



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

A For the 2006 calendar year, or tax year beginning , 2006, and ending

<input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		C OUTWARD BOUND INC 100 MYSTERY POINT RD GARRISON, NY 10524	D Employer identification number <u>04-2375956</u> E Telephone number <u>845-424-4000</u> F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ►
• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).			
G Web site: ► <u>WWW.OUTWARDBOUND.ORG</u>		<u>10-1-69</u>	H and I are not applicable to section 527 organizations H (a) Is this a group return for affiliates? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H (b) If 'Yes,' enter number of affiliates. ►
J Organization type (check only one) ► <input checked="" type="checkbox"/> 501(c) 3 ← (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H (c) Are all affiliates included? (If 'No,' attach a list. See instructions.) H (d) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
K Check here ► <input type="checkbox"/> if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return		I Group Exemption Number ►	
L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ► <u>36,903.986</u> .		M Check ► <input type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)	

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

- 1 Contributions, gifts, grants, and similar amounts received.
 - a Contributions to donor advised funds
 - b Direct public support (not included on line 1a)
 - c Indirect public support (not included on line 1a)
 - d Government contributions (grants) (not included on line 1a)
 - e Total (add lines 1a through 1d) cash \$ 10,964,025. noncash \$
- 2 Program service revenue including government fees and co
- 3 Membership dues and assessments
- 4 Interest on savings and temporary cash investments ..
- 5 Dividends and interest from securities ..

STATE UNIT
RECEIVED #46,232.

Part VII, line 93
TPR BRANCH
OGDEN

1a	STATE UNIT RECEIVED	46,232.
1c		
1d	5 2009	
VII line 93 TPR BRANCH OGDEN		
6a		
6b		
)		
(B) Other		
8a		
8b		
8c		
1, check here		<input type="checkbox"/>
9a		
9b		
)		
10a		
10b		
)		
10c		
11	1,414,547.	
12	36,903,986.	
13	28,554,313.	
14	8,009,098.	
15	2,205,300.	
16	125,916.	
17	38,894,627.	
18	-1,990,641.	
19	16,919,643.	
20	1,483,427.	
21	16,412,429.	

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0109L 01/22/07

Form 990 (2006)