481.	105.
247	LODGE FURNITURE							
	10/30/05	SL	7.00	16	1,700.		101.	243.
248	LODGE FURNITURE							
	03/14/06	SL	7.00	16	500.		6.	71.
297	WASHER & DRYER							
	06/03/06	SL	7.00	16	538.			64.
298	OFFICE FURNITURE - TUSCON							
	02/28/07	SL	7.00	16	7,182.			86.
	* 990 PAGE 2 TOTAL FURNITURE & FIXTURES							
					20,962.	0.	9,304.	2,041.
	MACHINERY & EQUIPMENT							
65	SCANNER (ON-LINE)							
	03/14/95	SL	5.00	17	824.		824.	0.
66	PRINTER (NORTHEASTERN 1-800)							
	06/01/95	SL	5.00	16	1,641.		1,641.	0.
73	ZIP DRIVE & 4 CD ROM							
	04/02/96	SL	5.00	16	900.		900.	0.
77	PRINTER FOR MEMBERSHIP							
	04/09/96	SL	5.00	16	1,450.		1,450.	0.
79	ON-LINE COMPUTER EQUIPMENT							
	05/01/96	SL	5.00	16	23,644.		23,644.	0.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
80	HOT-LINE COMPUTER EQUIPMENT							
	082696	SL	5.00	16	875.		875.	0.
82	CD ROM & CD							
	011597	SL	5.00	16	773.		773.	0.
83	SOUNDCARD							
	021397	SL	5.00	16	211.		211.	0.
84	COMPUTER EQUIPMENT							
	031397	SL	5.00	16	1,047.		1,047.	0.
85	2 COMPUTECH COMPUTERS							
	041597	SL	5.00	16	2,153.		2,153.	0.
86	7 CTX AND 3 AST ADVENTURE COMPUTERS							
	060397	SL	5.00	16	12,376.		12,376.	0.
87	2 MICRON P-200 SERVERS							
	090597	SL	5.00	16	4,951.		4,951.	0.
88	11 P-133 COMPUTERS-BOSTON							
	091097	SL	5.00	16	6,095.		6,095.	0.
89	1 MWI DATACOM WORKSTATION							
	102797	SL	5.00	16	1,515.		1,515.	0.
90	NETWORK CARDS, CABLES, HUBS							
	082997	SL	5.00	16	3,857.		3,857.	0.
91	COMPUTER							
	033198	SL	5.00	16	1,159.		1,159.	0.
93	TENT FACADE							
	061097	SL	7.00	16	900.		900.	0.
94	TENT PIPES							
	070797	SL	7.00	16	1,746.		1,743.	0.
95	TENT BANNER & WALLS							
	071097	SL	7.00	16	1,568.		1,568.	0.
96	COMPUTER EQUIPMENT							
	042398	SL	5.00	16	618.		618.	0.
97	COMPUTER EQUIPMENT							
	050898	SL	5.00	16	17,735.		17,735.	0.
98	COMPUTER EQUIPMENT							
	051498	SL	5.00	16	1,149.		1,149.	0.
99	COMPUTER EQUIPMENT							
	060298	SL	5.00	16	8,160.		8,160.	0.
100	COMPUTER EQUIPMENT							
	062198	SL	5.00	16	2,427.		2,427.	0.
101	COMPUTER EQUIPMENT							
	062298	SL	5.00	16	1,700.		1,700.	0.
102	COMPUTER EQUIPMENT							
	072098	SL	5.00	16	1,862.		1,862.	0.
103	MICRON COMPUTER							
	011499	SL	5.00	16	2,797.		2,797.	0.
105	MICRON COMPUTERS							
	042899	SL	5.00	16	5,506.		5,506.	0.
106	COPIER							
	012500	SL	5.00	16	12,995.		12,995.	0.
107	COMPUTER							
	071499	SL	5.00	16	1,075.		1,075.	0.
108	COMPUTER							
	071699	SL	5.00	16	1,429.		1,429.	0.
109	COMPUTERS							
	072399	SL	5.00	16	15,462.		15,462.	0.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
110	COMPUTER							
	011900	SL	5.00	16	1,089.		1,089.	0.
111	COMPUTER							
	030700	SL	5.00	16	4,948.		4,948.	0.
128	4 NORSTAR TELEPHONES							
	081700	SL	7.00	16	1,203.		960.	172.
129	3 P100 COMPUTERS							
	062000	SL	5.00	16	693.		693.	0.
131	TELEPHONE HEADSETS							
	062000	SL	7.00	16	669.		552.	96.
132	BASKETBALL GOALS/EQUIPMENT							
	073100	SL	7.00	16	633.		510.	90.
134	WEIGHTLIFTING EQUIPMENT							
	040100	SL	7.00	16	2,000.		1,716.	284.
135	COMPUTERS							
	061701	SL	5.00	16	3,010.		2,860.	150.
136	FOLDING MACHINE							
	012102	SL	7.00	16	3,505.		2,087.	501.
145	GYM EQUIPMENT							
	122801	SL	7.00	16	1,700.		1,033.	243.
146	SADDLES/TACK							
	040901	SL	7.00	16	2,240.		1,600.	320.
148	SEWAGE PUMP							
	072301	SL	7.00	16	598.		397.	85.
160	COMPUTER SWITCHER							
	062102	SL	5.00	16	1,173.		881.	235.
161	WEBSITE SERVER							
	062702	SL	5.00	16	992.		743.	198.
162	SODA VENDING MACHINE							
	012303	SL	7.00	16	600.		272.	86.
166	DELL COMPUTER							
	110703	SL	5.00	16	956.		462.	191.
168	GOLF CART							
	090403	SL	7.00	16	3,995.		1,475.	571.
172	33 COMPUTER WORKSTATIONS							
	050104	SL	5.00	16	22,516.		8,631.	4,503.
173	COPIER MACHINE							
	062104	SL	5.00	16	18,729.		6,555.	3,746.
175	TRACTOR							
	013105	SL	7.00	16	5,601.		933.	800.
176	ROTARY CUTTER							
	013105	SL	7.00	16	517.		86.	74.
177	SNOWBLOWER							
	013105	SL	7.00	16	1,982.		330.	283.
178	LAPTOP COMPUTER-GREAT AMCO							
	031005	SL	5.00	16	1,365.		296.	273.
236	KITCHEN OVEN REPAIR							
	052005	SL	10.00	16	2,150.		179.	215.
259	COMPUTER							
	042005	SL	5.00	16	979.		179.	196.
260	COMPUTER							
	011306	SL	5.00	16	703.		35.	141.
273	TAPE DRIVE							
	051806	SL	5.00	16	2,787.			464.

Asset Number	Description of property								
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction	
285	25	COMPUTERS - TUSCON OFFICE							
	120706	SL	5.00	16	12,182.			812.	
309	5	COMPUTER MONITORS							
	052506	SL	5.00	16	1,300.			217.	
310	8	PHONES & INSTALLATION							
	071306	SL	5.00	16	1,460.			219.	
311		PRINTER - TUSCON OFFICE							
	012506	SL	5.00	16	1,936.			387.	
312		LAPTOP COMPUTER - DIRECTOR							
	022207	SL	5.00	16	1,551.			26.	
313		ROUTER - BLACKFOOT							
	032207	SL	5.00	16	2,262.			0.	
314		COPY MACHINE - TUSCON							
	022007	SL	5.00	16	3,647.			61.	
315		PROCURVE SWITCH							
	112706	SL	5.00	16	520.			35.	
316		POWER SUPPLY-SERVER							
	063006	SL	5.00	16	528.			79.	
328		FIREWALL CISCO PIX							
	010107	SL	5.00	16	549.			27.	
339		HP LASERJET 4250DTN							
	060906	SL	5.00	16	1,451.			242.	
350		LAPTOP - ADELAIDE							
	062806	SL	5.00	16	1,283.			192.	
351		SUPERMICRO SUPERSERVER							
	012107	SL	5.00	16	847.			28.	
		* 990 PAGE 2 TOTAL MACHINERY & EQUIPMENT							
					257,449.	0.	180,099.	16,242.	
		TRANSPORTATION EQUIPMENT							
81		VAN-DAMEROW FORD (INTERNS)							
	110496	SL	5.00	16	16,975.		16,975.	0.	
104		FORD TRUCK							
	032999	SL	7.00	16	21,000.		21,000.	0.	
112		SNOWMOBILE							
	100999	SL	7.00	16	4,300.		3,991.	309.	
113		SNOWMOBILE							
	100999	SL	7.00	16	3,420.		3,178.	242.	
174		SNOWMOBILE							
	111704	SL	7.00	16	2,799.		533.	400.	
180		HORSE VAN							
	050604	SL	5.00	16	12,625.		4,840.	2,525.	
181		HORSE TRAILER							
	031805	SL	5.00	16	1,750.		350.	350.	
		* 990 PAGE 2 TOTAL TRANSPORTATION EQUIPMENT							
					62,869.	0.	50,867.	3,826.	
		LAND							
122		LAND (MONTANA)							
	063099	L			26,839.			0.	
		* 990 PAGE 2 TOTAL LAND							
					26,839.	0.	0.	0.	
		PROGRAM SERVICES							

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
114	ZIP CODE SOFTWARE							
	033100	SL	3.00	16	9,696.		9,696.	0.
163	HORSE - SAPPHIRE							
	041802	SL	3.00	16	3,248.		3,248.	0.
164	HORSE							
	042403	SL	3.00	16	3,000.		2,917.	83.
165	SOFTWARE-DONOR TRACKING							
	082003	SL	3.00	16	13,355.		11,501.	1,854.
179	HORSE - CLETE							
	022805	SL	3.00	16	2,800.		1,011.	933.
261	ICE SOFTWARE							
	051805	SL	3.00	16	1,011.		281.	337.
262	SOFTWARE INC.							
	011906	SL	3.00	16	1,195.		66.	398.
	* 990 PAGE 2 TOTAL PROGRAM SERVICES				34,305.	0.	28,720.	3,605.
	* GRAND TOTAL 990 PAGE 2 DEPR				2,365,563.	0.	550,296.	77,974.

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
21,123.336 SHS AIM SHORT TERM BOND FUND	207,220.	214,078.	0.	-6,858.
400 SHS MORGAN STANLEY CAP TR II	9,895.	9,996.	0.	-101.
3 SHS EXXON MOBIL	146.	184.	0.	-38.
\$15,000 BOND HOUSEHOLD FINANCE CORP	15,035.	14,989.	0.	46.
6 SHS CALGENE CORP	219.	271.	0.	-52.
50 SHS BANK OF AMERICA CORP	2,503.	2,570.	0.	-67.
4 SHS PROCTOR & GAMBLE CO	198.	252.	0.	-54.
3 SHS CONOCOPHILLIPS	149.	218.	0.	-69.
CAPITAL GAINS DISTRIBUTIONS	16,213.	0.	0.	16,213.
TO FORM 990, PART I, LINE 8	251,578.	242,558.	0.	9,020.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 2

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	28,047.
CAPITALIZE PREPAYMENT ON NEW ROOF-VALLEY FORGE BUILDING-EXPENSED IN PRIOR YEAR	9,000.
TOTAL TO FORM 990, PART I, LINE 20	37,047.

FORM 990 OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
ADVERTISING	5,692.	5,692.	0.	0.
BANK CHARGES	9,554.	4,616.	4,938.	0.
OUTSIDE LABOR	1,606.	1,606.	0.	0.
CONSULTANT FEES	9,801.	9,801.	0.	0.
DUES & SUBSCRIPTIONS	17,080.	16,830.	250.	0.
VEHICLE EXPENSE	11,171.	5,586.	5,585.	0.
INSURANCE	24,109.	0.	24,109.	0.
FACILITIES	65,708.	51,602.	7,918.	6,188.
MISCELLANEOUS	1,350.	675.	675.	0.

CENTER FOR NATIONAL INDEPENDENCE IN POLI

85-0364261

OFFICE SUPPLIES	10,870.	8,536.	1,310.	1,024.
OFFICE				
FURNISHINGS/EQUIP	12,290.	9,652.	1,481.	1,157.
SCHOLARSHIPS	655.	655.	0.	0.
CORPORATE FEES &				
DUES	1,070.	0.	1,070.	0.
MAILING LISTS	14,133.	3,370.	0.	10,763.
TOTAL TO FM 990, LN 43	185,089.	118,621.	47,336.	19,132.

FORM 990 OFFICER COMPENSATION ALLOCATION STATEMENT 4
PART II, LINE 25A

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
RICHARD KIMBALL	85,724.			85,724.
A. PROGRAM SERVICES	61,231.			61,231.
B. MANAGEMENT AND GENERAL	12,247.			12,247.
C. FUNDRAISING	12,246.			12,246.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
ADELAIDE ELM KIMBALL	36,972.			36,972.
A. PROGRAM SERVICES	26,408.			26,408.
B. MANAGEMENT AND GENERAL	5,282.			5,282.
C. FUNDRAISING	5,282.			5,282.

TOTAL PROGRAM SERVICES				87,639.
TOTAL MANAGEMENT AND GENERAL				17,529.
TOTAL FUNDRAISING				17,528.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PART II, LINE 25A				122,696.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 5

DESCRIPTION OF OTHER PROGRAM SERVICES	GRANTS AND ALLOCATIONS	EXPENSES
PRESS/MEDIA: COMMUNITY RELATIONS, CONGRESSIONAL	0.	139,875.
TOTAL TO FORM 990, PART III, LINE E		139,875.

FORM 990	OTHER INVESTMENTS	STATEMENT	6
DESCRIPTION	VALUATION METHOD	AMOUNT	
MUTUAL FUNDS	MARKET VALUE	356,525.	
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		356,525.	

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	7
----------	--	-----------	---

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
SCANNER (ON-LINE)	824.	824.	0.
PRINTER (NORTHEASTERN 1-800)	1,641.	1,641.	0.
ZIP DRIVE & 4 CD ROM	900.	900.	0.
PRINTER FOR MEMBERSHIP	1,450.	1,450.	0.
ON-LINE COMPUTER EQUIPMENT	23,644.	23,644.	0.
HOT-LINE COMPUTER EQUIPMENT	875.	875.	0.
VAN-DAMEROW FORD (INTERNS)	16,975.	16,975.	0.
CD ROM & CD	773.	773.	0.
SOUNDCARD	211.	211.	0.
COMPUTER EQUIPMENT	1,047.	1,047.	0.
2 COMPUTECH COMPUTERS	2,153.	2,153.	0.
7 CTX AND 3 AST ADVENTURE COMPUTERS	12,376.	12,376.	0.
2 MICRON P-200 SERVERS	4,951.	4,951.	0.
11 P-133 COMPUTERS-BOSTON	6,095.	6,095.	0.
1 MWI DATACOM WORKSTATION	1,515.	1,515.	0.
NETWORK CARDS, CABLES, HUBS	3,857.	3,857.	0.
COMPUTER	1,159.	1,159.	0.
TENT FACADE	900.	900.	0.
TENT PIPES	1,746.	1,743.	3.
TENT BANNER & WALLS	1,568.	1,568.	0.
COMPUTER EQUIPMENT	618.	618.	0.
COMPUTER EQUIPMENT	17,735.	17,735.	0.
COMPUTER EQUIPMENT	1,149.	1,149.	0.
COMPUTER EQUIPMENT	8,160.	8,160.	0.
COMPUTER EQUIPMENT	2,427.	2,427.	0.
COMPUTER EQUIPMENT	1,700.	1,700.	0.
COMPUTER EQUIPMENT	1,862.	1,862.	0.
MICRON COMPUTER	2,797.	2,797.	0.
FORD TRUCK	21,000.	21,000.	0.
MICRON COMPUTERS	5,506.	5,506.	0.
COPIER	12,995.	12,995.	0.
COMPUTER	1,075.	1,075.	0.
COMPUTER	1,429.	1,429.	0.

COMPUTERS	15,462.	15,462.	0.
COMPUTER	1,089.	1,089.	0.
COMPUTER	4,948.	4,948.	0.
SNOWMOBILE	4,300.	4,300.	0.
SNOWMOBILE	3,420.	3,420.	0.
ZIP CODE SOFTWARE	9,696.	9,696.	0.
MT 2 WOODSTOVES	1,000.	1,000.	0.
MT MAIN OFFICE REMODEL	33,236.	5,817.	27,419.
MT SEPTIC DRAINFIELD	10,705.	3,745.	6,960.
MT ALL PHASE REMODEL	26,373.	4,613.	21,760.
MT LODGE REMODEL	1,786.	315.	1,471.
MT CABIN REMODEL	1,472.	259.	1,213.
MT OFFICE REMODEL	680.	119.	561.
LAND (MONTANA)	26,839.	0.	26,839.
BUILDING (MONTANA)	250,238.	48,484.	201,754.
BUILDING (MONTANA)	1,000,951.	193,936.	807,015.
20 BUNK BEDS/40 TWIN MATTRESSES	9,175.	9,067.	108.
10 DRESSERS	500.	491.	9.
2 WATER HEATERS	1,732.	1,197.	535.
4 NORSTAR TELEPHONES	1,203.	1,132.	71.
3 P100 COMPUTERS	693.	693.	0.
9 OFFICE CHAIRS	630.	630.	0.
TELEPHONE HEADSETS	669.	648.	21.
BASKETBALL GOALS/EQUIPMENT	633.	600.	33.
TENNIS & BASKETBALL COURT	23,084.	7,693.	15,391.
WEIGHTLIFTING EQUIPMENT	2,000.	2,000.	0.
COMPUTERS	3,010.	3,010.	0.
FOLDING MACHINE	3,505.	2,588.	917.
SEWER LINE	5,000.	1,375.	3,625.
DRAINFIELD	5,795.	1,571.	4,224.
MAIN OFFICE	153,571.	21,115.	132,456.
CABIN	7,440.	1,039.	6,401.
RIP RAP ROCK	600.	170.	430.
GYM EQUIPMENT	1,700.	1,276.	424.
SADDLES/TACK	2,240.	1,920.	320.
CARPET	737.	586.	151.
SEWAGE PUMP	598.	482.	116.
FIBER CABLE	1,128.	332.	796.
LODGE DINING ROOM/BASEMENT	122,075.	12,462.	109,613.
SMALL CABIN #1	25,000.	3,021.	21,979.
SMALL CABIN #2	25,000.	3,021.	21,979.
LARGE CABIN	35,134.	4,244.	30,890.
HOMESTEAD CABIN	12,550.	1,439.	11,111.
BARN/BRIDGE IMPROVEMENTS	4,092.	468.	3,624.
WINDOWS-BACK OFFICE	1,420.	964.	456.
CARPET/VINYL-LODGE, CABINS	5,349.	3,247.	2,102.
RENOVATION - BIG HOUSE	6,000.	600.	5,400.
COMPUTER SWITCHER	1,173.	1,116.	57.
WEBSITE SERVER	992.	941.	51.
SODA VENDING MACHINE	600.	358.	242.
HORSE - SAPPHIRE	3,248.	3,248.	0.
HORSE	3,000.	3,000.	0.
SOFTWARE-DONOR TRACKING	13,355.	13,355.	0.

DELL COMPUTER	956.	653.	303.
IMPROVEMENTS, 03-04	53,868.	4,827.	49,041.
GOLF CART	3,995.	2,046.	1,949.
ROOF REPLACEMENT	6,194.	392.	5,802.
BRIDGE REPLACEMENT	7,000.	1,323.	5,677.
LODGE IMPROVEMENT	10,000.	313.	9,687.
33 COMPUTER WORKSTATIONS	22,516.	13,134.	9,382.
COPIER MACHINE	18,729.	10,301.	8,428.
SNOWMOBILE	2,799.	933.	1,866.
TRACTOR	5,601.	1,733.	3,868.
ROTARY CUTTER	517.	160.	357.
SNOWBLOWER	1,982.	613.	1,369.
LAPTOP COMPUTER-GREAT AMCO	1,365.	569.	796.
HORSE - CLETE	2,800.	1,944.	856.
HORSE VAN	12,625.	7,365.	5,260.
HORSE TRAILER	1,750.	700.	1,050.
BARN IMPROVEMENTS	5,000.	313.	4,687.
LIBRARY	38,593.	804.	37,789.
OFFICE EXTENSION	50,326.	1,573.	48,753.
FENCING	4,920.	601.	4,319.
KITCHEN OVEN REPAIR	2,150.	394.	1,756.
LODGE FURNITURE	1,700.	344.	1,356.
LODGE FURNITURE	500.	77.	423.
COMPUTER	979.	375.	604.
COMPUTER	703.	176.	527.
ICE SOFTWARE	1,011.	618.	393.
SOFTWARE INC.	1,195.	464.	731.
TAPE DRIVE	2,787.	464.	2,323.
FENCING	7,327.	326.	7,001.
25 COMPUTERS - TUSCON OFFICE	12,182.	812.	11,370.
NEW ROOF - VALLEY FORGE			
BUILDING	18,500.	848.	17,652.
WASHER & DRYER	538.	64.	474.
OFFICE FURNITURE - TUSCON	7,182.	86.	7,096.
5 COMPUTER MONITORS	1,300.	217.	1,083.
8 PHONES & INSTALLATION	1,460.	219.	1,241.
PRINTER - TUSCON OFFICE	1,936.	387.	1,549.
LAPTOP COMPUTER - DIRECTOR	1,551.	26.	1,525.
ROUTER - BLACKFOOT	2,262.	0.	2,262.
COPY MACHINE - TUSCON	3,647.	61.	3,586.
PROCURVE SWITCH	520.	35.	485.
POWER SUPPLY-SERVER	528.	79.	449.
FIREWALL CISCO PIX	549.	27.	522.
HP LASERJET 4250DTN	1,451.	242.	1,209.
LAPTOP - ADELAIDE	1,283.	192.	1,091.
SUPERMICRO SUPERSERVER	847.	28.	819.
TOTAL TO FORM 990, PART IV, LN 57	2,365,563.	628,270.	1,737,293.

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 8

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
RICHARD KIMBALL ONE COMMON GROUND PHILIPSBURG, MT 59858	PRESIDENT 40.00	85,724.	0.	0.
ADELAIDE ELM KIMBALL ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD CHAIR/SECRETARY 40.00	36,972.	0.	0.
SUSAN BRANDES ONE COMMON GROUND PHILIPSBURG, MT 59858	SECRETARY/TREAS 2.00	0.	0.	0.
KYLE DELL ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 2.00	0.	0.	0.
MIKE KREJCI ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 2.00	0.	0.	0.
DAN O'NEILL ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 2.00	0.	0.	0.
JESSICA ARRIGONI ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 2.00	0.	0.	0.
BRENT STEEL ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 2.00	0.	0.	0.
JON TRACHTA ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 2.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		122,696.	0.	0.

FORM 990 EXPLANATION OF RELATIONSHIP STATEMENT 9
PART V-A, LINE 75B

INDIVIDUAL'S NAME	TITLE OR ROLE
RICHARD KIMBALL	PRESIDENT OF THE BOARD

INDIVIDUAL'S NAME	TITLE OR ROLE
ADELAIDE ELM KIMBALL	BOARD MEMBER

EXPLANATION OF RELATIONSHIP
MARRIED

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 10
PART III, LINE 3A

SEE ATTACHED PROJECT VOTE SMART NATIONAL INTERNSHIP PROGRAM INFORMATION.

SCHEDULE A	OTHER INCOME				STATEMENT 11
DESCRIPTION	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT	
SALE OF INVESTMENTS	12,749.	-24,966.	43,948.	-25,540.	
MISCELLANEOUS INCOME	3,943.	0.	0.	0.	
TOTAL TO SCHEDULE A, LINE 22	16,692.	-24,966.	43,948.	-25,540.	

Depreciation and Amortization 990
(Including Information on Listed Property)

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

Name(s) shown on return

Business or activity to which this form relates

Identifying number

CENTER FOR NATIONAL INDEPENDENCE IN POLITICS

FORM 990 PAGE 2

85-0364261

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	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.)

14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	77,974.

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						
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 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	77,974.
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	

**CENTER FOR NATIONAL INDEPENDENCE IN
POLITICS**

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No				24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
	:	:	%					
	:	:	%					
	:	:	%					
27 Property used 50% or less in a qualified business use:								
	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2006 tax year:					
	:				
	:				
43 Amortization of costs that began before your 2006 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44