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Form	'990 ["]
Depart	nent of the Treasury

Return of Organization Exempt From Income Tax

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

2006 Open to Public

OMB No 1545-0047

	lung benefit trust or private foundation)
T	ne organization may have to use a copy of this return to satisfy state reporting requirements

Inte	rnal Re	venue Ser	vice	▶ The organi	zation may have	to use a copy	of this ret	urn to sa	atisfy sta	ate repor	ting req	uireme	ents	Inspec	tion
Α	For t	he 2006	calenda	r year, or tax y	year beginning				, 2006	, and en	ding			, 20	
В	Check		Please	C Name of o	rganization, num	ber and street,	city, towr	ı, state, a	and ZIF	, code	D Emp	loyer	identificati	on numb	er
'n.	applicable use IRS Address change label or								23	-23234	158				
Ή.		ame change print or NATIONAL BLACK DATA PROCESSING E Te						E Tele	phone	number					
州	Initial r	-	type ACCOCTAMING TAIC								1-322-	-3434			
Н	Final re		Specific		ARENA DR					ı	F Acc		thod: C		ccrual
·Η		led return	Instruc- tions.		MD 2077						_	-	specify) ▶*		
ıΗ							/1\ noney	emnt	1	l and La		 	le to sectio		anizatione
,⊔	Applica	ation pendi	ing C	haritable trus	(3) organization ts must attach 90-EZ).	a completed S	chedule	A					for affiliates?		es X No
	14/262	itas -	TATTATTAT	BDPA.OR	190-EZ).						•			□ '	es M No
						 	40.47			• •			r of affiliates		/aa Na
_					X 501(c)(6)		4947(a)(1		527 F	I(C) Are (if ii)	ali attiliate Vo," attac	es incluc h a list	led? See instruction	,ns) 📙 🏌	'es ∐ No
		here >		•	n is not a 509(a)(-		^{IS} F				ım filed by an		[]
	•	•		•	han \$25,000 A		quirea, bu	t if the	-				by a group ru	ling?	es X No
_	organi	zation ch	looses to	file a return, b	e sure to file a c	omplete return					•	i T	Number >		
	_					_	0.20					_	e organiza		•
_					nd 10b to line 12			809					orm 990, 9	3 0-EZ, or	990-PF).
L	art I				and Chang		ssets o	rrunc	a Baia	ınces	(See th	e instri	uctions)		
				. •	ımılar amounts r	eceived		1 . 1			- A				
	a	Contrib	utions to	donor advised	funds			1a		83,0	50.				
	t	Direct p	oublic sup	port (not includ	ded on line 1a)	•		1b							
	0	Indirect	public st	apport (not inclu	uded on line 1a)	•		1 c							
	C	G overn	ment con	itributions (grar	nts) (not included			1 d	_						
	€	Total (a	add lines	1a through 1d)	(cash \$	83,050.	_ noncas	sh \$)	1 e			050.
	2	Progran	n service	revenue includ	ding government	fees and contr	acts (from	Part VII	I, line 9	3)		2		656,	
	3			es and assessm								3		93,	<u> 156.</u>
	4 Interest on savings and temporary cash newscript VED						4								
	STATULATE and Nerest from securities						5								
	Re	Ūros F	edts V E	ED	(c) A115	T 77 2010	S-0SC	6a							
	l t	Less re	ental exp	enses	BUA AUG	17 2010	I 및	6b							
	[NA reh	taffin@@1	or (loss). Sul	tract line 6b from	m line 6a	18					6c			
ne	1 1		•	it income (desc	1 -	EN LIT)	7			
Revenue	TEP		DMÆ	sales of as	sets-other	(A) Secu	rities		(B) Other					
æ	'	6						8a							
	1	Less c	ost or oth	er basis & sale	es expenses	· · · -		8b							
	6	Gain or	(loss) (a	ttach schedule))			8c			-				
	(Net gan	n or (loss	s) Combine line	e 8c, columns (A	and (B)						8d			
	9	Special	events a	ind activities (a	ttach schedule)	If any amount i	s from ga	ming, cl	heck he	re ▶ 🗌					
	a			not including	_		of	-							
		contribu	itions rep	orted on line 1	b)			9a							
	l t	Less d	rect expe	enses other tha	ın fundraising ex	penses		9b				1			
	1		•		al events Subtr	=	line 9a					9c			
	1		_		eturns and allow			10a							
		Less o		-				10b							
					s of inventory (at	tach schedule)	Subtract	line 10b	from lu	ne 10a		10c			
	11			from Part VII, II								11			
	12				2, 3, 4, 5, 6c, 7, 8	d. 9c. 10c. and	111					12		832,	809.
_	13			s (from line 44						-		13		453,	912.
es S	14				n line 44, column	(C))						14		219,	
Expenses	15	-		m line 44, colur		. ,,		•				15			
Ř	16		• .									16			
ш	17						17		673,	078.					
Ś	18				Subtract line 17							18		159,	
Net Assets	19				beginning of year		. column /	A))				19		379,	
As	20				fund balances (• • • • • • • • • • • • • • • • • • • •				20	-	2.57	- · · · ·
ž			-		•	•		ก				21		539,	310
=	2 21 Net assets or fund balances at end of year Combine lines 18, 19, and 20										00 (2006)				

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

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91,10-2214

Part II Statement of

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) Functional Expenses and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions)

	Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
	6b, 8b, 9b, 10b, or 16 of Part I.		.,	services	and general	(-,
22a	Grants paid from donor advised funds (attach schedule)					
	(cash \$ noncash \$)					
	If this amount includes foreign grants, check here ▶	22a				
22b	Other grants and allocations (attach schedule)					
	(cash \$ noncash \$)					
	If this amount includes foreign grants, check here ▶	22b	ì			
23	Specific assistance to individuals (attach					
	schedule) .	23				
24	Benefits paid to or for members (attach schedule) .	24				
25a	Compensation of current officers, directors, key					
	employees, etc listed in Part V-A (attach schedule)	25a				
b	Compensation of former officers, directors, key					
	employees, etc. listed in Part V-B (attach schedule)	25b				
С	Compensation and other distributions, not included					
	above, to disqualified persons (as defined under					
	section 4958(f)(1)) and persons described in section					
	4958(c)(3)(B) (attach schedule)	25c				
26	Salaries and wages of employees not included on			·		
	lines 25a, b, and c .	26	9207.		9207.	
27	Pension plan contributions not included on lines					
	25a, b, and c	27				
28	Employee benefits not included on lines 25a - 27	28				
29	Payroll taxes .	29				
30	Professional fundraising fees	30	ì			
31	Accounting fees .	31				
32	Legal fees .	32				
33	Supplies	33				<u>.</u>
34	Telephone	34	4959.		4959.	
35	Postage and shipping .	35	11102.		11102.	
36	Occupancy	36	23850.		23850.	
37	Equipment rental and maintenance	37				
38	Printing and publications .	38	4636.		4636.	_
39	Travel	39	81129.	81129.		
40	Conferences, conventions, and meetings	40	198118.	184740.	13378.	
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule)	42	4690.		4690.	
43	Other expenses not covered above (itemize)					
а	SEE STMT	43a				
ь		43 b				
C		43 c				
d		43 d				
е		43e				
f		43f				
g		43 g				
44	Total functional expenses. Add lines 22a through		į			
	43g. (Organizations completing columns					
	(B) - (D), carry these totals to lines 13 - 15)	44	673078.	453912.	219166.	
	Costs. Check ▶ ☐ If you are following SOP 98-2					
	ny joint costs from a combined educational campaign and	d fundra			L L	Yes 🛛 No
	s," enter (i) the aggregate amount of these joint costs\$, (ii) the a	amount allocated to f	Program services \$	
(iii) th	e amount allocated to Management and general \$; and (iv) th	e amount allocated	to Fundraising \$	
						Form 990 (2006)

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 ▶ MEMBERSHIP ORGANIZATION Program Service What is the organization's primary exempt purpose? Expenses (Required for 501(c)(3) and (4) orgs , and All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others) optional for others) a ORGANIZED NATIONAL TECHNOLOGY CONFERENCE TO EDUCATE AND PROMOTE DATA PROCESSING KNOWLEDGE AMONG MEMBERS AND GENERAL PUBLIC (Grants and allocations \$ If this amount includes foreign grants, check here 453912. (Grants and allocations \$ If this amount includes foreign grants, check here (Grants and allocations \$ If this amount includes foreign grants, check here d (Grants and allocations \$ If this amount includes foreign grants, check here Other program services (attach schedule) (Grants and allocations \$ If this amount includes foreign grants, check here 453912.

Form **990** (2006)

▶

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

Part I	<u> </u>	Balance Sheets (See the instructions.)					
Not	e: V	Where required, attached schedules and amounts within	n the d	lescription	(A)		(B)
	Ç	column should be for end-of-year amounts only			Beginning of year		End of year
	45	Cash - non-interest-bearing			360,314.	45	517,205.
	46	Savings and temporary cash investments		[46	
	1						
	47a	Accounts receivable	47a	113,795.			
	Ь	Less allowance for doubtful accounts	47b		95,553.	47c	113,795.
	48a	Pledges receivable	48a				
	b	Less allowance for doubtful accounts	48b			48c	
	49	Grants receivable .			, <u> </u>	49	
	50a	Receivables from current and former officers, directors					
		employees (attach schedule)		50a			
	b	Receivables from other disqualified persons (as define	ed und	er section 4958(f)(1)			
		and persons described in section 4958(c)(3)(B) (attack	h sche	dule) .		50b	
	51a	Other notes and loans receivable (attach					
		schedule)	51a				
Ø	b	Less allowance for doubtful accounts		51c			
Assets	52	Inventories for sale or use		52			
As	53	Prepaid expenses and deferred charges		[53	
	54a	Investments - publicly-traded securities	•	Cost FMV		54a	
	Ь	Investments - other securities (attach schedule)	•	Cost FMV		54b	
	55a	Investments - land, buildings, and					
		equipment basis	55a			1 1	
	Ь	Less accumulated depreciation (attach					
		schedule)	55b			55c	
	56	Investments - other (attach schedule)	-			56	
	57a	Land, buildings, and equipment basis	57a	38,495.			
	b	Less accumulated depreciation (attach	ļ				
	1	schedule)	57b	31,457.	11,728.	57c	7,038.
	58	Other assets, including program-related investments					
		(describe >)		58	
	59	Total assets (must equal line 74). Add lines 45 through	gh 58		467,595.	59	638,038.
	60	Accounts payable and accrued expenses			21,221.	60	26,933.
	61	Grants payable .				61	
	62	Deferred revenue		1		62	
Liabilities	63	Loans from officers, directors, trustees, and key emplo	oyees	(attach		-	
<u> </u>		schedule)		· <u>.</u>		63	
Ë	1	Tax-exempt bond liabilities (attach schedule)		-		64a	
	1	Mortgages and other notes payable (attach schedule)		L	66 705	64b	71 705
	65	Other liabilities (describe ► DUE TO AFFIL	IAI	ES ,	66,795.	65	71,795.
		Total Makawasa A Lillanda ayan bar			00 016		00 720
	66	Total liabilities. Add lines 60 through 65	М .	-dlate late 07	88,016.	66	98,728.
	Or		X ar	nd complete lines 67			
ø	67	through 69 and lines 73 and 74			379,579.	67	539,310.
ğ	67	Unrestricted Temporanly restricted		-	319,319.	68	559,510.
<u>aa</u>	68	•		,		69	<u> </u>
E E	69	Permanently restricted ganizations that do not follow SFAS 117, check her	·	and complete		03	·
Š	"	lines 70 through 74		and complete			
Net Assets or Fund Balances	70	Capital stock, trust principal, or current funds.				70	
ŝ	71	Paid-in or capital surplus, or land, building, and equip	ment fi	und ·		71	
SSE	72	Retained earnings, endowment, accumulated income,				72	
¥	73	Total net assets or fund balances. Add lines 67 three		F		+	
ž	•	70 through 72 (Column (A) must equal line 19 and or	-		379,579.	73	539,310.
	74	Total liabilities and net assets/fund balances. Add		· · · ·	467,595.	74	638,038.
	14 Total liabilities and fiet assets/fully balances. Act lines of and 75.						

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) 75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 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 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) 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 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 If "Yes," attach a statement that includes the information described in the instructions	s No
meetings 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) 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	X
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) 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" T5c If "Yes," attach a statement that includes the information described in the instructions	<u>X</u>
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) 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" T5c If "Yes," attach a statement that includes the information described in the instructions	X
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) 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" T5c If "Yes," attach a statement that includes the information described in the instructions	X
the individuals and explains the relationship(s) 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 If "Yes," attach a statement that includes the information described in the instructions	X
the individuals and explains the relationship(s) 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 If "Yes," attach a statement that includes the information described in the instructions	X
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"	l v
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	ا بت
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 1f "Yes," attach a statement that includes the information described in the instructions	ا بن
tion? See the instructions for the definition of "related organization" If "Yes," attach a statement that includes the information described in the instructions	آ ت
If "Yes," attach a statement that includes the information described in the instructions	
1 - 1	_ ^_
a ungering programme have a written continct of interact colling?	- 1 -
d Does the organization have a written conflict of interest policy? Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation	
· · · · · · · · · · · · · · · · · · ·	
or Other Benefits	
(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the	-
list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions	
(A) Name and address (B) Loans and Advances (C) Compensation (D) Contributions to (E) Expense	
(if not paid, employee benefit plans and other allo	wances
enter -0-) & deferred comp plans	
NA	
NA .	
Part VI Other Information (See the instructions.)	
	s 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	X
Were any changes made in the organizing or governing documents but not reported to the IRS?	X
If "Yes," attach a conformed copy of the changes	
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . 78a	<u> </u>
b If "Yes," has it filed a tax return on Form 990-T for this year?	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	X
80 a is the organization related (other than by association with a statewide or nationwide organization) through common	
membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	
b If "Yes," enter the name of the organization ▶ BDPA EDUCATION	
TECHNOLOGY FOUNDATION and check whether it is X exempt or nonexempt	
81 a Enter direct and indirect political expenditures (See line 81 instructions.) . 81 a	
b Did the organization file Form 1120-POL for this year?	X
Form 990	

Form	990 (2006) NATIONAL BLACK DATA PROCESSING 23-23	2345	8 р	age 7
Pa	rt VI Other Information (continued)		Yes	_
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at			
	substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount			
	as revenue in Part I or as an expense in Part II. (See instructions in Part III) .			
83a	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	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
	tax deductible?	84b		ļ
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		X
	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 93, 156.	_		
d	Section 162(e) lobbying and political expenditures			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices. 85e	╛		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f	<u> </u>		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		l,
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its	·	·	ı
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	_		
b	Gross receipts, included on line 12, for public use of club facilities 86b	_		
87	501(c)(12) orgs Enter a Gross income from members or shareholders 87a	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources	:		
	against amounts due or received from them.)	_		
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			
	partnership, or an entity disregarded as separate from the organization under Regulations sections	-	-	
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		Х
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning			•
	of section 512(b)(13)? If "Yes," complete Part XI	88b		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under			
_	section 4911▶ , section 4912 ▶ , section 4955 ▶	-		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction			
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach			_3
_	a statement explaining each transaction	89b_		۱. ۱
С	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
а	Enter Amount of tax on line 89c, above, reimbursed by the organization .			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	1	$\overline{\mathbf{X}}^{1}$
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization,	031		1
9	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		$ \tilde{\mathbf{x}} $
90a	List the states with which a copy of this return is filed	[009]		<u> </u>
ь	Number of employees employed in the pay period that includes March 12, 2006 (See instructions) 90b			
91a		1-32	2-3	434
	Located at ▶ 9500 ARENA DRIVE LARGO MARYLAND ZIP+4▶ 20774-			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a	[Yes	No
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91 b		X
	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial			1
	Accounts			1
		Form §	agn (2006)

	990 (2006) NATIONAL BLACI		ROCESSING	-	23-	2323458 Page
	t VI Other Information (conti				10	Yes N
	At any time during the calendar year, did		n maintain an office	outside of the Unite	d States?	. 91c
	If "Yes," enter the name of the foreign of Section 4947(a)(1) nonexempt charitable	· —	m 990 in hou of For	m 1041 - Chack ha		_ ,
	and enter the amount of tax-exempt inte				▶ 92	1
	VII Analysis of Income-Pro				, , , ,	
	Enter gross amounts unless		ousiness income		ction 512, 513, or 514	(E)
	vise indicated	(A)	(B)	(C)	(D)	(E) Related or exempt
93	Program service revenue	Business code	Amount	Exclusion code	Amount	function income
а	CONFERENCE INCOME					506,503
b	PROGRAM SERVICES					150,100
С			<u>.</u>			
d						
е						
	Medicare/Medicaid payments					
g	Fees and contracts from government					
	agencies					02 156
	Membership dues and assessments				-	93,156
	Interest on savings and temporary					
	cash investments			-		
	Dividends and interest from securities Net rental income or (loss) from					
	real estate					
	debt-financed property					
	not debt-financed property .					
	Net rental income or (loss) from					
	personal property			_		1
99	Other investment income					
100	Gain or (loss) from sales of assets					
	other than inventory					<u> </u>
101	Net income or (loss) from special events		<u>.</u> .			
	Gross profit or (loss) from sales of inventory					
	Other revenue a					
b						
C						
d						
104	Subtotal (add columns (B), (D), & (E))					749,759.
	Total (add line 104, columns (B), (D), ar					749,759.
	Line 105 plus line 1e, Part I, should equ	` ''	line 12 Part I		· —	
	VIII Relationship of Activit			t of Exempt Pu	Irposes (See the instru	uctions.)
	No. Explain how each activity for wh		•	•	_ -	
•	organization's exempt purposes	· · · · · · · · · · · · · · · · · · ·				
	A 2006 NATIONAL TEC					=
	B MEMBERSHIP PROGRA				CONFERENCE	-
94	DUES TO SUPPORT	VARIOUS I	MEMBERSHIP	SERVICES	AND PROGRAM	<u>S</u>
Dow	IV. Information Regarding 3	Favabla Cub	aidiarias and F	Viorogoudod Er	atition (O the color)	
Part	IX Information Regarding 1	(B)			(D)	(E)
N	ame, address, and EIN of corporation,	Percentage	of Nature of	(C) of activities	Total income	End-of-year
	partnership, or disregarded entity	ownership ir	%			assets
			%			
			%			
			%			
Par	X Information Regarding	ransfers As	sociated with	Personal Bene	efit Contracts (See th	ne instructions)
(a)	Did the organization, during the yr, rece	ive any funds, di	rectly or indirectly, to	pay premiums on	a personal benefit contra	ct? Yes X N
	Did the organization, during the year, pa e: If "Yes" to (b), file Form 8870 and Foi			a personal benefit	contract?	Yes 🗓 N
						Form 990 (20

Pa	rt XI	Information Regarding Trans	fers To and From Cor	trolled Ent	ities. Comp	lete only if th	ne organizati	on is a	
		controlling organization as defined in se	ction 512(b)(13).					.,	
								Yes	No
106		reporting organization make any transfe	•	ined in section !	512(b)(13) of t	he Code?			
	If "Yes	" complete the schedule below for each			(0)			 _	<u> </u>
		(A)	(B)	D-	(C)		1)	•	
		Name, address, of each controlled entity	Employer Identification Number	De	scription of transfer		Amount o	or trans	ster
\dashv		controlled entity	Number		uansiei	-+			
а									
-									
					1 1				
ь			ļ						

С									
		Totals							
						L		T.,	
407	DJ. 45-		fore from a controlled cubb.		E40/E)/40	\ - 6.45 Od-	-0	Yes	No
107		e reporting organization receive any trans ," complete the schedule below for each or	•	s deimed in sec	31)(a)S12 noix) of the Code	e'		
	11 165	(A)	(B)		(C)	1	(0	3)	
		Name, address, of each	Employer Identification	De	scription of	İ	Amount o	•	efer
		controlled entity	Number		transfer		Amount	or trains) CI
		tomono chary			transion				
a									
ь									
c									
		Totals				}			
							_	T.,	
108	Dud the	arangating hour a hundre watter control	ract in affact on Assesset 17, 00	OC assumes the				Yes	No
100		e organization have a binding written cont nuities described in question 107 above?	-	oo, covering the	e interest, rent	s, royallies,			
	<u> </u>	Under penalties of perjury, I declare that		including accom	nanvino sche	fules and sta	tements an	d to the	
		best of my knowledge and belief, it is tru							
ماD	ase	information of which preparer has any k				,			
Sig		M				بارزان	_		
He		/ putter =	Harber .			8/11/1	V		
1 10	ן פו	Signature of officer				Date			
		YVETTL GRAHAM		PRESIDE	NT				
		Type or print name and title			_				
		Preparer's	Date		ck if self		SN or PTIN (S	ee Gen	Inst X)
Paid			SAH-BONSU08/06/	2010 emp	loyed ▶ X	<u> 0079</u>	6109		
	arer's Only		CONSULTING CPA						
JSB	Jiiiy		D BRIDGE ROAD S	SUITE 10			03 403	l EO	0.4
		address, and ZIP + 4 WOODBRI	DGE VA 22192-		Pho	ne no ► /	03-497		
							Form	990	(2006)

		Program	Management	F do
Description of the Asset HAPTER SPONSORSHIP	Total 96,933.	Services 81,183.	and General 15,750.	Fundraising
AYROLL	9,071.	01,103.	9,071.	
JENT COST	28,000.	28,000.	7,071	
	36,899.	36,899.		
RKETING & PLANNING	70,946.	18,495.	E2 451	
OFESSIONAL SERVICE		18,493.	52,451.	
ES & SUBSCRIPTIONS	9,650.	105	9,650.	
UIP & MAINTENANCE	32,980.	125.	32,855.	
SURANCE	5,911.		5,911.	
NK & CREDIT CHARGES	8,915.	11 011	8,915.	
OFESSIONAL DEVELOP	18,061.	11,311.	6,750.	
COMOTIONAL ITEMS	18,021.	12,030.	5,991.	
	335,387.	188,043.	147,344.	
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Land, Buildings and Equipment

US 990	990: Page 4, Line 57; 9	90-PF: Page 2,	Line 14	2006
			Accumulated	
	Description EQUIPMENT AND SOFTWARE	Cost / Basis	Depreciation 31,457.	Book Value
FURNITURE,	EQUIPMENT AND SOFTWARE	Cost / Basis 38, 495. 38, 495.	31,457.	7,038 7,038

List of Officers, Directors, Trustees and Key Employees 990: Page 5, Part V; 990EZ: Page 2 Part IV; 990-PF: Page 6, Part VIII **US 990** 2006 Amount for Expense Account Title/Average Hours Per **Employee Benefit** and Other Allowances Name and Address Week Devoted to Position Amount Paid Plan LARGO MD 20774VP MGMT CORETTA POOLE 10 LARGO MD 20774DIRECTOR DOUG ASH 15 EARL PACE JR LARGO MD 20774FOUNDER DENISE HOLLAND LARGO MD 20774VICE PRESI 25 10 WAYNE HICKS LARGO MD 20774PAST PRESI 20 RICKY PENICK LARGO MD 20774TREASURER ANITA VEGA LARGO MD 20774VP PLANNIN 20 DARRYL PLUMMER LARGO MD 20774DIRECTOR 10 40 ALGENIA FREEMA LARGO MD 20774EXEC DIREC GINA BILLINGS LARGO MD 20774 PRESIDENT 40 BETTY HUTCHINS LARGO MD 20774VP MEMBERS 20 10 LARGO MD 20774 DIRECTOR WILL BUNDY