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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)

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

OMB No 1545-0047

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning **SEP 1, 2007** and ending **JUN 30, 2008**

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please use IRS label or print or type See Specific instructions

C Name of organization

NATIONAL LACROSSE LEAGUE, INC.

Number and street (or P O box if mail is not delivered to street address)

53 WEST 36TH STREET

Room/suite

406

City or town, state or country, and ZIP + 4

NEW YORK, NY 10018

D Employer identification number

16-1541221

E Telephone number

212-764-1390

F Accounting method: ☐ Cash ☒ Accrual
☐ 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).

H and **I** are not applicable to section 527 organizations

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

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

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

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

I Group Exemption Number ▶ **N/A**

M Check ☒ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

G Website ▶

J Organization type (check only one) ☒ 501(c) (6) (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **3,047,815.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

1	Contributions, gifts, grants, and similar amounts received			
a	Contributions to donor advised funds	1a		
b	Direct public support (not included on line 1a)	1b		
c	Indirect public support (not included on line 1a)	1c		
d	Government contributions (grants) (not included on line 1a)	1d		
e	Total (add lines 1a through 1d) (cash \$ noncash \$)	1e		0.
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		
3	Membership dues and assessments	3		2,061,347.
4	Interest on savings and temporary cash investments	4		127,604.
5	Dividends and interest from securities	5		
6 a	Gross rents	6a		
b	Less rental expenses	6b		
c	Net rental income or (loss) Subtract line 6b from line 6a	6c		
7	Other investment income (describe)	7		
8 a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
b	Less cost or other basis and sales expenses	8a		
c	Gain or (loss) (attach schedule)	8b		
d	Net gain or (loss) Combine line 8c, columns (A) and (B)	8c		
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>	9a		
a	Gross revenue (not including \$ of contributions reported on line 1b)	9b		
b	Less direct expenses other than fundraising expenses			
c	Net income or (loss) from special events Subtract line 9b from line 9a	9c		
10 a	Gross sales of inventory, less returns and allowances	10a		
b	Less cost of goods sold	10b		
c	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c		
11	Other revenue (from Part VII, line 103)	11		858,864.
12	Total revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		3,047,815.
13	Program services (from line 44, column (B))	13		
14	Management and general (from line 44, column (C))	14		
15	Fundraising (from line 44, column (D))	15		
16	Payments to affiliates (attach schedule)	16		
17	Total expenses Add lines 16 and 44, column (A)	17		3,047,815.
18	Excess or (deficit) for the year Subtract line 17 from line 12	18		0.
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		0.
20	Other changes in net assets or fund balances (attach explanation)	20		0.
21	Net assets or fund balances at end of year Combine lines 18, 19, and 20	21		0.

SCANNED OCT 26 2010
Revenue

RECEIVED
OCT 27 2010
LOGICAL, CT

Part II Statement of Functional Expenses

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

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0 • noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ 0 • noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	451,875.			
25b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.			
25c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	193,990.			
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27				
29 Payroll taxes	54,227.			
30 Professional fundraising fees				
31 Accounting fees				
32 Legal fees				
33 Supplies	26,282.			
34 Telephone	22,226.			
35 Postage and shipping	13,827.			
36 Occupancy	71,355.			
37 Equipment rental and maintenance				
38 Printing and publications	5,551.			
39 Travel	129,860.			
40 Conferences, conventions, and meetings	66,938.			
41 Interest	18,166.			
42 Depreciation, depletion, etc. (attach schedule)				
43 Other expenses not covered above (itemize).				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 2	1,993,518.			
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	3,047,815.			

Joint Costs. Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

Yes ☐ No ☒

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A,

(iii) the amount allocated to Management and general \$ N/A, and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE STATEMENT 3

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

a OPERATION OF A TWELVE MEMBER CLUB LEAGUE WHICH EXHIBITS TO THE PUBLIC THE SPORT OF PROFESSIONAL LACROSSE PLAYED AT THE HIGHEST POSSIBLE QUALITY AND ENHANCES PUBLIC AWARENESS OF PROFESSIONAL INDOOR LACROSSE, ITS TEAMS, AND ITS PLAYERS.

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

b

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

c

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

d

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

e Other program services (attach schedule)

(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) ►

Form 990 (2007)

Part IV Balance Sheets (See the instructions)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year	(B) End of year	
Assets	45 Cash - non-interest-bearing	47,644.	45 80,866.	
	46 Savings and temporary cash investments	101,007.	46 102,188.	
	47 a Accounts receivable	47a 397,755.		
	b Less: allowance for doubtful accounts	47b	47c 397,755.	
	48 a Pledges receivable	48a	48c	
	b Less: allowance for doubtful accounts	48b		
	49 Grants receivable		49	
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a Other notes and loans receivable	51a	51c	
	b Less: allowance for doubtful accounts	51b		
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	18,921.	53 27,729.	
	54 a Investments - publicly-traded securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54a	
	b Investments - other securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54b	
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less: accumulated depreciation	55b	55c	
	56 Investments - other		56	
57 a Land, buildings, and equipment: basis	57a			
b Less: accumulated depreciation	57b	57c		
58 Other assets, including program-related investments (describe ▶ DUE FROM TEAMS)	980,644.	58 1,064,556.		
59 Total assets (must equal line 74) Add lines 45 through 58	1,396,557.	59 1,673,094.		
Liabilities	60 Accounts payable and accrued expenses	1,046,040.	60 1,321,396.	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ▶ SEE STATEMENT 4)	350,517.	65 351,698.	
	66 Total liabilities. Add lines 60 through 65	1,396,557.	66 1,673,094.	
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
		67 Unrestricted		67
68 Temporarily restricted			68	
69 Permanently restricted			69	
Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74				
70 Capital stock, trust principal, or current funds		0.	70 0.	
71 Paid-in or capital surplus, or land, building, and equipment fund		0.	71 0.	
72 Retained earnings, endowment, accumulated income, or other funds		0.	72 0.	
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)		0.	73 0.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		1,396,557.	74 1,673,094.	

Form 990 (2007)

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 a	501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?	85a	X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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	85b	X
c	Dues, assessments, and similar amounts from members	85c	2,061,347.
d	Section 162(e) lobbying and political expenditures	85d	0.
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	0.
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	0.
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ N/A, section 4912 ▶ N/A, section 4955 ▶ N/A		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	N/A
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed ▶ NONE		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	46
91 a	The books are in care of ▶ GEORGE DANIEL Telephone no ▶ 212-764-1390 Located at ▶ 53 WEST 36TH STREET, NEW YORK, NY ZIP + 4 ▶ 10018		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

Form 990 (2007)

Part VI Other Information (continued)

Yes No

c. At any time during the calendar year, did the organization maintain an office outside of the United States?

91c

X

If "Yes," enter the name of the foreign country **N/A**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here

and enter the amount of tax-exempt interest received or accrued during the tax year

92

N/A

Part VII Analysis of Income-Producing Activities (See the instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					2,061,347.
95 Interest on savings and temporary cash investments			14	127,604.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a BROADCAST RIGHTS			15	10,108.	
b ADVERTISING/SPONSORSHIPS	541800	618,565.			
c LICENSING			15	188,263.	
d MISCELLANEOUS INCOME			01	41,928.	
e					
104 Subtotal (add columns (B), (D), and (E))		618,565.		367,903.	2,061,347.
105 Total (add line 104, columns (B), (D), and (E))					3,047,815.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)

Line No Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)

94 DUES AND ASSESSMENTS

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
SEE STATEMENT 6	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes

X No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

Yes

X No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
-----	----

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

107 Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
-----	----

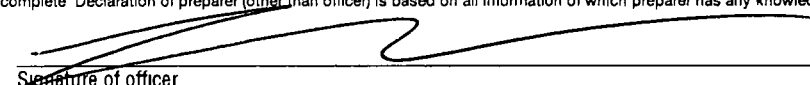
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
-----	----

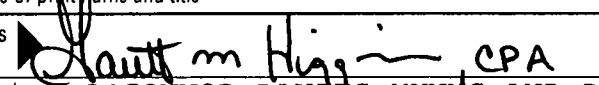
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer:  Date: 9/27/10

Type or print name and title: CROCKER DANIEL, COMMISSIONER

Paid Preparer's Use Only

Preparer's signature:  Date: 9-16-10 Check if self-employed: ☐

Firm's name (or yours if self-employed), address, and ZIP + 4: O'CONNOR DAVIES MUNNS AND DOBBINS, LLP
60 E. 42ND STREET, 36TH FL
NEW YORK, NY 10165

Preparer's SSN or PTIN (See Gen Inst X):
EIN:
Phone no: 212-286-2600

Form 990 (2007)

FOOTNOTES

STATEMENT 1

PART V-A, QUESTION 75B

A FAMILY RELATIONSHIP EXISTS BETWEEN TWO BOARD MEMBERS:
ANGELA AND ROBERT BATINOVICH.

FORM 990	OTHER EXPENSES			STATEMENT	2
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
REFEREE EXPENSES	211,847.				
PROFESSIONAL LACROSSE PLAYERS ASSOCIATION	170,303.				
PLAYER DRAFT	4,394.				
PLAYOFF EXPENSES	25,010.				
INTERNSHIP EXPENSES	10,746.				
COMMISSIONS	163,915.				
MARKETING	119,333.				
SPONSORSHIP COMMITMENTS	119,200.				
TELEVISION PRODUCTION	237,688.				
INTERNET	24,759.				
INSURANCE	81,199.				
PROFESSIONAL FEES	365,169.				
BAD DEBT EXPENSES	362,156.				
MISCELLANEOUS EXPENSES	97,799.				
TOTAL TO FM 990, LN 43	1,993,518.				

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	3
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EXPLANATION

TO PROMOTE AND FOSTER THE PRIMARY BUSINESS OF MEMBER CLUBS,
WHICH IS TO PROFITABLY EXHIBIT TO THE PUBLIC PROFESSIONAL INDOOR LACROSSE
OF THE HIGHEST POSSIBLE QUALITY, AND TO ENHANCE PUBLIC AWARENESS OF
PROFESSIONAL INDOOR LACROSSE AND THE PLAYERS.

FORM 990	OTHER LIABILITIES	STATEMENT	4
DESCRIPTION	BEGINNING OF YEAR	END OF YEAR	
LINE OF CREDIT - CENTRAL JERSEY BANK	199,510.	199,510.	
ESCROW ACCOUNT - CBA	101,007.	102,188.	
ESCROW ACCOUNT - BUFFALO	50,000.	50,000.	
TOTAL TO FORM 990, PART IV, LINE 65	350,517.	351,698.	

FORM 990	PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT	5
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT	
JAMES JENNINGS 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	COMMISSIONER 40.00	349,800.	0.	0.
GEORGE DANIEL 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	DEPUTY COMMISSIONER 40.00	102,075.	0.	0.
DAN DIPOFI 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
DAVE ZYGAJ 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
BRAD BANISTER 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
TERRY BRITTON 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
KEVIN LOUGHERY 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.

DOUG SCHÄER 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
CONNIE KOWAL 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
JERRY GIRKIN 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
STEVE GOVETT 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
DUANE VIENNEAU 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
BRUCE URBAN 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
TOM GARRITY 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
JOHN ARLOTTA 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
MARTY O'NEILL 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
JOHN GAGLIARDI 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
LEO RUSSELL 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
TIM KELLY 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
RUSS CLINE 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.

CHRIS FRITZ 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
MICHAEL FRENCH 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
ANGELA BATINOVICH 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
BRIAN SILCOTT 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
ROBERT BATINOVICH 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
STEVE DONNER 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
JODY GAGE 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
JOHNNY MOURADIAN 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
DAVE WILKINSON 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
PHIL ATLINGER 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
MIKE KLOEPFER 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	ALTERNATE GOVERNOR 2.00	0.	0.	0.
BRAD WATTERS 53 WEST 36TH STREET, SUITE 406 NEW YORK, NY 10018	GOVERNOR 2.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		<u>451,875.</u>	<u>0.</u>	<u>0.</u>

FORM 990

PART IX - INFORMATION REGARDING TAXABLE
SUBSIDIARIES AND DISREGARDED ENTITIES

STATEMENT 6

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

NLL OUTDOOR LLC

ADDRESS

53 WEST 36TH ST, NO 406, NEW YORK, NY 10018

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
20-8431361	100.00%	CURRENTLY INACTIVE	0.	0.

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

NLL MANAGER LLC

ADDRESS

53 WEST 36TH ST, NO 406, NEW YORK, NY 10018

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
27-3518828	100.00%	CURRENTLY INACTIVE	0.	0.

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

NLL PROPERTIES LLC

ADDRESS

53 WEST 36TH ST, NO 406, NEW YORK, NY 10018

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
20-8324918	100.00%	CURRENTLY INACTIVE	0.	0.

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

NLL VENTURES LLC

ADDRESS

53 WEST 36TH ST, NO 406, NEW YORK, NY 10018

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
20-8325007	100.00%	CURRENTLY INACTIVE	0.	0.