Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2004

Open to Public Inspection

Form 990 (2004)

Department of the Treasury
Internal Revenue Service

Department of the Treasury
Internal Revenue Service

Department of the Treasury
Internal Revenue Service

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

or Privacy Act and Paperwork Reduction Act Notice, see the separate

instructions.

9/01/04 , and ending 8/31/05 For the 2004 calendar year, or tax year beginning Employer Identification no. Check if applicable: Name of organization use IRS 06-1540445 Address change label or USAWCT, INC E Telephone number Name change print or 203-359-8800 type. Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite See 21 AUNT HACK ROAD Accounting method: X Cash Final return Specific Amended return City or town, state or country, and ZIP + 4 Accrual Other (specify) Instruc-Application pending tions. DANBURY CT 06811 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable H and I are not applicable to section 527 organizations trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group return for affiliates? Website: VSAWCT.ORG H(b) If "Yes," enter number of affiliates ▶ Organization type H(c) Are all affiliates included? Yes (check only one) ► X 501(c) (3) ≤ (insert no.) 4947(a)(1) or 527 (If "No," att. a list. See instr.) Check here I if the organization's gross receipts are normally not more than \$25,000. H(d) Is this a separate return filed by an The organization need not file a return with the IRS; but if the organization received a organization covered by a group ruling? Group Exemption Number Form 990 Package in the mail, it should file a return without financial data. Some states M Check | if the organization is not required require a complete return. 180,641 Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 to attach Sch. B (Form 990, 990-EZ, or 990-PF). Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.) Part I Contributions, gifts, grants, and similar amounts received: 20,110 Direct public support 1a Indirect public support 2,204 Government contributions (grants) 1c c Total (add lines 1a through 1c) (cash \$ _____ 22,314 noncash \$ 22,314 d 1d 70,963 Program service revenue including government fees and contracts (from Part VII, line 93) 2 2 86,414 Membership dues and assessments See Statement 3 3 4 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 5 Gross rents 6a Less: rental expenses ь Net rental income or (loss) (subtract line 6b from line 6a) 6c c 7 R Other investment income (describe 8a Gross amount from sales of assets other (A) Securities (B) Other than inventory 8a 8b Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B)) 8d Special events and activities (attach schedule). If any amount is from gaming, check here Gross revenue (not including \$ contributions reported on line 1a) 9a Less: direct expenses other than fundraising expenses Net income or (loss) from special events (subtract line 9b from line 9a) 9¢ C Gross sales of inventory, less returns and allowances 10a 10a 10b Less: cost of goods sold b Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) 10c C 950 Other revenue (from Part VII, line 103) 11 11 180,641 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 173,117 13 Program services (from line 44, column (B)) 13 6,804 14 Management and general (from line 44, column (C)) 14 15 15 Fundraising (from line 44, column (D)) 16 Payments to affiliates (attach schedule) 16 17 179,921 Total expenses (add lines 16 and 44, column (A)) 17 720 18 Excess or (deficit) for the year (subtract line 17 from line 12) 18 21,779 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 20 Other changes in net assets or fund balances (attach explanation) 22,499 21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)

				red for section 501(c)(3) a	
Functional Expenses and section 4947(s	a)(1) none	xempt charitable trusts bu		page 22 of the instructions	i.)
Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	services	and general	(b) Tundraising
2 Grants and allocations (attach schedule) Stmt 2	1 1				
(cash \$ 20,000 cash \$)	22	20,000	20,000		
3 Specific assistance to individuals	23			e distribution in the second	Library Comment
4 Benefits paid to or for members	24				
5 Compensation of officers, directors, etc.	25		i		
6 Other salaries and wages	26				
7 Pension plan contributions	27				
8 Other employee benefits	28				
9 Payroli taxes	29				
Professional fundraising fees	30				
1 Accounting fees	31	i			
2 Legal fees	32				
3 Supplies	33	1,975		1,975	
4 Telephone	34	1,139		1,139	
5 Postage and shipping	35	353		353	
6 Occupancy	36			<u> </u>	
7 Equipment rental and maintenance	37				•
8 Printing and publications	38				
9 Travel	39	218		218	
Conferences, conventions, and meetings	40				
d Internat	41				
2 Depreciation, depletion, etc. (attach schedule)	42				-
Other expenses not covered above (itemize): a	43a				
L Coo Statement 3	43b	156,236	153,117	3,119	
***************************************	43c	130,230	100,117		
C				·	
d	43d				
4. Tatal formalisms (and the control of the control	43e				
4 Total functional expenses (add lines 22 - 43). Organizations		179,921	172 112	6,804	,
completing columns (B)-(D), carry these totals to lines 13-15 oint Costs. Check if you are following SOP 98-2.	44	119,321	173,117	0,004	
			:- (B) D	- • •	Yes X No
we any joint costs from a combined educational campaign and f	undraisii	ig solicitation reported	in (b) Program service	es (
				rvices \$	i
ii) the amount allocated to Management and general \$; and (iv) the amoun			
Part III Statement of Program Service Acce	ompiis	nments (See pag	ge 25 of the instru	ictions.)	Beneral Conde
What is the organization's primary exempt purpose?					Program Service Expenses
See Statement 4	nte in a	clear and concies man	ner State the number		(Required for 501(c)(3) 8
Il organizations must describe their exempt purpose achievement f clients served, publications issued, etc. Discuss achievements	that are	not measurable. (Sec	tion 501(c)(3) and (4)		(4) orgs., & 4947(a)(1) trusts; but optional for
rganizations and 4947(a)(1) nonexempt chantable trusts must a	also ente	r the amount of grants	and allocations to other	ers.)	others.)
a To Promote and develope Wres					
under the age of 18 through	out	the USA and	1 ••••••••		
Internationally.					450 445
		(Grants and allo	cations S	20,000)	173,117
b					
		(Grants and allo	cations \$)	
С					
		(Grants and allo	cations \$)	
d					
		(Grants and allo	ocations \$	·····	
Other program services (attach schedule)		(Grants and allo)	
f Total of Program Service Expenses (should equal line 44,	column				173,117
DAA	- Design Hill			.,.,	Form 990 (2004

Form 990 (2004)

Part IV Balance Sheets (See page 25 of the instructions.)

	Note:	Where required, attached schedules and amounts with column should be for end-of-year amounts only.	in the description	(A) Beginning of year		(B) End of year
_	45	0hi-tt-hi		16,977	45	19,626
	_	~		10,511	46	13,020
	46	Savings and temporary cash investments	• • • • • • • • • • • • • • • • • • • •		46	
	47	A converte receivable	147-1			
	47a	Accounts receivable	47a 47b	1		
	ь	Less: allowance for doubtful accounts	4/D		47c	
	48a	Pledges receivable	48a	-	CADE	
	b	Less: allowance for doubtful accounts			48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key e			[[
A		(attach schedule)			50	
8	51a		1 1			
S		schedule)	51a	-		
0		Less: allowance for doubtful accounts			51c	
t	52	Inventories for sale or use			52	
8	53	Prepaid expenses and deferred charges			53	
	54	Investments-securities		-	54	
	55 a	Investments-land, buildings, and	1 1			
		equipment: basis	55a		e e	
	Ь	Less: accumulated depreciation (attach				
		schedule)	55b		55c	
	56	Investments-other (attach schedule)	1 1		56	
	5 7a		57a			
	b	Less: accumulated depreciation (attach				
		schedule)	[57b]	F 005	57c	0.073
	58	Other assets (describe See Statemen	<u>t 5</u>)	5,027	58	2,873
				00.004		00 400
	59	Total assets (add lines 45 through 58) (must equal line		22,004		22,499
L	60	Accounts payable and accrued expenses			60	
i	61	Grants payable			61	
a b	62	Oeferred revenue	,		62	
i	63	Loans from officers, directors, trustees, and key employ	ees (attach		Shad.	
1		schedule)			63	
!		Tax-exempt bond liabilities (attach schedule)			64a	
i	ь	Mortgages and other notes payable (attach schedule)		205	64b	
е	65	Other liabilities (describe See Statemen	16 6	225	65	
8				225		^
\dashv	66	Total liabilities (add lines 60 through 65)		225	66	0
	Orga	inizations that follow SFAS 117, check here	and complete lines		ar land	
N.E		67 through 69 and lines 73 and 74.			07	
N F e u	67	Unrestricted			67 68	
t n	6B				69	
d	69	Permanently restricted	⊾ਾਰਾ		09	
A _	Orga	inizations that do not follow SFAS 117, check here	and		2.5	
5 B		complete lines 70 through 74.			70	
sa el	70	Capital stock, trust principal, or current funds			70	
t a	71	Paid-in or capital surplus, or land, building, and equipme		21,779	71	22,499
8 n	72	Retained earnings, endowment, accumulated income, or		21,119	72	22,493
С О е	73	Total net assets or fund balances (add lines 67 throu	gn 69 or lines			
T g		70 through 72:	P 04)	21,779	70	22,499
-		column (A) must equal line 19; column (B) must equal		22,004		22,499
	74	Total liabilities and net assets / fund balances (add	lines 66 and 73)	22,004	74	

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.

70565											
Form 990 (2	2004) USAWCT, INC					06-1	1540445				Page 4
Part IV-	Reconciliation of Re Financial Statement Return (See page 27	s wi	th Revenue per		F	F	Reconciliation of Financial Statem Return				
a Total	revenue, gains, and other support			22	a	Total expenses					
	udited financial statements	a	180,6	41		audited financia		•	а	X 100	179,921
	unts included on line a but not on				þ	Amounts include	ed on line a but not				u. partilitati
line 1	2, Form 990:					on line 17, Form	1 990:				. 45
(1) Net u	nrealized gains on				(1) Donated service	es and use				
invest	tments \$		100 Sept. 1987			of facilities \$					
(2) Donat	ted services and use		Control of the second		(2	2) Prìor year adjus	tments				
of fac	ilities \$		30.45			reported on line	20,				
(3) Reco	veries of prior	E.,	Personal Production			Form 990 \$					
	grants \$				(3) Losses reported	f on line 20,			met.	The state of the s
(4) Other	(specify):	-	and the state of the			Form 990 <u>\$</u>	1				
				100	(4) Other (specify):					
	<u>\$</u>			er year							
Add a	amounts on lines (1) through (4)	_b	<u> </u>	-		<u>\$</u>	. N 442 4b b 442	_			
a linea	a migus lino h	١.	180,6	41	_	Line a minus line	n lines (1) through (4)		С		179,921
	a minus line b		100,0		d	Amounts include			C		113,321
	990 but not on line a:	- 11	S. J. Harrison, and	See	u	Form 990 but no	- '				
	tment expenses	1	The state of the state of	- 4	(1	investment expe					
' '	cluded on line	-1	A Part Table Control		١,	not included on					
	orm 990 \$		A section of the			6b, Form 990 \$				1	
(2) Other	(specify):			100	(2	2) Other (specify):					
			recession and Cold Fac								
	<u>\$</u>					<u>\$</u>					
Add a	mounts on lines (1) and (2) 🕨	d				Add amounts or	n lines (1) and (2)		d		
e Total	revenue per line 12, Form 990				θ	-	per line 17, Form 990				450 001
Marin - Children Color of Color	plus line d)	<u> </u>	180,6				d)	<u> </u>			179,921
Part V	List of Officers, Directo the instructions.)	rs, i	rustees, and Key	/ Em	ıp!	oyees (List each	one even if not comp	ensat	ed; se	e page	27 of
	(A) Name and addres	. s		hou	(B) urs	Title and average per week devoted to	(C) Compensation (If not paid, enter	emp plan	Contr loyee b	enefit erred	(E) Expense account and other
Mark	A. Cammisa int Hack Road Danb		CT 06911	S	ta	position Ate Chair	-0) O	cc	mp o ns	ation O	allowances
	n Jadach	ur y	CI OUBII	S	te	ate VC					
	akeview Terr. Derb	v C	T 06418	-	_		0			0	l o
	r Shaw			s	ec	retary		ļ			
16 Hi	ickory Lane Waterf	orc	CT 06385	1			0	L		0	0
Thoma	as Johnston			.1	re	asurer		[
300 I	Dennison Rid Manch	est	er CT 06040	1			0	ļ		0	0
				\top		····					
			-								
				1	_		1400,000 (L			
75 Did a organ	ny officer, director, trustee, or key en nization and all related organizations,	of wh	e receive aggregate co ich more than \$10,000	was	pro	wided by the relate	d organizations?			•	Yes X No

If "Yes," attach schedule-see page 28 of the instructions.

Form	990 (2004) USAWCT, INC	06-1540445		Р	age 5
Pa	rt VI Other Information (See page 28 of the instructions.)		П	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," at	tach a detailed description of	\neg		
	each activity		76		х
77	Were any changes made in the organizing or governing documents but not reported to the	A IPS2	77		X
••	If "Yes," attach a conformed copy of the changes.	e inor		4	
70-	•	your advaced by this sature?	70-	Marin Co.	X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the	· · · · · · · · · · · · · · · · · · ·	78a	\longrightarrow	
	If "Yes," has it filed a tax return on Form 990-T for this year?		78b	\dashv	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year	r/ ir Yes," attach a			17
•	statement		79	and September	X
80a	Is the organization related (other than by association with a statewide or nationwide organ				THE
	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt	t organization?	80a		X
Ь	If "Yes," enter the name of the organization			1	
	and check whethe				1
81a	Enter direct and indirect political expenditures. See line 81 instructions		100	Mile.	14.
ь	Did the organization file Form 1120-POL for this year?		81b	\longrightarrow	X
82a	Did the organization receive donated services or the use of materials, equipment, or facility	ities at no charge		.	
	or at substantially less than fair rental value?		82a		X
Ь	If "Yes," you may indicate the value of these items here. Do not include this amount as	11	(A)	146	
	revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	A.B.		1963
83a	Did the organization comply with the public inspection requirements for returns and exemp		83a	X	<u> </u>
Ь	Did the organization comply with the disclosure requirements relating to quid pro quo con-		83b	\longrightarrow	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that sucl				
	or gifts were not tax deductible?		84b	\rightarrow	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by member		85a	-	
Ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	,	85b	0.610±	201 X 11
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unle	ess the organization			
_	received a waiver for proxy tax owed for the prior year.	leso l			
ن	Dues, assessments, and similar amounts from members	المعما			
a	Section 162(e) lobbying and political expenditures			100	Mary P
0	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices Taxable amount of lobbying and political expenditures (line 85d less 85e)				
1	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	/-	85g		\$65.5 m
h h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the air		200	\rightarrow	
"	reasonable estimate of dues allocable to nondeductible lobbying and political expenditure	I		}	1
	year?		85h		
RE	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	1011	700	
ь	Cross respirete included as line 40 for multipures of alub facilities	964			1
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders				E TOTAL
ь	Gross income from other sources. (Do not net amounts due or paid to other				
_	sources against amounts due or received from them.)	87b	E.	No.	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable				
	partnership, or an entity disregarded as separate from the organization under Regulations				
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX		88	- 1	Х
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year	The state of the s			100
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; se	ection 4955			
Ь	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess ber	nefit transaction	- 1		
	during the year or did it become aware of an excess benefit transaction from a prior year?	P If "Yes," attach			
	a statement explaining each transaction	<u>L</u>	89b		<u> </u>
С	Enter: Amount of tax imposed on the organization managers or disqualified persons durin	g the year under			
	sections 4912, 4955, and 4958	<u> </u>			0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	· · · · · · · · · · · · · · · · · · ·			0
90a	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, 2004 (See inst	ructions.)			0
91	The books are in care of Thomas Johnston	Telephone no. ▶ 860-6	47	-83	66
	Located at Manchester, CT	ZIP+4 ▶ U6U4U			<u></u>
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Che	eck here			P L
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92		000	
			Form	990	(2004)

Part VII	Analysis of Income-Pro		occ pag	0 00 01 1110		· <i>]</i>		
Note: Enter	gross amounts unless otherwise		Unrelated	business incom	e Exclude	d by sec. 512	2, 513, or 514	(E)
indicated.			(A) siness code	(B) Amount	(C) Exclusio	(D) lount	Related or exempt function
93 Program	service revenue:	Bus	siness code	Amount	code	Am	ount	income
	te & Qualifier Re				41		8,494	
ь <u>Cad</u>	et & Junior Tourn	ament			41		56,414	ł l
c Tec	hnique Clinics US.	A Childre			41		1,410	
d Sch	oolboys Revenue				41		2,935	5
	ching Clinics Bro	nze & Cop			41		1,710	
	d contracts from government agenci	ies				 		
94 Members	ship dues and assessments				25	 	86,414	1
95 Interest	on savings and temporary cash inve					 	00,414	-
						 		
96 Dividend	ls and interest from securities		Spirit Library		Soles to Salessia	- CENTRAL X (0.5) 3	Mark Control	
	al income or (loss) from real estate:		Mark Comment	C. S. T. M. C. S.		20.550.00	100 St. 100	
a debt-fina	nced property					 		
not gebt-	financed property			····		 		
	al income or (loss) from personal pro	operty				 		-
	vestment income					_		·····
	(loss) from sales of assets other than							
101 Net incor	me or (loss) from special events							
	ofit or (loss) from sales of inventory					-		
103 Other re-		-1				-		050
	anon Bull Dawgs A					 		950
d								
Vicinity of the second						ļ		
104 Subtotal	(add columns (B), (D), and (E))				0		<u>57,377</u>	
	dd line 104, columns (B), (D), and (E						▶	158,327
manufacture of the State of the	plus line 1d, Part I, should equal the							
Part VIII	Relationship of Activitie							
Line No.	Explain how each activity for which	h income is reported in c	olumn (E) c	of Part VII contr	ributed importar	itly to the ac	ccomplishm	ont
		,						en
4-	of the organization's exempt purpo	,			ses).			
N/A	of the organization's exempt purpo	,			ses).			ena
	of the organization's exempt purpo	,			ses).			en
	of the organization's exempt purpo	,			ses).			en
N/A		oses (other than by provid	ding funds	for such purpos				
	Information Regarding Ta	oses (other than by provide	ding funds	for such purpos			34 of the	instructions.)
N/A Part IX	Information Regarding Ta	oses (other than by provide	s and Di	for such purpos	Entities (Se		34 of the	instructions.)
N/A Part IX Name, add	Information Regarding Ta	oses (other than by provid	s and Di	for such purpos	Entities (Se	ee page 3 (D) Total inco	34 of the	instructions.)
N/A Part IX Name, add	Information Regarding Ta (A) dress, and EIN of corporation, ship, or disregarded entity	exable Subsidiarie (B) Percentage of	s and Di	for such purpos	Entities (Se		34 of the	instructions.) (E) End-of-year
N/A Part IX Name, add partners	Information Regarding Ta (A) dress, and EIN of corporation, ship, or disregarded entity	exable Subsidiaries (B) Percentage of ownership interest	s and Di	for such purpos	Entities (Se		34 of the	instructions.) (E) End-of-year
N/A Part IX Name, add partners	Information Regarding Ta (A) dress, and EIN of corporation, ship, or disregarded entity	axable Subsidiarie (B) Percentage of ownership interest	s and Di	for such purpos	Entities (Se		34 of the	instructions.) (E) End-of-year
N/A Part IX Name, add partners	Information Regarding Ta (A) dress, and EIN of corporation, ship, or disregarded entity	axable Subsidiarie: (B) Percentage of ownership interest	s and Di	for such purpos	Entities (Se		34 of the	instructions.) (E) End-of-year
Part IX Name, add partners N/A	Information Regarding Ta (A) Iress, and EIN of corporation, ship, or disregarded entity	exable Subsidiaries (B) Percentage of ownership interest	s and Di	sregarded (C) ature of activiti	Entities (Se	(D) Total inco	34 of the	instructions.) (E) End-of-year assets
Part IX Name, add partners N/A	Information Regarding Ta (A) Iress, and EIN of corporation, ship, or disregarded entity	exable Subsidiaries (B) Percentage of ownership interest % % % % ransfers Associate	s and Di	sregarded (C) ature of activiti	Entities (Se	(D) Total inco	ome page 34 of the	instructions.) (E) End-of-year assets
Part X Name, add partners N/A Part X (a) Did to	Information Regarding Ta (A) tress, and EIN of corporation, ship, or disregarded entity Information Regarding Treather organization, during the year, received.	exable Subsidiarie (B) Percentage of ownership interest % % ransfers Associate beive any funds, directly of the subsidiarie.	s and Di	sregarded (C) ature of activiti	Entities (Se	(D) Total inco	ome page 34 of the	instructions.) (E) End-of-year assets
Part X Name, add partners N/A Part X (a) Did t (b) Did t	Information Regarding Ta (A) Iress, and EIN of corporation, ship, or disregarded entity Information Regarding Tr the organization, during the year, recitive organization, during the year, pa	Percentage of ownership interest % % % ransfers Associate beive any funds, directly of y premiums, directly or interest.	s and Di	sregarded (C) ature of activiti	Entities (Se	(D) Total inco	ome page 34 of the	instructions.) (E) End-of-year assets the instructions.)
Part X Name, add partners N/A Part X (a) Did t (b) Did t	Information Regarding Ta (A) Iress, and EIN of corporation, ship, or disregarded entity Information Regarding Tr the organization, during the year, receive organization, during the year, pages" to (b), file Form 8870 and Form	Percentage of ownership interest (B) Percentage of ownership interest % % ransfers Associate beive any funds, directly of y premiums, directly or in 4720 (see instructions).	s and Di N Med with P or indirectly, or	sregarded (C) ature of activiti ersonal Be to pay premiu	Entities (Seies	Total inco	page 34 of to	instructions.) (E) End-of-year assets the instructions.) Yes X No
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SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No. 1545-0047

2004

Department of the Treasury Internal Revenue Service

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Name of the organization

Employer identification number USAWCT, INC 06-1540445 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (e) Expense (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation empl. ben. plans & account and other than \$50,000 per week devoted to position deferred comp. allowances NONE Total number of other employees paid over \$50,000 Part II 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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Total number of others receiving over \$50,000 for

professional services

Schedule A (Form 990 or 990-EZ) 2004

che	nedule A (Form 990 or 990-EZ) 2004 USAWCT, INC 06-1540445	<u> </u>		Page
P	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		 	Т
	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	1	X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other			
	organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of			la.
2	the lobbying activities.		14.	
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		3.6	35
	with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority			1
	owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the			N. C.
	transactions.)			
		155		
a			_	X
þ		2b	↓_	X
¢	g - g (2c	-	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<u>2d</u>	+	X
е	Transfer of any part of its income or assets?	2е		x
3a			\vdash	
	you determine that recipients qualify to receive payments.)	3a		X
b	- · · · · · · · · · · · · · · · · · · ·	3b		Х
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice	1		
	on the use or distribution of funds?		-	X
þ	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?			X
P	Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
îhe	e 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 9	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 nar	no situ		
3	The dicarresearch organization operated in conjunction with a hospital section 170(b)(1)(A)(iii). Enter the hospital shall	ile, city,		
	and state ▶			
0	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.)			
1a		Section		
1b	170(b)(1)(A)(vi). (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.)			
2	X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gro	5.5		
_	receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3%			
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses a			
	by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
3	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization			
	described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (Se section 509(a)(3).)	e		
	Provide the following information about the supported organizations. (See page 5 of the instruction	18.)		_
	(a) Name(s) of supported organization(s)	(b) Line		:r
		from a	DOVE_	—
				_
4	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting Calendar year (or fiscal year beginning in) (a) 2003 (b) 2002 (d) 2000 (e) Total Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 83,844 79,766 65,120 12,919 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 0 organization's charitable, etc., purpose 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 0 by the organization after June 30, 1975 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 0 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 0 public without charge Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 83,844 766 65,120 12.919 241 23 Total of lines 15 through 22 83,844 766 65,120 12,919 24 Line 23 minus line 17 838 798 129 25 Enter 1% of line 23 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26a 26 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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26b Total support for section 509(a)(1) test: Enter line 24, column (e) 26c Add: Amounts from column (e) for lines: 18 19 26d Public support (line 26c minus line 26d total) 26e Public support percentage (line 26e (numerator) divided by line 26c (denominator)) a For amounts included in lines 15, 16, and 17 that were received from a "disqualified Organizations described on line 12: 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: (2002) (2001) 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 11, 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: Add: Amounts from column (e) for lines: 241,649 27c 27d Add: Line 27a total. and line 27b total 241,649 27e Public support (line 27c total minus line 27d total) Total support for section 509(a)(2) test: Enter amount from line 23, column (e) 100.0000% Public support percentage (line 27e (numerator) divided by line 27f (denominator)) h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 28 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.

Schedule A (Farm 990 or 990-EZ) 2004 USAWCT, INC
Part V Private School Questionnaire (School Questionnaire (Sc

P	Private School Questionnaire (See page 7 of the instructions.)			
	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	22.42		
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	N/A	Yes	No
	other governing instrument, or in a resolution of its governing body?	29		Walter Wil
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,			MACO.
31	programs, and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	30		
3 I	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way			
	that makes the policy known to all parts of the general community it serves?	31		THE PARTY
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
				100
			100	
32	Does the organization maintain the following:		100	FARTS:
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		<u> </u>
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis? Copies of all catalogues, brochures, announcements, and other written comπunications to the public dealing	32b		
·	with abudant adminsions, programs, and abulanching?	32c		
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.)			1913
33	Does the organization discriminate by race in any way with respect to:	114		1000
_	Chadestal sinkle or misillance	22-		entire.
а	Students' rights or privileges?	33a	1	
b	Admissions policies?	33Ь		
_				
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
0	Educational policies?	33е	1	-
	Use of facilities?	33f		
•	Use of facilities?			
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.)			
				Mar.
			and the same of	Be Sec. 5.
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		ME 12 6
	ULINEY, FIG. 10-30, 1319-2 O.D. 301, COVERING Tacids Horidisci illiniation: II 140, attention Oxpatitution		•	

thousand.		AWCT, INC				06- <u>15404</u>		Page 5
ĵ		ditures by Electing ONLY by an eligi					•	
Cho								
Che	ck Pa I the organization belo	ngs to an affiliated grou	p. Check	B I II you	u checke	a and mine (a)	a conti	of provisions apply. (b)
		n Lobbying Expen				Affiliated group totals		To be completed for ALL electing organizations
		itures" means amounts						- Cryanizations
	Total lobbying expenditures to influence				36		-	
	Total lobbying expenditures to influence	•		 	37			
	Total lobbying expenditures (add lines 3	36 and 37)			38			<u> </u>
	Other exempt purpose expenditures				39			
	Total exempt purpose expenditures (ad				40	Part Carlo	No.	
	Lobbying nontaxable amount. Enter the If the amount on line 40 is-							
			ntaxable amount is-					
	Not over \$500,000 Over \$500,000 but not over \$1,000,000							
	Over \$1,000,000 but not over \$1,500,000		of the excess over \$1,00	L	41	2.5 % Cart. Avid. / Walder 1911 40 80	-	
	Over \$1,500,000 but not over \$17,000,000		f the excess over \$1,500.	i i i	\$47 P			2000年1月1日 - 1900年1月1日 1900年1月1日 - 1900年1月1日
	Over \$17,000,000	\$1,000,000				The same	59	
42	Grassroots nontaxable amount (enter 2	E0/ of line 44\		I .	42			
43	Subtract line 42 from line 36. Enter -0- i	f line 42 is more than lin	e 36		43			
44	Subtract line 41 from line 38. Enter -0- i	f line 41 is more than lin	e 38		44			
_	Caution: If there is an amount on either					The state of the s		
	10-		iging Period Un		• ,		h	
	(Some organization	ons that made a section	. ,				Delow	
_		See the instructions for	lines 45 inrough 50 c	n page 11 of the	e instructi	ons.)		
			Lobbying Exp	enditures Durin	ng 4-Yea	Averaging Per	iod	
	Calendar year (or	(a)	(b)	(c)		(d)		(e)
	fiscal year beginning in)	2004	2003	2002		2001		Total
	Lobbying nontaxable amount	Charles and the second second						
	Lobbying ceiling amount (150% of			A Property and				
_	line 45(e))			CASS-MARYS.	and the second			
47	Total labbuing avacaditures				1			
4/	Total lobbying expenditures			 	-		-	
48	Grassroots nontaxable amount							
	Grassroots ceiling amount (150% of	1476 1186	100	White College	10			
	line 48(e))							
								· · · · · · ·
	Grassroots lobbying expenditures	1		<u> </u>				
P		y by Nonelecting F						
					I-A) (Se	e page 11 c	tne	instructions.) N/A
	ng the year, did the organization attemp		-			Yes	No	Amount
	mpt to influence public opinion on a legis	slative matter or referen	aum, through the use	OT:				
a	Volunteers Paid staff or management (Include co	managation in even pro-	reported on lines at	heaugh h l			_	
þ	MA D. A - Al							
d	Mailings to members, legislators, or the	he public					-	
6	Publications, or published or broadca	st statements						
f	Grants to other organizations for lobb							
g	Direct contact with legislators, their st							
h	Rallies, demonstrations, seminars, co	-						
i	Total lobbying expenditures (Add line	s c through h.)				32.2	-58	
	If "Yes" to any of the above also atta							

chedule /	A (Form 99	0 or 990-EZ) 2004 US	AWCT,	INC	06-1540445		Р	age 6
Part \	VII	Information Rega	_		s and Relationships With Noncharitable	e Exe		.,
1 Dic				11 of the instructions.)	h any other organization described in section			
				organizations) or in section 527, re	· -			
		,		oncharitable exempt organization of:		ſ	Yes	No
(1)		,		, -		51a(i)		X
(ii)						a(ii)		X
b Ott	her transa	ictions:						
{i) Sales	or exchanges of assets	s with a none	charitable exempt organization		b(i)		X
(ii) Purch	ases of assets from a n	noncharitable	e exempt organization		b(ii)		X
(111)) Renta	l of facilities, equipment	t, or other as	ssets		b(iii)		X
(iv) Reimb	oursement arrangemen	ts			b(iv)		X
(v) (vi) Loans	or loan guarantees		or fundraining policitations		b(v) b(vi)		X
	aring of fa	icilities, equipment, mai	ilina lists oth	ner assets, or paid employees		C C		X
					(b) should always show the fair market value of the			
		•		-	ion received less than fair market value in any			
tra	nsaction o	or sharing arrangement	, show in col	lumn (d) the value of the goods, other	r assets, or services received:			
	a)	(b)	l	(c)	(d)			
Line	∌ no.	Amount involved	Name o	f noncharitable exempt organization	Description of transfers, transactions, and sharing a	mangem	ents	
37 / 7								
N/A								
				·				
				-				
						-		
		~						
				with, or related to, one or more tax-			_	٦
				han section 501(c)(3)) or in section 5	527?	∐ Ye	s X	No
b If"	Yes," com	plete the following sche	edule:					
	1	(a) Jame of organization		(b) Type of organization	(c) Description of relationship			
N/Z	A							
•								
								_
_								
								_
				1	1			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Schedule B (Form 990, 990-EZ, or 990-PF) (2004)

2004

Name of organization		Employer Identification number
USAWCT, INC		06-1540445
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule-	both the General Rule and a Special Rule-see instructions.) orm 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or	
	ontributor. (Complete Parts I and II.)	
Special Rules-		
under sections 509(a)(1).	rganization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the reg /170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of of the amount on line 1 of these forms. (Complete Parts I and II.)	
during the year, aggregat	8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one con e contributions or bequests of more than \$1,000 for use exclusively for religious, charital cational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, I	ble,
during the year, some co- not aggregate to more the the year for an exclusively applies to this organization	8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributions for use exclusively for religious, charitable, etc., purposes, but these contributions for use exclusively for religious, charitable, etc., purposes, but these contributions that were received during this box is checked, enter here the total contributions that were received during y religious, charitable, etc., purpose. Do not complete any of the Parts unless the General necessary in because it received nonexclusivety religious, charitable, etc., contributions of \$5,000 or the parts of the parts unless that the	ions did uring al Rule
Caution: Organizations that are r 990-EZ, or 990-PF), but they mus	not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 9 at check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

DAA

For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.

Page 1 of 1 of Part I

Name of organization
USAWCT, INC

Employer Identification number

06-1540445

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Mr. Larry Lawrence 40 Brook Ridge Drive Greenwich CT 06830	\$ 20,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

70565 USAWCT, INC 06-1540445

FYE: 8/31/2005

Federal Statements

Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments

Description	_	Amount
Membership Dues	\$	82,584
Charter Club Fees & Ins		3,305
Tournament Sanction Fees	_	525
Total	\$	86,414

Federal Statements

70565 USAWCT, INC 06-1540445 FYE: 8/31/2005

Contributions
and
Allocations
Grants,
2
Line ;
Part II,
990,
- Form
Statement 2

		FMV Explntn		
us I		BV Explantn		
7, Part II, Line 22 - Grants, Allocations and Contributio	Class of Activity	Book Value	ovement \$	\$
		NonCash Contrib	Building Improvement	0
i, Line 22 - Grant	Relationship to Org	Cash Contrib	Bu \$ 20,000 \$	\$ 20,000 \$
Statement 2 - Form 990, Part II	Relati	Description of Property		
	Name Address	Date of Gift	Northeast Elite Wrestling	Total

70565 USAWCT, INC : 06-1540445

FYE: 8/31/2005

Federal Statements

Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
Charter Club & Insurance	1,420		1,420	
Officials Expenses	7,201	7,201		
Cadet & Juniors Expense	69,850	69,850		
Schoolboy Expenses	6,991	6,991		
Bank Charges	97		97	
Web Site	1,200		1,200	
Miscellaneous Expense	402		402	
Hardship Reimbursement	100	100		
Kids State Championship	2,088	2,088		
Medals	113	113		
National Hall of Fame	150	150		
Club Charter/Cert Holder/etc	2,699	2,699		
State & Qualifier Costs	6,855	6,855		
Competitor Card Costs	55,985	55,985		
Coaches Card Costs	78	78		
Kids Expense	407	407		
Tournament Sanction Exp	600	600		
Total	\$ 156,236	\$ 153,117	\$ 3,119	\$

Statement 4 - Form 990, Part III - Organization's Primary Exempt Purpose

WE HAVE OVER 2000 MEMBERS THAT ARE UNDER THE AGE OF 18 AND WE DEVELOPE THE SKILLS AND PROMOTE WRESTLING FOR COMPETITION THROUGH OUT THE USA AND INTERNATIONAL COMPETITION AS WELL, WE HAD A FREE CAMP FOR OVER 40 WRESTLERS UNDER THE AGE OF 18.

70565 USAWCT, INC

06-1540445FYE: 8/31/2005

Federal Statements

Statement 5 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year		End of Year		
Due To/From Hall of Fame/Scale Due To/From Jeffrey Braun Fd	\$	5,027	\$	2,838 35	
Total	\$	5,027	\$	2,873	

Statement 6 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year		End of Year	
Due From Members/Jeff Braun Fund	\$	225	\$	
Total	\$	225	\$	0