				EXTENSIO	N GRANT	\mathbf{ED}	UN'	TIL FEB	RUA	RY 1	
	00	חו	Return of Orga	anization	Exempt	F	rom	Incom	e Ta	ax	OMB No. 1545-0047
Forn	n 9 9	JU	Under section 501(c), 5	27, or 4947(a)(1) of	f the Internal Re	even					2007
Depa	rtment of	the Treasury		benefit trust or	-						Open to Public
		le Service	The organization may h								Inspection
AF	or the 2	007 calenda	r year, or tax year beginning	APR 1, 2	007 an	d en	Iding	MAR 31	, 2	800	
Bo	Check if pplicable:		Name of organization						D Emp	loyer ide	entification number
a 			ENTER FOR NATIONAI	INDEPEN	DENCE II	Ν					
	Address change	print or PC	DLITICS					_	8	5-03	64261
	Name change	See	Number and street (or P.O. box if mail i	s not delivered to st	reet address)			Room/suite			
	Initial return	Instruc-	NE COMMON GROUND								59-8683
	Termin- ation	tions.	City or town, state or country, and ZIP								d: 🔀 Cash 🔄 Accrual
	Amende			9858-9767						Other specify)	
	Applicat pending	mus	tion 501(c)(3) organizations and 4947 t attach a completed Schedule A (Forr	(a)(1) nonexempt ci n 990 or 990-F7)	naritable trusts						on 527 organizations.
							• •	s this a group r			
			VOTE-SMART.ORG				. ,	f "Yes," enter nu			
	-					527	H(C) A	re all affiliates i If "No," attach a	ncludeo list)	1? N	/A Yes No
			f the organization is not a 509(a)(3) sup		-		H(d) Ì	s this a separate	e return		an or-
			not more than \$25,000. A return is not r	equired, but if the or	rganization		-	anization cover	-		
	1100565		n, be sure to file a complete return.					aroup Exemptio			N/A
		ainta: Add lin	as Ch. Sh. Oh. and 10h to line 10	1				check 🗩 🛄 Sch. B (Form 99			on is not required to attach
			es 6b, 8b, 9b, and 10b to line 12 ► , Expenses, and Changes		670,956			ы. в (гопп эз	0, 990-	LZ, 01 98	JU-FT).
FC			s, gifts, grants, and similar amounts re-			aia	nces				
			is to donor advised funds			1a	1				
			support (not included on line 1a)			1b		L,538,5	30.		
	c					10	-	L, 330, 3			
	d		contributions (grants) (not included or	line 1a)		1d					
						iu		7,847.	`	1e	1,538,530.
	2								Г	2	3,268.
	3	Membership dues and assessments								3	572001
	4		avings and temporary cash investment							4	
	5		nd interest from securities						·····	5	129,158.
	-	Gross rents				6a				-	
	b	Less: rental	expenses			6b					
ø	c		come or (loss). Subtract line 6b from lii							6c	
enue	7	Other invest	ment income (describe 🕨)	7	
Reve	8 a	Gross amou	nt from sales of assets other	(A) Secu	rities			(B) Other			
Œ		than invento	ry			8a					
	b	Less: cost o	r other basis and sales expenses			8b					
			s) (attach schedule)			8c					
	d		loss). Combine line 8c, columns (A) an							8d	
	9	Special even	its and activities (attach schedule). If an	y amount is from g a	aming, check he	ere 🖡					
			ot including \$			9a					
			expenses other than fundraising expens			9b					
			or (loss) from special events. Subtract I							9c	
			of inventory, less returns and allowance			0a					
			f goods sold			Ob					
			or (loss) from sales of inventory (attack						-	10c	
	11		ue (from Part VII, line 103)							11	1 670 056
	12 13		ue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d vices (from line 44, column (B))							12 13	<u>1,670,956.</u> 1,587,114.
es	14		t and general (from line 44, column (C)							14	176,629.
Expenses	14		(from line 44, column (D))							14	194,711.
ğ	16		affiliates (attach schedule)							16	
ш	17		ses. Add lines 16 and 44, column (A) .							17	1,958,454.
	18	Excess or (d	leficit) for the year. Subtract line 17 fror	n line 12						18	<287,498.>
Net ssets	19	Net assets o	r fund balances at beginning of year (fr	om line 73, column ((A))				F	19	3,907,820.
Ass	20	Other chang	es in net assets or fund balances (attac	h explanation)	SE	E	STA	FEMENT	1 [20	<45,427.>
	21		r fund balances at end of year. Combine							21	3,574,895.
7230 12-27	7-07	LHA For P	rivacy Act and Paperwork Reduction A	Act Notice, see the s	eparate instruc	ction	S.				Form 990 (2007)

² 16390204 137273 0108018 2007.07000 CENTER FOR NATIONAL INDEPEN 01080181

Form 990 (2007)	
Part II	Statement	of

POLITICS

CENTER FOR NATIONAL INDEPENDENCE IN

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
2a Grants paid from donor advised funds					
(attach schedule)					
(cash \$ 0 • noncash \$ 0 •)				
If this amount includes foreign grants, check here	22a				
2b Other grants and allocations (attach schedule)				
(cash \$ 0 • noncash \$ 0 •					
If this amount includes foreign grants, check here	22b				
3 Specific assistance to individuals (attach					
schedule)	23				
4 Benefits paid to or for members (attach					
schedule)	24				
5a Compensation of current officers, directors, key					
employees, etc. listed in Part V-A	25a	124,400.	53,545.	34,615.	36,240
b Compensation of former officers, directors, key		,			
employees, etc. listed in Part V-B	25b	0.	0.	Ο.	(
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)	25c				
6 Salaries and wages of employees not					
included on lines 25a, b, and c	26	716,469.	645,075.	41,246.	30,148
7 Pension plan contributions not included on		/10/1000	01070700	11,2100	50/11
lines 25a, b, and c	27				
8 Employee benefits not included on lines					
	28	68,629.	56,962.	6,177.	5 190
25a - 27	20	73,586.	61,076.	6,623.	<u>5,49</u> 5,88
9 Payroll taxes0 Professional fundraising fees	30	75,500.	01,070.	0,023.	5,00
	31	10,975.		10,975.	
1 Accounting fees	32	5,750.		5,750.	
2 Legal fees	33	30,020.	24,916.	2,702.	2 101
3 Supplies		46,257.		4,163.	2,402
4 Telephone	34		38,393.		
5 Postage and shipping	35	123,639.	107,626.	10,957.	5,050
	36	43,525.	36,561.	3,482.	3,482
7 Equipment rental and maintenance	37	3,835.	3,183.	345.	30
8 Printing and publications	38	119,741.	82,024.	4,456.	33,261
9 Travel	39	49,351.	40,961.	4,442.	3,948
0 Conferences, conventions, and meetings	40				
1 Interest	41				
2 Depreciation, depletion, etc. (attach schedule)	42	95,801.	79,514.	8,622.	7,665
3 Other expenses not covered above (itemize):					
a	43a				
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g SEE STATEMENT 2	43g	446,476.	357,278.	32,074.	57,124
Total functional expenses. Add lines 22a through					
43g. (Organizations completing columns (B)-(D),					
carry these totals to lines 13-15)	44	1,958,454.	1,587,114.	176,629.	194,713
oint Costs. Check 🕨 🔲 if you are following	SOP 9				
e any joint costs from a combined educational campai			orted in (B) Program servic	es? ► 🗌	Yes X No
'Yes," enter (i) the aggregate amount of these joint cos			i) the amount allocated to F		N/A ;
i) the amount allocated to Management and general \$			v) the amount allocated to	-	N/A
3011 -27-07				-	Form 990 (20

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POLITICS

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.

	at is the organization's primary exempt purpose? ► DUCATION: NON-PARTISAN INFORMATION ABOUT POLITICAL CANDIDATES.	Program Service Expenses
clie	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of nts served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	SEE STATEMENT 3	
	(Grants and allocations \$) If this amount includes foreign grants, check here	835,840.
b	SEE STATEMENT 4	
	(Grants and allocations \$) If this amount includes foreign grants, check here	751,274.
С		
	(Grants and allocations \$) If this amount includes foreign grants, check here	
d		
	(Grants and allocations \$) If this amount includes foreign grants, check here	
þ	Other program services (attach schedule)	
U	(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)	1,587,114.

Form **990** (2007)

723021 12-27-07

Form 990 (2007)

CENTER FOR NATIONAL INDEPENDENCE IN POLITICS

85-0364261 Page 4

Pa	rt IV	Balance Sheets (See the instructions.)					
Note		ere required, attached schedules and amounts wit uld be for end-of-year amounts only.	description column	(A) Beginning of year		(B) End of year	
	45	Cash - non-interest-bearing			76,185. 1,563,178.	45	5,797.
	46	Savings and temporary cash investments		1,563,178.	46	5,797. 1,758,255.	
				Γ			
	47 a	Accounts receivable	47a				
	b	Less: allowance for doubtful accounts	47b			47c	
		Pledges receivable	48a				
	b	Less: allowance for doubtful accounts	48b			48c	
	49	Grants receivable				49	
	50 a	Receivables from current and former officers, di		· · ·			
		key employees				50a	
	b	Receivables from other disqualified persons (as					
ets		4958(f)(1)) and persons described in section 495		(B)		50b	
Assets		Other notes and loans receivable			1 2 0 0 0 0		
-		Less: allowance for doubtful accounts			179,029.		
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges				53	
		Investments - publicly-traded securities				54a	
		Investments - other securities	I	► Cost FMV		54b	
	55 a	Investments - land, buildings, and	ا دد ا				
		equipment: basis	55a				
	۱ L		55b			55c	
	56	Less: accumulated depreciation			356,525.	56	
		Land, buildings, and equipment: basis	57a	2,553,146.	550,525.	50	
		Less: accumulated depreciation STMT 5	57b	724,071.	1,737,293.	57c	1,829,075.
	58	Other assets, including program-related investments	010	, , 0 , _ t		010	27020707070
		(describe ► EMPLOYEE RECEIVABL	3,410.	58	0.		
	59	Total assets (must equal line 74). Add lines 45 t		n 58	3,915,620.	59	3,593,126.
	60	Accounts payable and accrued expenses				60	
	61	Grants payable				61	
	62	Deferred revenue				62	
lities	63	Loans from officers, directors, trustees, and key				63	
bili	64 a	a Tax-exempt bond liabilities				64a	
Liabi	6	Mortgages and other notes payable				64b	
	65	Other liabilities (describe CREDIT CARD	S P	AYABLE)	7,800.	65	18,231.
					F 000		10 001
	66	Total liabilities. Add lines 60 through 65			7,800.	66	18,231.
	Orga	anizations that follow SFAS 117, check here		and complete lines			
es	67	67 through 69 and lines 73 and 74.			3,360,890.	67	2,983,382.
nc	67 68	Unrestricted			19,372.	68	35,610.
3ala	69	Temporarily restricted			527,558.	69	555,903.
ΒPC		Permanently restricted		▶ □ and	527,550.	09	555,505.
μ		complete lines 70 through 74.					
P D	70	Capital stock, trust principal, or current funds			70		
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, and				71	
Ass	72	Retained earnings, endowment, accumulated in				72	
let ,	73	Total net assets or fund balances. Add lines 67 throu					
2		(Column (A) must equal line 19 and column (B) must	-	-	3,907,820.	73	3,574,895.
	74	Total liabilities and net assets/fund balances.			3,915,620.	74	3,593,126.
	-				-		Form 990 (2007)

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CENTER I	FOR NA	TIONAL	INDEPENDENCE	IN
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For	m 990 (2007) POLITICS				03642		Page 5
Pa	art IV-A Reconciliation of Revenue per Audited Fina	ncial Statements W	ith Revenue p	er Re	e turn (Se	ee the	
	instructions.)						-
а	Total revenue, gains, and other support per audited financial stateme	nts			a	N	/A
b	Amounts included on line a but not on Part I, line 12:	1	1				
1	Net unrealized gains on investments		b1				
2	Donated services and use of facilities		b2				
3	Recoveries of prior year grants		b3				
4			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	ы. Г				
1	Investment expenses not included on Part I, line 6b		d1 d2				
2	Other (specify):						
	Add lines d1 and d2				d		
e	Total revenue (Part I, line 12). Add lines c and d art IV-B Reconciliation of Expenses per Audited Fina	ancial Statements V	Vith Exnenses	ner l	e Zeturn		
				-		N	/ 7
a ⊾	Total expenses and losses per audited financial statements				a	N	/A
0	Amounts included on line a but not on Part I, line 17:	L					
1	Donated services and use of facilities		b1				
2	Prior year adjustments reported on Part I, line 20		b2				
3	· · · · · · · · · · · · · · · · · · ·		b3				
4			b4				
	Add lines b1 through b4				b		
C	Subtract line b from line a				с		
d	Amounts included on Part I, line 17, but not on line a:	1	1				
1	Investment expenses not included on Part I, line 6b		d1				
2	Other (specify):		d2				
	Add lines d1 and d2				d		
	Total expenses (Part I, line 17). Add lines c and d				e		
Pa	art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we		•		ricer, aire	ector, tru	lstee,
		(B) Title and average hours			tributions to	(E)	Expense
	(A) Name and address	per week devoted to position	(lf not paid, enter -0)	`emplo plans	ntributions to yee benefit & deferred sation plans	acćo	ount and allowances
		position	-0)	comper	sation plans		
d D	E STATEMENT 6		124,400.		0.		0.
SE	E SIAIEMENI O		124,400.			<u>'</u>	0.
						┿───	
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Form **990** (2007)

CENTER	FOR	NATIONAL	INDEPENDENCE	IN
POLITIC	CS			

85-0364261 Page 6

Pa	rt 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 10			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies			
	the individuals and explains the relationship(s) SEE STATEMENT 7	75b	Х	
C	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the			
	organization? See the instructions for the definition of "related organization."	75c		Х
	If "Yes," attach a statement that includes the information described in the instructions.			
	Does the organization have a written conflict of interest policy?	75d	Х	
Pa	t V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation	or Ot	her	

0 **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.)

(A) Name and address NONE	(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

Pa	rt VI Other Information (See the instructions.)		Yes	No				
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed							
	statement of each change	76		Х				
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		Х				
	If "Yes," attach a conformed copy of the changes.							
78 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?							
b	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? If "Yes," attach a statement							
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?	80a		Х				
b	If "Yes," enter the name of the organization N/A							
	and check whether it is exempt or nonexempt							
81 a	Enter direct and indirect political expenditures. (See line 81 instructions.)							
b	Did the organization file Form 1120-POL for this year?	81b		Х				
		Form		(2007)				

Form **990** (2007)

723161/12-27-07

Form 990 (2007)

Form 990 (2007)

CENTER FOR NATIONAL INDEPENDENCE IN

POLITICS

Pa	rt 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		Х
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 N/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Х	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Х	
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? N/A	84b		
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?N/A	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			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
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		<u> </u>
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? N/A	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on			
	line 12	_		
	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	_		
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?	00-		v
	If "Yes," complete Part IX	88a		X
D	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of	0.01		v
00 -	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 \blacktriangleright 0.; section 4912 \triangleright 0.; section 4955 \triangleright 0.			
D	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?	005		х
	If "Yes," attach a statement explaining each transaction	89b		
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
h	sections 4912, 4955, and 4958			
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		х
e f	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89f		X
י ת	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization,	031		
a	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 \triangleright AZ, MT	039		- 11
	Number of employees employed in the pay period that includes March 12, 2007 90b			26
	The books are in care of \blacktriangleright THE ORGANIZATION Telephone no. \blacktriangleright 406-8	59-8	683	
Jia	Located at ► ONE COMMON GROUND, PHILIPSBURG, MT			767
h	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	
	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 \blacktriangleright 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	(2007)

Farma 000 (0)			ATIONA	L INDEPENDEN	ICE	IN	0 5	026426	1	Daga 0
Form 990 (20	007) POLIS						-60	036426		Page 8
	time during the calendar year		nization mair	tain an office outside of	fthall	nitad Statas?		91	_	
	s," enter the name of the fore			N/A		filled States?		91	,	
	n 4947(a)(1) nonexempt char	•			heck h	ere				
	nter the amount of tax-exemp								/A	
	Analysis of Income-								<u>/</u>	
	r gross amounts unless other			ed business income	Exclud	ded by section 512, 5	13, or 514		E)	
indicated.	5		(A)	(B)	(C) Exclu-	(D)		Related		npt
93 Program	m service revenue:		Business code	Amount	sion	Amoun	t	functio	n incon	ne
a STU	DENT WORK STUDY	Y								
b REI	MBURSEMENTS								1,	268.
c SPE	AKING / PRESEN	TATION								
d FEE	S								2,	000.
e										
f Medica	re/Medicaid payments									
	nd contracts from governmer									
	ership dues and assessments									
	on savings and temporary cash i									
	ids and interest from securitie				14	129	,158.			
	tal income or (loss) from real									
	nanced property									
	ot-financed property									
	tal income or (loss) from pers									
	nvestment income									
	(loss) from sales of assets									
	nan inventory									
	ome or (loss) from special even									
102 Gross p 103 Other re	profit or (loss) from sales of in	iventory								
	evenue.									
a b		<u> </u>								
~										
d										
e		<u> </u>								
104 Subtota	al (add columns (B), (D), and ((E))		0.		129	,158.		3,	268.
	add line 104, columns (B), (D)								32,	426.
	05 plus line 1e, Part I, should						····· ·			
Part VIII	Relationship of Activ	vities to the	Accomp	ishment of Exemp	ot Pur	rposes (See th	ne instructi	ions.)		
	Explain how each activity for whi				d import	tantly to the accon	nplishment	of the organiza	ation's	
	exempt purposes (other than by				HOD	TNUTTON				
	HE ORGANIZATION								DER	A
	ORK STUDY PROGE ONORARIUMS FOR			IZATION ALSO					<u></u>	<u>т</u>
							SENIA		AL:	<u>ц</u>
Part IX	Information Regardi						instructio) (201		
	(A)	(B)		(C)		(D)	,		(E)	
Name, add	ress, and EIN of corporation, ship, or disregarded entity	Percentage of ownership interes	st	Nature of activities		Total inco	me		of-year sets	
	omp, or allorogal acta official	•	%					45	3013	
	N/A		%							
			%							
			%							
Part X	Information Regarding			ted with Personal	Bene	efit Contract	ts (See the	e instruction:	s.)	
	organization, during the year, re						•	Yes	<i>,</i>	X No
	organization, during the year, pa		-					Yes	_	X No
• •	es" to (b), file Form 8870 and		-					-		
		•						For	m 990	0 (2007)

723163 12-27-07

CENTER FOR NATIONAL IN	DEPENDENCE I	N 85-03	64261 Page 9
orm 990 (2007) POLITICS Part XI Information Regarding Transfers To and From	Controlled Entities		
controlling organization as defined in section 512(b)(13).	N/A		
			Yes No
06 Did the reporting organization make any transfers to a controlled entity	y as defined in section 5"	12(b)(13) of the Code? If "Ye	s,*
complete the schedule below for each controlled entity.			
(A)	(B) Employer	(C)	(D) Amount of
Name, address, of each controlled entity	Identification	Description of transfer	transfer
constance charge	Number		
	-		
	-		
	_		
	_		
	-		
1			
Totals			
Totais			Yes N
7 Did the reporting organization receive any transfers from a controlled	entity as defined in secti	ion 512(b)(13) of the Code?	lf "Yes,"
complete the schedule below for each controlled entity.			
(A)	(B)	(C)	(D)
Name, address, of each	Employer Identification	Description of transfer	Amount of transfer
controlled entity	Number		
	-		
	-		
,	-		
·	-		
	_		
,	_		
Totals			Yes N
Did the organization have a binding written contract in effect on August	et 17 2006 covering the	interest rents rovalties an	
annuities described in question 107 above?	st 17, 2000, covering the	, morest, rents, reyands, an	-
Under penalties of perjury, I declare that i have examined this return, including accomp and complete. Declaration of preparer (other than officer) is based on all information of	anying schedules and statement	s, and to the best of my knowledge a	nd belief, it is true, correct.
10 111 1	which preparel has any knowled	ge.	~
lease		410	7
ere		Date	
Achard Kimpell preside-)			
V Type or print name and title	Date,	Check If Preparer's	SSN or PTIN (See Gen. Inst
aid Preparer's Honor H623.	0 0 0	self-	
reparer's Firm's name (or DRACTTOAT, BUSTNESS SERVI	CES INC.		
se Only self-employed), 119 S 16TH STREET - P.O.	BOX 1240	<u></u>	
address, and PHILOMATH, OR 97370-124		Phone no. ► 541	-929-2811
			Form 990 (200

723164/12-27-07

10

16390204 137273 0108018 2007.07000 CENTER FOR NATIONAL INDEPEN 01080181

SCHEDULE A Organization Exempt Under Section 501(c)(3)								01	OMB No. 1545-0047									
(Form 990 or 99 Department of the Tree	asury			Supp	Exce) Exce	ept Priva 501(n entary	ate Fou 1), or 49 y Infc	ndation) 947(a)(1 ormati) and) Non ON -	Section 50 nexempt Cl	1(e), 501(f), s naritable Trus parate in s	501(k), t s truct i	ions.)			2007		
Internal Revenue Servi Name of the organi		CENTE									tached to thei E IN	r Form 99	90 or 990		nployer ic	lentifi	cation number	
Dett		POLIT										0.07	<u> </u>		5 03			
		pensatio ge 1 of the ir									her Than	Office	ers, Dir		-		ustees	
		nd address (more than			/ee paid	1				per week of pos	tion	(c) Cor	npensatic	on (a)	Contributi employee b plans & def compensa	ions to enefit erred tion	(e) Expense account and other allowances	
CLINTON 2 3800 PARI			IE,	IRV	INE	, CA	A 9	2612	_	DIRI 40.(70),000).				
		· – – – – -							-									
		·																
		·																
		·																
Total number of otl over \$50,000											0							
Part II-A	Comp	pensatio	n of	the F	ive H	lighes	st Pa	id Ind	-		Contracto ere are none, e			sio	nal Ser	vice	es	
		and address								,			(b) Type c	of serv	/ice	(c) Compensation	
NONE											·							
	·																	
	·																	
		·																
Total number of otl \$50,000 for profes								Þ			0							
	List each		r who j	perform	ed servi	ices oth	ier than	profess	ional		Contracto hether individu		Other	Ser	vices			
(a)) Name a	and address	s of ead	ch indep	endent	contrac	tor paid	d more tl	nan \$	50,000			(b) Type c	of serv	/ice	(c) Compensation	
NONE																		
Total number of otl \$50,000 for other s								►			0							

723101/12-27-07 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ. 11 Schedule A (Form 990 or 990-EZ) 2007

Schedule A (Form 990 or 990-EZ) 2007 POLITICS

F	Part III Statements About Activities (See page 2 of th	e instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, st	tate, 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.)		1		Х
	Organizations that made an election under section 501(h) by filing Forn	n 5768 must complete Part VI-A. Other organizations			
	checking "Yes" must complete Part VI-B AND attach a statement giving	a detailed description of the lobbying activities.			
2	2 During the year, has the organization, either directly or indirectly, engage trustees, directors, officers, creators, key employees, or members of the person is affiliated as an officer, director, trustee, majority owner, or privattach a detailed statement explaining the transactions.)	eir families, or with any taxable organization with which any such			
			2a		X
	b Lending of money or other extension of credit?		2b		Х
	c Furnishing of goods, services, or facilities?		2c		Х
	${\bf d}$ Payment of compensation (or payment or reimbursement of expenses	if more than \$1,000)? SEE PART V-A, FORM 990	2d	Х	
	e Transfer of any part of its income or assets?		2e		Х
3	3 a Did the organization make grants for scholarships, fellowships, student the organization determines that recipients qualify to receive payments.		3a	x	
	b Did the organization have a section 403(b) annuity plan for its employe		3b		Х
	c Did the organization receive or hold an easement for conservation purp	, ,			
	the environment, historic land areas or historic structures? If "Yes," atta	ach a detailed statement	3c		Х
	d Did the organization provide credit counseling, debt management, cred	it repair, or debt negotiation services?	3d		Х
4	a Did the organization maintain any donor advised funds? If "Yes," compl and 4g	ete lines 4b through 4g. If "No," complete lines 4f	4a		х
	b Did the organization make any taxable distributions under section 4966	? N/A	4b		
	${\bf c}$ Did the organization make a distribution to a donor, donor advisor, or ${\bf r}$		4c		
		tax year 🕨			0
	e Enter the aggregate value of assets held in all donor advised funds own	led at the end of the tax year 🕨 📃		N/	A
	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				0.
	${\boldsymbol{g}}$ Enter the aggregate value of assets in all funds or accounts included or	ı line 4f at the end of the tax year $\hfill \hfill \hfil$			0.

Schedule A (Form 990 or 990-EZ) 2007

Schedule A (Form 990 or 990-EZ) 2007 **POLITICS**

Part IV	Reason for Non-Private Foundation S	Status (See pages 4 th	nrough 8 of the instructio	ns.)					
I certify that ti 5 6 7 8 9 10 11a X 11b 12	 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(v). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (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 I Type II Type II Type III-Functionally Integrated Type III-Other								
	Provide the following information a	bout the supported organ	nizations. (See page 8 of	the instructio	ons.)				
	(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)	on Is the supported Amou s organization listed in supp e the supporting organization's governing documents?		(e) Amount of support			
				100	No				
<u>Total</u>					►				

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2007

723121 12-27-07

Schedule A (Form 990 or 990-EZ) 2007 **POLITICS**

85-0364261 Page 4

Pa	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.								
Caler begin	ndar year (or fiscal year nning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total **			
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,345,632.	1,451,608.			11,240,168.			
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	** SEE S	UPPLEMENTAL	SUPPORT SC	HEDULE				
18	Gross income from interest, divid- ends, amounts received from pay- ments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	74,010.	66,904.	47,117.	43,089.	462,240.			
19	Net income from unrelated business	-							
20	activities not included in line 18 lax 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	9,020.		SEE STATEME <24,966.		89,388.			
23	Total of lines 15 through 22	1,428,662.	1,535,204.	1,477,355.	1,454,677.	11,791,796.			
24	Line 23 minus line 17	1,428,662.	1,535,204.	1,477,355.	1,454,677.	11,791,796.			
25 26	Enter 1% of line 23 Organizations described on lines 1	14,287.			14,547. ► 26a	235,836.			
	Prepare a list for your records to sho					233,030.			
2	unit or publicly supported organizati			· ·					
	Do not file this list with your return	, -	-			0.			
	Total support for section 509(a)(1) t				► 26c	11,791,796.			
d	Add: Amounts from column (e) for li	ines: 18 <u>4</u>	<u>62,240.</u> 19		— b	EE1 ()0			
•	Public support (line 26c minus line 2		89,388. 26b		≥26d ► 26e	551,628. 11,240,168.			
f	Public support percentage (line 26					95.3219%			
27	Organizations described on line 12								
	records to show the name of, and to	tal amounts received in ea	ach year from, each "disq	ualified person." Do not f i	le this list with your retu	rn. Enter the sum of			
	5	N/A		004)	(0000)				
Ь	(2006) For any amount included in line 17 t								
U	and amount received for each year, t				•				
	described in lines 5 through 11b, as								
	the larger amount described in (1) o	• •	,	, .					
	(2006)	(2005)		004)					
C	Add: Amounts from column (e) for line 17Add: Line 27a total	15		- ¹⁰ 21	► 27c	N/A			
d	Add: Line 27a total	20 an	d line 27b total	21	▶ <u>27d</u>	N/A			
e	Public support (line 27c total minus	line 27d total)			► 27e	N/A			
f	Total support for section 509(a)(2) t								
g	Public support percentage (line 27					<u>N/A %</u> N/A %			
28 l	Investment income percentage (lin Jnusual Grants: For an organization d	escribed in line 10, 11, or	12 that received any unu	sual grants during 2003	through 2006, prepare a l	ist for your records to			
S	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								
	1 12-27-07	N	<u>ONE</u> 14		Schedu	Ile A (Form 990 or 990-EZ) 2007			
			14						

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Scheo	ule A (Form 990 or 990-EZ) 2007 POLITICS	85-036426	1 F	age 5
	TV Private School Questionnaire (See page 9 of the instructions.)	<u>00 000110</u> N/		0
	(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 governin	g	res	NO
	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?			
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?			
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?			
d	Copies of all material used by the organization or on its behalf to solicit contributions?			
	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:			
а	Students' rights or privileges?	33a		
b	Admissions policies?			
C	Employment of faculty or administrative staff?			
d	Scholarships or other financial assistance?			
e	Educational policies?			
f	Use of facilities?			
g	Athletic programs?			
h	Other extracurricular activities?			
	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?			
b	Has the organization's right to such aid ever been revoked or suspended?			
	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-			
	1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation			

Check 🕨 b

	, , ,	0
38	Total lobbying expenditures	(add lines 36 and 3

Check **>** a

38	Total lobbying expenditures (add lines 36 an	38		
39	Other exempt purpose expenditures	39		
	Total exempt purpose expenditures (add line	40		
41	Lobbying nontaxable amount. Enter the amo	ount from the following table -		
	lf 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	of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line	e 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line	e 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.)

		d	N/A			
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2006	(c) 2005	(d 200		(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 A	Activity by Nonelectory by organizations that diverse the second			ictions.)		N/A
During the year, did the organizat influence public opinion on a legis a Volunteers b Paid staff or management (In c Media advertisements d Mailings to members, legisla e Publications, or published or f Grants to other organizations g Direct contact with legislators	slative matter or referendum include compensation in expe tors, or the public broadcast statements if or lobbying purposes s, their staffs, government o	, through the use of: enses reported on lines c the second seco	nrough h .)		28 No	Amount
 h Rallies, demonstrations, sem i Total lobbying expenditures If "Yes" to any of the above, a 	(Add lines c through h .)					0.

16

36 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 37

Schedule A (Form 990 or 990-EZ) 2007 POLITICS

if the organization belongs to an affiliated group.

Limits on Lobbying Expenditures

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

Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.) Part VI-A (To be completed **ONLY** by an eligible organization that filed Form 5768)

85-0364261 Page 6

(b)

To be completed for all

electing organizations

if you checked **"a"** and "limited control" provisions apply.

(a)

Affiliated group

totals

N/A

N/A

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Schedule A (Form 990 or 990-EZ) 2007

Exempt Organization Sections (See page 14 of the instructions). 50 Ubit response organization dex indicedy argues and on the billowing with any other organization dexcelled in suction S0 (1c) of the Code (other than section 50 (1c) organization) or insection S0 (1c) of the Code (other than section 50 (1c) organization) or insection S0 (1c) of the Code (other than section 50 (1c) organization) or insection S0 (1c) organization of excellent S0 (1c) organization of excellent S0 (1c) of the Code (other than section 50 (1c) organization dex (1c) organization in S0 (1c) or insection and organization dex (1c) organization (1c) or insection and organization dex (1c) or insection and organization excerpt organization Station S0 (1c) Stat	Part				d Relationships With Noncharit	able		
Statuses from the reporting organization to a soncharitable exempt organization of: Instrusts from the reporting organization to a soncharitable exempt organization of: 	51 [,	organization described in section			
Transfer from the reporting organization to a noncharitable exempt organization of: (i) Cach (ii) Other assets (iii) Other assets (ii) State or exchanges of assets with a noncharitable exempt organization (ii) State or exchanges of assets with a noncharitable exempt organization (iii) Purchases of assets from a noncharitable exempt organization (iii) Purchases of assets of assets with a noncharitable exempt organization (iii) Purchases of assets of assets with a noncharitable exempt organization (iii) Purchases of assets of assets with a noncharitable exempt organization (iii) Purchases of assets of assets with a noncharitable exempt organization (iii) Purchases of assets of absets with a noncharitable exempt organization (iii) Purchases of assets or an organization organization assets, or and organization (iv) Cass or or any purchase (iv) Cass or organization (iv) Purchases or any of the above is "Vei," complete the following schedule. Column (b) should always show the fair market value of the approximation received the tain any of the above is "Vei," complete the following schedule. Column (b) should always show the fair market value of the approximation received the tain any of the approximation organization received the tain any of the approximation organization received the any organization, the use of the poots, other assets, or survice state any of the approximation organization organization assets or survices received:					-			
(i) Other assets 514010 X (ii) Other assets 4010 X (iii) Other assets 4010 X (iii) Other assets 1010 X (iii) Perchase of assets with a noncharitable exempt organization 1010 X (iii) Perchase of assets on a noncharitable exempt organization 1010 X (iii) Perchase of assets on a noncharitable exempt organization 1010 X (iv) Perchase of assets on a noncharitable exempt organization 1010 X (iv) Perchase of assets on a methorship or fundrising solicitations 1010 X (iv) Perchase of assets on a methorship or fundrising solicitations 1010 X (iv) Perchase of assets on a methorship or fundrising solicitations 1010 X (iv) Perchase of assets on a methorship or fundrising solicitations 1010 X (iv) Perchase of assets on a methorship or fundrising solicitations 1010 X (it) If assets on any of the above Streship or fundrising solicitations 1000000000000000000000000000000000000		.,				Г	Yes	No
(ii) Other assets artij X b Other transections: b(i) X (ii) Purchases of assets into a nonchritable exempt organization b(ii) X (iii) Purchases of assets into a nonchritable exempt organization b(ii) X (iii) Purchases of assets into a nonchritable exempt organization b(ii) X (iii) Purchases of assets into a quarantee b(iii) X (iv) Loas of organization b(iii) X (iv) Loas of organization in the assets, or paid employees b(iii) X (iv) Loas of assets in the assets, or paid employees b(iii) X (iv) Loas of assets, or services arrangements b(iii) X (iv) Case of assets, or services received: N/A (iv) Case of assets, or asset of assets, or asset of assets, or asset of assets, or asset of			-	-		51a(i)		
b Other transactions: (i) Sets or exchanges of assets with a noncharitable exempt organization (ii) Partia of facilities, equipment, or other assets (iii) Partia of facilities, equipment, or other assets (iv) Partial of facilities, equipment, or other assets (iv) Partial of facilities, equipment, or other assets (iv) Partial of facilities, equipment, or other assets, or sarkes or sarkes or sarkes are non-charitable exempt organization (iv) Partial of facilities, equipment, mailing lists, other assets, or sarkes or sarkes are non-charitable exempt organization (iv) Partial of facilities, equipment, mailing lists, other assets, or sarkes are sarkes or sarkes are assets, or s						· • • • •		
i) Sales or exchanges of assets with a non-haritable exempt organization iii) III IIIIIIIIIIIIIIIIIIIIIIIIII								
(ii) Purchases of assists tom a noncharitable exempt organization b(0) X (iii) Reindursonment arrangements b(0) X (v) Decars of organgements b(0) X (vi) Performance of services or membership or fundraising solicitations b(0) X (vi) Performance of services or membership or fundraising solicitations b(0) X (vi) Performance of services or membership or fundraising solicitations b(0) X (vi) Performance of services or membership or fundraising solicitations b(0) X (vi) Performance of services or evendes given by the reporting organization. If the organization neceled less than iar market value in any transaction or starting arrangements. Now in column (d) the value of the organization M/A (a) (b) Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements (a) (b) Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements (a) (b) Name of noncharitable exempt organization Description of transfers, transaction services receives (a) (b) Name of noncharitable exempt organization Description of transfers, transaction services receives (b) (c) Name of noncharitable exempt			ts with a noncharitable exempt orga	nization		b(i)		х
(iii) Bontal of facilities, equipment, or other assets, or savid sensitives b(i) ix (iv) Performance of services or membership or fundiality solicitations b(i) ix (iv) Performance of services or membership or fundiality solicitations b(i) ix (iv) Performance of services or membership or fundiality solicitations b(ii) ix (iv) Performance of services or membership or fundiality solicitations b(iii) ix (iv) Performance of services or membership or fundiality solicitations b(iii) ix (iv) Cost Stating of facts, equipment, multiples, other assets, or sarvices necelved: ix/A (iv) Cost (iv) (iv) (iv) (iv) (iv) Amount involved Name of noncharitable exempt organization recelved is sensity, or sarvices necelved: ix/A (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv) <		(ii) Purchases of assets from a	noncharitable exempt organization			· b(ii)		
(iv) Reimbursement arrangements b(v) ix (v) Lans or loan guarantees b(v) ix (v) Destinations of services or membership or fundhalsing solicitations c ix (v) Destination of services or membership or fundhalsing solicitations c ix (v) Destination of services or membership or fundhalsing solicitations c ix (v) Destination of services or membership or fundhalsing solicitations c ix (v) Destination of services or services or services received: N/A (v) Destination of services or services exervice: N/A (v) Description of transfers, transactions, and sharing arrangements c (v) Description of itransfers, transactions, and sharing arrangements c (v) Description of itransfers, transactions, and sharing arrangements c (v) Description of itransfers, transactions, and sharing arrangements c (v) Description of itransfers, transactions, and sharing arrangements c (v) Description of itransfers, transactions, and sharing arrangements c (v) Description of itransfers, transactions, and sharing arrangements c (v) Description of itransfers, transactions, and sharing arrangements c (v) Description of itransfers, transaction solit(c) of the	(iii) Rental of facilities, equipme	nt. or other assets					
(v) Lease or loan guaranties b(v) x (vi) Performance of services or membership or fundasing solicitations b(vi) x c) Stating of facilities, equipment, mailing lists, data assets, or paid employees d) 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 (c) M/A goods, other assets, or services growthy the reporting organization. The torganization conclus lists that fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: M/A (a) (b) (Line no. Amount involved Name of noncharitable exempt organization. The organization conclus lists that fair market value in any transaction assets, or services (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	((iv) Reimbursement arrangeme	nts			b(iv)		
• 0) Performance of services or membership or fundations golicitations								
e Staring 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 received: N/A inter on. Amount involved Name of noncharitable exempt organization bescription of transfers, transactions, and sharing arrangements bescription of transfers, transactions, and transfers, transactions, and transfers, transactions, and transfers, transactions bescription of transfer								
d It he answer to any of the above is Y-es; complete the following schedule. Column (b) should aways show the fair market value in any transaction or standing arrangements. show in column (d) the value of the organization received less than fair market value in any transaction standing arrangements. Show in column (d) the value of the organization market value in any transactions, and sharing arrangements. (a) (b) Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements. (a) (b) Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements. (a) (b) Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements. (a) (c) (c) (c) (c) (c) (a) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>								
opost, 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 (a) (b) (c) (c						·		
transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: N/A		-			-			
(a) (b) Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements Image: I	-			-	-	1	N/A	
Line no. Amount involved Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements		1 1		<u> </u>				
Code (other than section 501(c)(3)) or in section 527? b I (a) (b) Type of organization (b) (c) Description of relationship (a) (b) (c) Description of relationship (c)				empt organization		haring arr	angem	ients
Code (other than section 501(c)(3)) or in section 527? b I (a) (b) Type of organization (b) (c) Description of relationship (a) (b) (c) Description of relationship (c)								
Code (other than section 501(c)(3)) or in section 527? b I (a) (b) Type of organization (b) (c) Description of relationship (a) (b) (c) Description of relationship (c)								
Code (other than section 501(c)(3)) or in section 527? b I (a) (a) Name of organization Type of organization (b) Type of organization (c) Description of relationship (a) (b) (c) Description of relationship (c) (c)<								
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Code (other than section 501(c)(3)) or in section 527? b I (a) (b) Type of organization (b) (c) Description of relationship (a) (b) (c) Description of relationship (c)								
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Code (other than section 501(c)(3)) or in section 527? b I (a) (a) Name of organization Type of organization (b) Type of organization (c) Description of relationship (a) (b) (c) Description of relationship (c) (c)<								
Code (other than section 501(c)(3)) or in section 527? b I (a) (a) Name of organization Type of organization (b) Type of organization (c) Description of relationship (a) (b) (c) Description of relationship (c) (c)<								
Code (other than section 501(c)(3)) or in section 527? b I (a) (b) Type of organization (b) (c) Description of relationship (a) (b) (c) Description of relationship (c)								
Name of organization Type of organization Description of relationship Image: I	(Code (other than section 501(c)	(3)) or in section 527?			Yes	X] No
					(c) Description of relationsh	ip		
/23152								
	723152							

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2007.07000 CENTER FOR NATIONAL INDEPEN 01080181

Schedule A (Form 990 or 990-EZ) 2007

CENTER	FOR	NATIONAL	INDEPENDENCE	IN
POLITIC	CS			

85-0364261

_						0304201
	rt IV-A Supplemental S	upport Schedule				
begiı	ndar year (or fiscal year nning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants	1,345,632.	1,451,608.	1,455,204.	1,367,640.	5,620,084.
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 (sec- tion 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	74,010.	66,904.	47,117.	43,089.	231,120.
19	Net income from unrelated business					
	activities not included in line 18					
20	l ax 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	9,020.	16,692.	SEE STATEME <24,966.		44,694.
23	Total of lines 15 through 22	1,428,662.				5,895,898.
24	Line 23 minus line 17	1,428,662.	1,535,204.		1,454,677.	5,895,898.
25	Enter 1% of line 23	14,287.				, ,

AMOUNTS IN COLUMN (E) ARE INCLUDED IN THE TOTAL ON SCHEDULE A, PAGE 4, PART IV-A

723071 04-27-07

Asset	Description of property							
Number	Date placed	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	in service					loudon	asproslation, amorazation	
1001	20 BUNK		40 MA		ESSES 9,175.		9,067.	108.
1002	10 DRESS		1.00	цо	9,173•		9,007.	100.
	04 ₁ 17 ₀ 00	SL		16	500.		491.	6.
1003	9 OFFICE			16	630.		630.	0.
1004	CARPET	ы	1.00	10	0.50.		030.	0.
	08 ₁ 30 ₁ 01			16	737.		586.	105.
1005	LODGE FU 10,30,00			16	1,700.		344.	142.
1006	LODGE FU			10	L, 100•		J44•	142.
	0 3 ₁ 0 4 ₁ 0 6	SL	7.00	16	500.		77.	71.
1007	WASHER &			16	538.		64.	77.
1008	OFFICE F			10	530.		04.	//•
	02 ₁ 28 ₁ 07	SL	7.00		7,182.		86.	1,026.
1009	(D) SCANN		$\frac{N-LIN}{5.00}$		824.		824.	0.
1010					ERN 1-800)		024.	0.
	06 ₁ 01 ₁ 95	SL	5.00	16	1,641.		1,641.	0.
1011	(D)ZIP D		<u>& 4 C</u> 5.00				000	0.
1012	04 <u>0296</u>				900. SHIP		900.	0.
	04 ₁ 09 ₁ 96	SL	5.00	16	1,450.		1,450.	0.
1013	(D)ON-LI 05,01,96		MPUTE		QUIPMENT		23,644.	0.
1014					23,644. EQUIPMENT		23,044.	0.
	08 ₁ 26 ₁ 96	SL	5.00		875.		875.	0.
1015	(D)CD RO		D 5.00	16	773.		773.	0.
1016	01 ₁ 15 ₁ 97		5.00	10	113.		113.	0.
	021397	SL	5.00		211.		211.	0.
1017	(D)COMPU 03,13,97		QUIPM		1,047.		1 0 4 7	0.
1018	(D)2 COM						1,047.	0.
	04 ₁ 15 ₁ 97	SL	5.00	16	2,153.		2,153.	0.
1019	(D)7 CTX 06 ₁ 03 ₁ 97		3 AST 5.00		VENTURE COMPUT	TERS	12,376.	0.
1020	(D)2 MIC						12,570.	0.
	0 9 ₁ 0 5 ₁ 9 7	SL	5.00	16	4,951.		4,951.	0.
1021	(D)11 P- 09¦10¦97		COMPUT		- BOSTON 6,095.		6,095.	0.
1022	(D)1 MWI						0,095.	0.
	10 ₁ 27 ₁ 97	SL	5.00	16	1,515.		1,515.	0.
1023	(D)NETWO			CAB 16	LES & HUBS 3,857.		3,857.	0.
1024	(D)COMPU		5.00	цто	5,05/.		5,057.	0.
	03 ₁ 31 ₁ 98	SL	5.00	16	1,159.		1,159.	0.
1025	TENT FAC		7.00	16	900.		900.	0.
1026	TENT PIP		1.00	цо	900.		900.	0.
	07 ₁ 07 ₁ 97		7.00		1,746.		1,743.	0.
716261 04-27-07				#	- Current year section 179	(D) - Asset disp 21	DSEC	

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Asset				Description o	f property		
Number	Date Meth placed IRCs	nod/ Life sec. or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
1027	TENT BANNER	R & WALI					
102,	07,10,97,SL		16	1,568.		1,568.	0.
1028	(D)COMPUTER						
1000	04 23 98 SL	5.00		618.		618.	0.
1029	(D)COMPUTER			17,735.		17,735.	0.
1030	(D)COMPUTER			17,755•		11,155.	
	051498SL	5.00		1,149.		1,149.	0.
1031							
1022	0602985L	5.00		8,160.		8,160.	0.
1032	(D)COMPUTER	EQUIPN		2,427.		2,427.	0.
1033				2,12,1		271274	
	06 ₁ 22 ₁ 98 ₅ 1	5.00		1,700.		1,700.	0.
1034				1 0 0 0		1 0 0 1	
1035	07 ₁ 20 ₁ 98SL (D)MICRON C		16	1,862.		1,862.	0.
1000	01,14,99,SL		16	2,797.		2,797.	0.
1036	(D)MICRON C	OMPUTER	เร				
- 1 0 0 -	04 28 99 SL	5.00	16	5,506.		5,506.	0.
1037	COPIER	5.00	16	12,995.		12,995.	0.
1038	(D)COMPUTER			12,993.		12,995.	0.
2000	07,14,99SL	5.00	16	1,075.		1,075.	0.
1039	· · · · · ·						
1040	07 <u>16</u> 99SL	5.00	16	1,429.		1,429.	0.
1040	(D)COMPUTER	5.00	16	15,462.		15,462.	0.
1041	(D)COMPUTER	2					
- 1 0 1 0	01 ₁ 19 ₀ 00		16	1,089.		1,089.	0.
1042	(D)COMPUTER	5.00	16	4,948.		4,948.	0.
1043	4 NORSTAR I			4,940•		4,940.	0.
	08 17 00 SL	7.00		1,203.		1,132.	71.
1044	(D)3 P100 C						
1045	06 ₁ 20 ₁ 00SL TELEPHONE H			693.		693.	0.
1045	106200	7.00		669.		648.	21.
1046	BASKETBALL						
	07 ₁ 31 ₁ 00 _{SL}	7.00		633.		600.	30.
1047	WEIGHTLIFTI	NG EQUI		NT 2,000.		2,000.	0.
1048	(D)COMPUTER			2,000.		2,000.	0.
	061701SL	5.00	16	3,010.		3,010.	0.
1049	FOLDING MAC						
1050	01 ₁ 21 <u>102</u> SL GYM EQUIPME		16	3,505.		2,588.	501.
1030	12 28 01 SL	7.00	16	1,700.		1,276.	243.
1051	SADDLES/TAC	CK					
1050	040901SL		16	2,240.		1,920.	320.
1052	SEWAGE PUMP	7.00	16	598.		482.	85.
1053	COMPUTER SW					1020	
710	06 ₁ 21 ₁ 02 ₅₁	5.00		1,173.		1,116.	57.
716261 04-27-07			#	- Current year section 179	(D) - Asset disp ס ר	osea	

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Asset				Description	of property		
Number	Date placed	Method/ IRC sec.	Life Lin or rate No	e Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
1054	in service				reduction	depresitation/amortization	
1034	$06_{1}27_{1}02$		5.00 16	992.		941.	51.
1055	SODA VEN		MACHINE			<u>,</u>	
	01 ₁ 23 ₁ 03		7.00 16	600.		358.	86.
1056	DELL COM		8 5.00 16	956.		652	101
1057	11 ₀₇₀₃ GOLF CAF		01 00.cl	930.		653.	191.
1057	0 9 0 4 0 3		7.00 16	3,995.		2,046.	571.
1058	33 COMPU		VORKSTAT				4 = 4 4
1050			5.00 16	22,516.		13,134.	4,503.
1059	COPIER M		5.00 16	18,729.		10,301.	3,746.
1060	TRACTOR			10,725.		10,501.	5,740.
	01 ₁ 31 ₁ 05	SL	7.00 16	5,601.		1,733.	800.
1061	ROTARY C						
1000	01 ₁ 31 ₀ 5		7.00 16	517.		160.	74.
1062	SNOWBLOW		7.00 16	T OF SNOWMOBIL	Ľ	613.	283.
1063	LAPTOP C			EAT AMCO		013.	205.
2000	03,10,05		5.00 16	1,365.		569.	273.
1064	KITCHEN		REPAIR				
	05 ₁ 20 ₁ 05		10.0016	2,150.		394.	215.
1065			E 00 1 C	070		275	106
1066	042005 COMPUTER		5.00 16	979.		375.	196.
1000			5.00 16	703.		176.	141.
1067	TAPE DRI	VE	· ·				
10.50	05 ₁ 18 ₀ 6		5.00 16	2,787.		464.	557.
1068			- TUSCO			010	2 426
1069	12 ₀ 706		5.00 16 NITORS	12,182.		812.	2,436.
1005	05,25,06		5.00 16	1,300.		217.	260.
1070	8 PHONES	S & IN	ISTALLAT	ION			
	07 ₁ 13 ₀ 6	SL	5.00 16			219.	292.
1071	PRINTER					207	207
1072	012506 LAPTOP C		5.00 16			387.	387.
1072	$02_{1}22_{1}07$		5.00 16			26.	310.
1073	ROUTER	<u> </u>		_, _, _,			
	0 3 ₁ 2 0 ₁ 0 7		5.00 16	2,262.			452.
1074				N OFFICE		C1	
1075	02 ₁ 20 ₁ 07 PROCURVE		5.00 16	3,647.		61.	729.
1012	11 ₂ 706		5.00 16	520.		35.	104.
1076	POWER SU						
	06 ₁ 30 ₁ 06		5.00 16	528.		79.	106.
1077	FIREWALL						110
1079	010107 HP LASEF		5.00 16	549.		27.	110.
T019			$\frac{1250010}{5.00}$	1,451.		242.	290.
1079	LAPTOP C						2501
	06 ₁ 28 ₁ 06	SL	5.00 16	1,283.		192.	257.
1080	SUPERMIC						1.00
716261	01 ₁ 21 ₁ 07	лSГ	5.00 16	# - Current year section 179	(D) - Asset dispo	28.	169.
716261 04-27-07				•	23		

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Asset	Description of property							
Number	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
1081	ZIP CODE	SOF						
1000	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			16	9,696.		9,696.	0.
1082	SOFTWARE			16	13,355.		13,355.	0.
1083	ICE SOFT	WARE	_					
1004	05 <u>18</u> 05		3.00	16	1,011.		618.	337.
1084	SOFTWARE	-	3.00	16	1,195.	ĺ	464.	398.
1085	COMPUTER	S FOI	R BUS	TOU	R			
1000	09 ₀ 4 ₀ 7			16	5,496.			641.
1080	LAPTOP C	-		16	1,223.	1		122.
1087	DESK - T	USCOI	N		_,			
1000				16	432.			26.
1088	DESK - T			16	432.	I		21.
	* 990 PA		TOTAL		FURNITURE & EQ	QUIPMENT		21.
					311,251.	0.	231,819.	21,997.
	VEHICLES							
2001	VAN-DAME	ROW 1	FORD (INT	ERNS)			
	11 ₀ 496		5.00	16	16,975.		16,975.	0.
2002	FORD TRU 03,29,99		7.00	16	21,000.		21,000.	0.
2003	SNOWMOBI				21,000.		21,000	0.
0.004	10 ₁ 09 ₁ 99		7.00	16	4,300.		4,300.	0.
2004	SNOWMOBI	_	7.00	16	3,420.		3,420.	0.
2005	SNOWMOBI		,	± •	371200		5,1200	
2000	11,17,04			16	2,799.		933.	400.
2006	WHITE FO	-		16	12,625.	I	7,365.	2,525.
2007	HORSE TR	AILEI						
	031805		5.00	16	1,750.		700.	350.
2008	BUS FOR		rour 7.00	16	180,000.	Í	i	17,143.
	* 990 PA				VEHICLES			_,,
		<u> </u>			242,869.	0.	54,693.	20,418.
	BUILDING	S&.	IMPROV	EME	NTS	Í		
3101	2 WOODST	-						
2100			7.00		1,000.		1,000.	0.
3102	MAIN OFF 03,31,00	-		-	OLD PART OF C 33,236.	DEFICE	5,817.	831.
3104	ALL PHAS	E REI	MODEL				0,01	
2105			40.00	16	26,373.		4,613.	659.
3105	LODGE RE		40.00	16	1,786.	Í	315.	45.
3106	CABIN RE			_ •				
2105			40.00	16	1,472.		259.	37.
3107	OFFICE R 03 31 00		또 40.00	16	680.		119.	17.
3108	BUILDING							
716261	0 6 ₁ 3 0 ₁ 9 9	SL	40.00	16	250,238. - Current year section 179	(D) - Asset dispos	48,484.	6,256.
716261 04-27-07				"	-	24		

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Asset	Description of property							
Number	Date placed	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
3109	in service			110.	other basis	Teduction	depreciation/amortization	deduction
5105	06,30,99		40.00	16	1,000,951.		193,936.	25,024.
3110					1 520			182
3111	05 04 00 MAIN OFF		10.00		<u>1,732.</u> , ADDITION &		1,197.	173.
	09 ₁ 27 ₁ 01	SL	40.00		153,571.		21,115.	3,839.
3112	CABIN RE				7 440		1 0 2 0	100
3113	09 04 01 LODGE DI		40.00 ROOM/		7,440. Ement		1,039.	186.
	0 2 ₁ 2 8 ₁ 0 3	SL	40.00		122,075.		12,462.	3,052.
3114	SMALL CA	-			JAWEA		2 0 0 1	<u> </u>
3115	06 04 02 SMALL CA		40.00 #2	1010	25,000.		3,021.	625.
5115	06,04,02		40.00	16	25,000.		3,021.	625.
3116	LARGE CA				25 124			0.00
3117	0 6 ₁ 0 4 ₁ 0 2 HOMESTEA		40.00 BIN BC		35,134.		4,244.	878.
5111	09,10,02		40.00		12,550.		1,439.	314.
3118	WINDOWS				1 100			
3119	07 ₁ 11 ₀ 2 CARPET/V		7.00	-	<u>1,420.</u> & CABINS		964.	203.
5115	01,13,03		7.00		5,349.		3,247.	764.
3120	RENOVATI		BIG H					150
3121	03 ₁ 31 ₁ 03 IMPROVEM		40.00 - MAI		6,000.		600.	150.
9121	0 9 ₁ 0 1 ₁ 0 3		40.00		53,868.		4,827.	1,347.
3122	ROOF REP							
3123	10 ₀ 1 <u>0</u> 4 LODGE IM		39.50		6,194.		392.	157.
5125			40.00		10,000.		313.	250.
3124	BARN IMP							
3125	01 ₀ 1 ₀ 6 LIBRARY	SL	20.00	16	5,000.		313.	250.
7127	05 ₁ 31 ₁ 06	SL	40.00	16	38,593.		804.	965.
3126	OFFICE E	XTEN	SION -	NE	W BARN			
2107	01 ₀ 101				50,326. GE BUILDING		1,573.	1,258.
5121					18,500.		848.	925.
					BUILDINGS & I		5	
	LIVESTOC				1,893,488.	0.	315,962.	48,830.
		. <u>r.</u>						
4001	HORSE -							
4000	04 <u>18</u> 02	SL	3.00	16	3,248.		3,248.	0.
4002	HORSE 04 24 03	SL	3.00	16	3,000.		3,000.	0.
4003	HORSE							
	0 2 ₁ 2 8 ₁ 0 5			16	2,800.		1,944.	856.
	* 990 PA	<u>се 2</u>	TOTAL	, – 1 	LIVESTOCK 9,048.	0.	8,192.	856.
	LAND IMP	ROVE	MENTS					
FOOT								
2001	SEPTIC D 03,31,00		FIELD 20.00	16	10,705.		3,745.	535.
716261 04-27-07					- Current year section 179			
						25		

16390204 137273 0108018

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•				-	0101 990 11101			
Asset					Description	of property		
Number	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
5002	TENNIS &	BASI	KETBAI	Ъ С			· · · · · ·	
	0 7 ₁ 2 8 ₁ 0 0		20.00)16	23,084.		7,693.	1,154
5003	SEWER LI							
E 0 0 4	10 ₁ 04 ₁ 01		20.00	16	5,000.		1,375.	250
5004	DRAINFIE		20.00	116	5,795.		1,571.	290
5005	RIP-RAP		20.00	<u>1 0</u>	5,755.		,,,,,,,,	290
5005	07,23,01		20.00	016	600.		170.	30
5006	FIBER CA							
	05¦11¦01		20.00		1,128.		332.	56
5007	BARN/BRI		IMPROV					
	09 ₁ 002		40.00		4,092.		468.	102
5008	BRIDGE R				7 000		1 202	
5000	06¦01¦04 FENCING	SL	15.00	<u>116</u>	7,000.		1,323.	467
5009	1060005	IGT.	15.00	116	4,920.		601.	328
5010	FENCING	ЪП	T.2.00	<u>40</u>	4,920•			520
0010	07,31,06	SL	15.00	16	7,327.		326.	488
	* 990 PA				LAND IMPROVEM			
					69,651.	0.	17,604.	3,700
	LAND		-	-				
6004								
6001	LAND - M			-		i		0
	06 <mark>3099 06 06 00 00 00 00 00 00 00 00 00 00 00 </mark>			<u> </u>	26,839. LAND			0
				1	26,839.	0.	0.	0
	* GRAND	TOTA	L 990	PAG				
		_			2,553,146.	0.	628,270.	95,801
					1		1	
		<u> </u>	1	1	l			
						i	i	
			1	1				
						l		
		<u> </u>		1				
				1	1		,	
			1	1				
6261 -27-07		-	•	+	- Current year section 179	(D) - Asset dispo	sed	
	137273	01080	018			26 ENTER FOR N	ATIONAL INDEPE	N 01080181

16390204 137273 0108018

FORM 990 OTH	IER CHANGES IN N	ET ASSETS OR	FUND BAL	ANCES STATEMENT	1
DESCRIPTION				AMOUNT	
DECREASE IN FAIR MA CHANGE IN 2006 EXPE	<42,1	40.>			
STATEMENTS WERE COM	<3,2	87.>			
TOTAL TO FORM 990,	PART I, LINE 20			<45,4	27.>

FORM 990	OTHEI	STATEMENT 2		
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CONSULTANT FEES EDUCATIONAL BUS TOUR	79,260.	60,175.	9,850.	9,235.
EXPENSES INSURANCE WEB SITE CO-LOCATOR	67,884. 18,858. 10,630.	67,884. 15,652. 10,630.	1,697.	1,509.
OUTREACH MARKETING BANK CHARGES FEES CORPORATE FEES PROGRAM DUES AND	61,036. 3,967. 2,109. 25.	50,660.	5,493. 3,967. 2,109. 25.	4,883.
SUBSCRIPTIONS PROGRAM CONTRACT	34,761.	34,761.		
LABOR REPAIRS AND MAINTENANCE -	2,483.	2,483.		
FACILITY KITCHEN SUPPLIES /	6,456.	5,359.	581.	516.
FOOD FOR INTERNS PAYROLL PREPARATION	58,597.	48,636.	5,274.	4,687.
SERVICES MAILING LISTS PROGRAM COMPUTER FEES / COMPUTER	1,921. 33,404.	1,594.	173.	154. 33,404.
SERVICING MAINTENANCE &	30,778.	30,778.		
REPAIRS OTHER SUPPLIES VEHICLE EXPENSE MISCELLANEOUS	2,239. 10,697. 17,249. 4,122.	1,858. 8,878. 14,489. 3,441.	201. 963. 1,380. 361.	180. 856. 1,380. 320.
TOTAL TO FM 990, LN 43	446,476.	357,278.	32,074.	57,124.

3

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION OF PROGRAM SERVICE ONE

RESEARCH: THE ORGANIZATION DEVOTES CONSIDERABLE EFFORT TO RESEARCHING INFORMATION ABOUT ALL CANDIDATES FOR PRESIDENTIAL, CONGRESSIONAL, GUBERNATORIAL AND STATE LEGISLATIVE OFFICE AND ELECTED OFFICIALS (INCLUDING VOTING RECORDS, BIOGRAPHICAL AND CONTACT INFORMATION, ISSUE POSITIONS, INTEREST GROUP RATINGS, PUBLIC STATEMENTS AND CAMPAIGN FINANCES.) ONE OF MANY WAYS THIS IS DONE IS THROUGH A POLITICAL COURAGE TEST WHICH ASKS CANDIDATES WHICH ISSUES THEY WILL SUPPORT AND OPPOSE. VOTERS THUS HAVE ACCESS TO UNBIASED INFORMATION ON CANDIDATES AS WELL AS THOSE SERVING IN ELECTED POSITIONS. MUCH OF THE RESEARCH IS DONE BY PROJECT INTERNS WHO SPEND 10 WEEKS AT THE PROJECT AND BY ITS MANY VOLUNTEERS.

> GRANTS EXPENSES 835,840.

TO FORM 990, PART III, LINE A

STATEMENT

4

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT

DESCRIPTION OF PROGRAM SERVICE TWO

INFORMATION DELIVERY: ONCE INFORMATION IS THOROUGHLY RESEARCHED AND SUBSTANTIATED, PROJECT VOTE SMART TAKES IT DIRECTLY INTO COMMUNITIES. THERE IS A STRONG WEBSITE WHERE A COMPREHENSIVE DATABASE ON OFFICIALS CAN BE EASILY ACCESSED. LIBRARIES PARTNER WITH PROJECT VOTE SMART TO DISSEMINATE INFORMATION. THE VOTER'S RESEARCH HOTLINE IS AVAILABLE TO BE CALLED TO ACCESS RESEARCH. PUBLICATIONS ARE AVAILABLE INCLUDING THE "VOTERS SELF DEFENSE MANUAL". THERE ARE ALSO SIGNIFICANT RESOURCES MADE AVAILABLE TO THE POLITICAL JOURNALISTS TO HELP IN FACT-CHECKING AND BACKGROUND FOR STORIES. THIS INCLUDES "THE REPORTERS SOURCE BOOK" WHICH PROVIDES A CONCISE OVERVIEW OF MAJOR NATIONAL ISSUES AS WELL AS A CONTACT DIRECTORY FOR HUNDREDS OF SOURCES USEFUL TO JOURNALISTS. HUNDREDS OF RADIO AND TELEVISION STATIONS AIR PSA'S DURING THE ELECTION SEASON DIRECTING THEIR AUDIENCES TO THE PROJECT VOTE SMART RESEARCH HOTLINE AND TO THE ORGANIZATIONS WEBSITE. THIS YEARS INFORMATION DELIVERY EXPENSES WERE HIGHER THAN NORMAL BECAUSE IT WAS THE START OF A PRESIDENTIAL ELECTION YEAR AND EVERY EFFORT WAS MADE TO HAVE AS MUCH INFORMATION AS EASILY ACCESSIBLE AS POSSIBLE.

		GRANTS	EXPENSES
TO FORM 990, PART III, LINE B	=		751,274.
FORM 990 DEPRECIATION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT 5
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
20 BUNK BEDS/40 MATTRESSES 10 DRESSERS 9 OFFICE CHAIRS CARPET LODGE FURNISHINGS LODGE FURNITURE WASHER & DRYER OFFICE FURNITURE TENT FACADE TENT PIPES	9,175. 500. 630. 737. 1,700. 500. 538. 7,182. 900. 1,746.	9,175. 497. 630. 691. 486. 148. 141. 1,112. 900. 1,743.	0. 3. 0. 46. 1,214. 352. 397. 6,070. 0. 3.

TENT BANNER & WALLS	1,568.	1,568.	0.
COPIER	12,995.	12,995.	0.
4 NORSTAR TELEPHONES	1,203.	1,203.	0.
TELEPHONE HEADSETS	669.	669.	Ο.
BASKETBALL GOALS/EQUIPMENT	633.	630.	3.
WEIGHTLIFTING EQUIPMENT	2,000.	2,000.	Ο.
FOLDING MACHINE	3,505.	3,089.	416.
GYM EQUIPMENT	1,700.	1,519.	181.
SADDLES/TACK	2,240.	2,240.	0.
SEWAGE PUMP	598.	567.	31.
COMPUTER SWITCHER	1,173.	1,173.	0.
WEBSITE SERVER	992.	992.	0.
SODA VENDING MACHINE	600.	444.	156.
DELL COMPUTER	956.	844.	112.
GOLF CART	3,995.	2,617.	1,378.
33 COMPUTER WORKSTATIONS	22,516.	17,637.	4,879.
COPIER MACHINE	18,729.	14,047.	4,682.
TRACTOR	5,601.	2,533.	3,068.
ROTARY CUTTER	517.	234.	283.
SNOWBLOWER ATTACHMENT OF	517.	254.	205.
SNOWBLOWER ATTACHMENT OF SNOWMOBILE	1 0 9 0	896.	1 006
	1,982.		1,086.
LAPTOP COMPUTER - GREAT AMCO	1,365.	842.	523.
KITCHEN OVEN REPAIR	2,150.	609.	1,541.
COMPUTER	979.	571.	408.
COMPUTER	703.	317.	386.
TAPE DRIVE	2,787.	1,021.	1,766.
25 COMPUTERS - TUSCON OFFICE	12,182.	3,248.	8,934.
5 COMPUTER MONITORS	1,300.	477.	823.
8 PHONES & INSTALLATION	1,460.	511.	949.
PRINTER - TUSCON OFFICE	1,936.	774.	1,162.
LAPTOP COMPUTER - DIRECTOR	1,551.	336.	1,215.
ROUTER	2,262.	452.	1,810.
COPY MACHINE - TUSCON OFFICE	3,647.	790.	2,857.
PROCURVE SWITCH	520.	139.	381.
POWER SUPPLY - SERVER	528.	185.	343.
FIREWALL CISCO PIX	549.	137.	412.
HP LASERJET 4250DTN	1,451.	532.	919.
LAPTOP COMPUTER - ADELAIDE	1,283.	449.	834.
SUPERMICRO SUPERSERVER	847.	197.	650.
ZIP CODE SOFTWARE	9,696.	9,696.	0.
SOFTWARE - DONOR PERFECT	13,355.	13,355.	0.
ICE SOFTWARE	1,011.	955.	56.
SOFTWARE INC	1,195.	862.	333.
COMPUTERS FOR BUS TOUR	5,496.	641.	4,855.
LAPTOP COMPUTER	1,223.	122.	1,101.
DESK – TUSCON	432.	26.	406.
DESK – TUSCON	432.	20.	411.
VAN-DAMEROW FORD (INTERNS)	16,975.	16,975.	· · · · ·
	-	-	
FORD TRUCK	21,000.	21,000.	0.
SNOWMOBILE	4,300.	4,300.	0.
SNOWMOBILE	3,420.	3,420.	0.
SNOWMOBILE	2,799.	1,333.	1,466.
WHITE FORD VAN	12,625.	9,890.	2,735.

85-0364261

HORSE TRAILER	1,750.	1,050.	700.
BUS FOR BUS TOUR	180,000.	17,143.	162,857.
2 WOODSTOVES	1,000.	1,000.	0.
MAIN OFFICE REMODEL - OLD PART	-	-	
OF OFFICE	33,236.	6,648.	26,588.
ALL PHASE REMODEL	26,373.	5,272.	21,101.
LODGE REMODEL	1,786.	360.	1,426.
CABIN REMODEL	1,472.	296.	1,176.
OFFICE REMODEL	680.	136.	544.
BUILDING	250,238.	54,740.	195,498.
BUILDING	1,000,951.	218,960.	781,991.
2 WATER HEATERS	1,732.	1,370.	362.
MAIN OFFICE (2 CABINS,	1,7520	±,5,6,	5021
ADDITION & REMODEL)	153,571.	24,954.	128,617.
CABIN REMODEL	7,440.	1,225.	6,215.
LODGE DINING ROOM/BASEMENT	122,075.	15,514.	106,561.
SMALL CABIN #1 - SACAJAWEA	25,000.	3,646.	21,354.
SMALL CABIN #2	25,000.	3,646.	21,354.
LARGE CABIN - LIBERTY	35,134.	5,122.	30,012.
HOMESTEAD CABIN ROOF	12,550.	1,753.	10,797.
WINDOWS - BACK OFFICE	1,420.	1,167.	253.
CARPET/VINYL - LODGE & CABINS	5,349.	4,011.	1,338.
RENOVATION - BIG HOUSE	6,000.	750.	5,250.
IMPROVEMENTS - MAIN OFFICE	53,868.	6,174.	47,694.
ROOF REPLACEMENT - OLD OFFICE	6,194.	549.	5,645.
LODGE IMPROVEMENTS	10,000.	563.	9,437.
BARN IMPROVEMENTS	5,000.	563.	4,437.
LIBRARY	38,593.	1,769.	36,824.
OFFICE EXTENSION - NEW BARN	50,326.	2,831.	47,495.
NEW ROOF - VALLEY FORGE			
BUILDING	18,500.	1,773.	16,727.
HORSE – SAPPHIRE	3,248.	3,248.	Ο.
HORSE	3,000.	3,000.	0.
HORSE	2,800.	2,800.	0.
SEPTIC DRAINFIELD	10,705.	4,280.	6,425.
TENNIS & BASKETBALL COURT	23,084.	8,847.	14,237.
SEWER LINE	5,000.	1,625.	3,375.
DRAINFIELD	5,795.	1,861.	3,934.
RIP-RAP ROCK	600.	200.	400.
FIBER CABLE	1,128.	388.	740.
BARN/BRIDGE IMPROVEMENTS	4,092.	570.	3,522.
BRIDGE REPLACEMENT	7,000.	1,790.	5,210.
FENCING	4,920.	929.	
FENCING	7,327.	814.	3,991. 6,513.
	-		•
LAND – MONTANA	26,839.	0.	26,839.
TOTAL TO FORM 990, PART IV, LN 57	2,420,015.	590,940.	1,829,075.
=			

	OF CURRENT OFFICERS, DIRECTORS, STATEMENT TEES AND KEY EMPLOYEES				
TITLE AND NAME AND ADDRESS AVRG HRS/WK			EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
RICHARD KIMBALL ONE COMMON GROUND PHILIPSBURG, MT 59858	EXECUTIVE DIRE 40.00	CTOR / PRES 86,539.		0.	
ADELAIDE ELM KIMBALL ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 40.00	37,861.	0.	0.	
SUSAN BRANDES ONE COMMON GROUND PHILIPSBURG, MT 59858	TREASURER 2.00	0.	0.	0.	
KYLE DELL ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 2.00	0.	0.	0.	
MARGARET KENSKI 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	SECRETARY 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.	
PEGGY LAMPLE ONE COMMON GROUND PHILIPSBURG, MT 59858	BOARD MEMBER 2.00	0.	0.	0.	
TOTALS INCLUDED ON FORM 990, P.	ART V-A	124,400.	0.	0.	

32 STATEMENT(S) 6 16390204 137273 0108018 2007.07000 CENTER FOR NATIONAL INDEPEN 01080181

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

STATEMENT 7

INDIVIDUAL'S NAME

RICHARD KIMBALL

TITLE OR ROLE EXECUTIVE DIRECTOR

TITLE OR ROLE DIRECTOR

ADELAIDE ELM KIMBALL

INDIVIDUAL'S NAME

EXPLANATION OF RELATIONSHIP

THE BOARD MEMBERS ARE HUSBAND AND WIFE.

SCHEDULE A	EXPLANATION OF	QUALIFICATIONS TO	RECEIVE PAYMENTS	STATEMENT	8
		PART III, LINE	3A		

SEE ATTACHED STATEMENT

SCHEDULE A	OTHER INCOME STATEMENT			TEMENT 9
DESCRIPTION	2006	2005	2004	2003
	AMOUNT	AMOUNT	AMOUNT	AMOUNT
SALE OF INVESTMENTS	9,020.	12,749.	<24,966.>	43,948.
MISCELLANEOUS REVENUE		3,943.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	9,020.	16,692.	<24,966.>	43,948.

SCHEDULE A	SUPPLEMENTAL SUPPORT OTHER INCOME	ST.	ATEMENT 10	
DESCRIPTION	2006 Amount	2005 Amount	2004 AMOUNT	2003 Amount
SALE OF INVESTMENTS MISCELLANEOUS INCOME	9,020.	12,749. 3,943.	<24,966.>	43,948.
TOTAL TO LINE 22	9,020.	16,692.	<24,966.>	43,948.