

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2005

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

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

A For the 2005 calendar year, or tax year beginning 4/01/05, and ending 3/31/06

B 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	Please use IRS label or print or type. See Specific Instructions.	C Name of organization CONCERNED BUSINESSMEN'S ASSN		D Employer identification number 95-3658314
		Number and street (or P O box, if mail is not delivered to street address) Room/suite 3725 MEADOWLARK DRIVE		E Telephone number 800-455-0173
		City or town, state or country, and ZIP + 4 RENO NV 89506		F Group Exemption Number ▶

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) ▶

I Website: ▶ WWW.CBAA.ORG

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

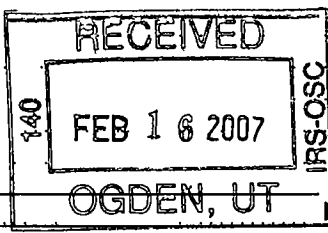
J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

K Check if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts: if \$100,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 90,405

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 38 of the instructions)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	<u>90,405</u>
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5c	
	6 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	b Less: direct expenses other than fundraising expenses	6b	
	c Net income or (loss) from special events and activities (line 6a less line 6b)	6c	
	7a Gross sales of inventory, less returns and allowances	7a	
	b Less: cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c	
	8 Other revenue (describe ▶)	8	
	9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) ▶	9	<u>90,405</u>
	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	<u>19,561</u>
	13 Professional fees and other payments to independent contractors	13	<u>2,319</u>
	14 Occupancy, rent, utilities, and maintenance	14	<u>16,364</u>
15 Printing, publications, postage, and shipping	15		
16 Other expenses (describe ▶ <u>SEE STATEMENT 1</u>)	16	<u>42,362</u>	
17 Total expenses (add lines 10 through 16)	17	<u>80,606</u>	
18 Excess or (deficit) for the year (line 9 less line 17)	18	<u>9,799</u>	
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	<u>-163,151</u>	
20 Other changes in net assets or fund balances (attach explanation)	20		
21 Net assets or fund balances at end of year (combine lines 18 through 20) ▶	21	<u>-153,352</u>	



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Part II Balance Sheets - If total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ

(See page 41 of the instructions.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	<u>43,976</u>	<u>3,183</u>
23 Land and buildings	<u>2,410</u>	<u>1,893</u>
24 Other assets (describe ▶ <u>SEE STATEMENT 2</u>)	<u>8,456</u>	<u>7,884</u>
25 Total assets	<u>54,842</u>	<u>12,960</u>
26 Total liabilities (describe ▶ <u>SEE STATEMENT 3</u>)	<u>217,993</u>	<u>166,312</u>
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	<u>-163,151</u>	<u>-153,352</u>

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

Form 990-EZ (2005)

21910

Part III Statement of Program Service Accomplishments (See page 42 of the instructions)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)
What is the organization's primary exempt purpose? SEE STATEMENT 4		
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title		
28	SEE STATEMENT 5	
(Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/>	28a 51,541
29		
(Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30		
(Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31	Other program services (attach schedule)	
(Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32	Total program service expenses (add lines 28a through 31a)	32 51,541

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 42 of the instructions)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 6				

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, att. a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	X
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)	36	X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr ▶ 37a 0		
b	Did the organization file Form 1120-POL for this year?	37b	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved SEE WORKSHEET 38b 9,323		
39	501(c)(7) organizations Enter:		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0		
b	501(c)(3) and (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 an explanation.	40b	X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d	Enter amount of tax on line 40c reimbursed by the organization ▶ 0		

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.) (Continued)

- 41 List the states with which a copy of this return is filed. **CA, CT, NY**
- 42a The books are in care of **BARBARA AYASH** Telephone no **800-455-0173**
3725 MEADOWLARK DR
 Located at **RENO, NV** ZIP + 4 **89506**
- 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: _____
 See the instructions for exceptions and filing requirements for Form TD F 90-22.1.
- c At any time during the calendar year, did the organization maintain an office outside of the U.S.?
 If "Yes," enter the name of the foreign country: _____
- 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year **43**

	Yes	No
42b		X
42c		X

Please Sign Here

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.

Barbara Ayash Signature of officer **2-12-2007** Date

Barbara Ayash - President/CEO Type or print name and title

Paid Preparer's Use Only

Preparer's signature *[Signature]* Date **2/08/07** Check if self-employed Preparer's SSN or PTIN (See Gen Instr W) **P00586918**

Firm's name (or yours if self-employed), address, and ZIP + 4 **GREENBERG AND JACKSON CPAS**
2441 HONOLULU AVENUE SUITE 120
MONTROSE, CA 91020-1864

EIN **95-3387333**
 Phone no **818-249-3230**

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 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2005

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

CONCERNED BUSINESSMEN'S ASSN

Employer identification number
95-3658314

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.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Comp	(d) Contri to empl ben plans & deferred comp	(e) Expense account & other allowances
NONE				
Total number of other employees paid over \$50,000 ▶				

Part II-A 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		
Total number of others receiving over \$50,000 for professional services ▶		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶		

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

Schedule A (Form 990 or 990-EZ) 2005

Part III 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 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.) 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 the lobbying activities.		X
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 with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit? SEE STATEMENT 7	X	
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE STATEMENT 8	X	
e	Transfer of any part of its income or assets?		X
3a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b	Do you have a section 403(b) annuity plan for your employees?		X
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The 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 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶
- 10 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.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations 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). Check the box that describes the type of supporting organization: Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4) (See page 6 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) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	135,509	173,688	179,935	208,185	697,317
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					0
18 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 by the organization after June 30, 1975			132		132
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets STMT 9		2,025	10,900	13,306	26,231
23 Total of lines 15 through 22	135,509	175,713	190,967	221,491	723,680
24 Line 23 minus line 17	135,509	175,713	190,967	221,491	723,680
25 Enter 1% of line 23	1,355	1,757	1,910	2,215	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a	14,474
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 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	26b	398,883
c Total support for section 509(a)(1) test: Enter line 24, column (e)	26c	723,680
d Add: Amounts from column (e) for lines: 18 <u>132</u> 19 _____	26d	425,246
22 <u>26,231</u> 26b <u>398,883</u>	26e	298,434
e Public support (line 26c minus line 26d total)	26f	41.2384%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified 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:	(2004)	(2003)	(2002)	(2001)	N/A
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 11b, 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:	(2004)	(2003)	(2002)	(2001)	N/A
c Add: Amounts from column (e) for lines: 15 _____ 16 _____	17 _____	20 _____	21 _____		27c
d Add: Line 27a total _____ and line 27b total _____					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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.

Part V 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)

		N/A	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement)	31		
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	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.)	32d		
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h		
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? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
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		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768) **N/A**

Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures

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

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount. Enter the amount from the following table-		
If the amount on line 40 is-		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
The lobbying nontaxable amount is-		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.) **N/A**

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines through c h.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines through c h.)

Yes	No	Amount

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Forms 990 / 990-PF	Loans from Officers, Directors, Trustees, and Key Employees or Other Disqualified Persons	2005
For calendar year 2005, or tax year beginning 4/01/05 , and ending 3/31/06		

Name CONCERNED BUSINESSMEN'S ASSN	Employer Identification Number 95-3658314
---------------------------------------------	-----------------------------------------------------

FORM 990, PART IV, LINE 63 - ADDITIONAL INFORMATION

Name of lender	Title
(1) ROBERT & BARBARA AYASH	CHAIRMAN, CEO
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 20			WHEN FUNDS ARE AVAILABLE	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1)	ORGANIZATION COSTS PAID BY OFFICERS
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	6,541	9,323
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals	6,541	9,323

Form **4562**
(Rev. January 2006)
Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2005

Attachment
Sequence No **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

CONCERNED BUSINESSMEN'S ASSN

Identifying number

95-3658314

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	105,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	420,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instr.	5	
6		(a) Description of property	
		(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2004 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2006. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	517

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2005	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B-Assets Placed in Service During 2005 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr.	22	517
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2005) (Rev. 1-2006)

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Amount</u>
	\$
EXPENSES	
TRAVEL	294
INTEREST	354
BANK/MERCHANT CHARGES	898
LICENSES & PERMITS	352
WEBSITE	9,321
OFFICE EXPENSE	6,478
STAFF EDUCATION	102
AUTO EXPENSE	2,105
UTILITIES	1,232
TAX PEN & INTEREST	50
CONTRACT LABOR	13,231
REPAIRS	249
ROYALTIES	7,124
SUPPLIES	572
TOTAL	<u>\$ 42,362</u>

Statement 2 - Form 990-EZ, Line 24 - Other Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
INVENTORIES FOR SALE OR USE	\$ 8,456	\$ 7,884
TOTAL	<u>\$ 8,456</u>	<u>\$ 7,884</u>

Statement 3 - Form 990-EZ, Line 26 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$ 211,452	\$ 156,989
LOANS FROM OFFICERS	6,541	9,323
TOTAL	<u>\$ 217,993</u>	<u>\$ 166,312</u>

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

THE ORGANIZATION TEACHES AND PROMOTES MORALS AND ETHICS IN AN EFFORT TO RAISE THE QUALITY OF LIFE AND FIGHT AGAINST DRUGS AND CRIME. ITS PRIMARY CONCENTRATION OF EFFORT IS THE EDUCATION AND PREPARATION OF CHILDREN IN THEIR ROLES AS THE FUTURE LEADERS AND WORK FORCE OF THE WORLD.

Statement 5 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments**Description**

CBAA SPONSORS THE CHILDRENS' SET A GOOD EXAMPLE CAMPAIGN TO ENCOURAGE CHILDRENS' PARTICIPATION IN THE CRUSADE TO ELIMINATE DRUGS, CRIME, VIOLENCE, ILLITERACY AND GANG INVOLVEMENT FROM GROUNDS AND NEIGHBORHOODS BY PROMOTING A LEARNING ENVIRONMENT BASED ON HONESTY, TRUST, TOLERANCE, COMPETENCE, INDUSTRY AND UNDERSTANDING. MEMBERS OF CBAA ACT JOINTLY AS A CATALYST TO PULL TOGETHER BUSINESSES, SCHOOLS AND COMMUNITIES. THE CONCERN OF THE ORGANIZATION IS THE FUTURE OF YOUTH AND THE INTEGRITY OF THE NATION THEY WILL INHERIT.

THE ORGANIZATION DISTRIBUTED THOUSANDS OF COPIES OF "THE WAY TO HAPPINESS", A BOOKLET THAT PROVIDES A CLEAR AND PRACTICAL COMMON SENSE APPROACH TO RAISING THE LEVEL OF MORALITY IN OUR SOCIETY. MANY THOUSANDS OF SCHOOL AGE CHILDREN WERE REACHED THROUGH THIS PROGRAM. THE ORGANIZATION RECEIVED A NUMBER OF COMMENDATIONS FOR EFFECTIVENESS FROM THE US CONGRESS AND GOVERNORS THROUGHOUT THE COUNTRY.

Federal Statements

Statement 6 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees

Name	Address	City, State, Zip	Title	Average Hours	Compensation	Benefits	Expenses
ROBERT AYASH		RENO NV 89506	CHAIRMAN	40	4,500	0	0
BARBARA AYASH		RENO NV 89506	PRES/ACT CEO	60	5,250	0	0
MURRAY GOULD		LOS ANGELES CA	VICE CHAIR	0	0	0	0
RICHARD PALMQUIST		INGLEWOOD CA	SECRETARY	0	0	0	0
MARK KEVITT		CLEARWATER FL	DIRECTOR	0	0	0	0
DENNIS DUBIN		BRYNN MAWR PA	DIRECTOR	0	0	0	0
LARRY NORTON		FRESNO CA	DIRECTOR	0	0	0	0
RICHARD LEE		WESTCHESTER CA	DIRECTOR	0	0	0	0
LARRY MILLER		CULVER CITY CA	DIRECTOR	0	0	0	0
JAMES CLARK		AUSTIN TX	DIRECTOR	0	0	0	0

Statement 7 - Schedule A, Part III, Line 2b - Lending of Money or Extension of Credit

Description

ROBERT & BARBARA AYASH - UNREIMBURSED EXPENSES PAID BY DIRECTORS ON BEHALF OF THE ORGANIZATION

Statement 8 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of Exp

Description

SEE PART V, FORM 990

Statement 9 - Schedule A, Part IV-A, Line 22 - Other Income

<u>Description</u>	<u>2004</u>	<u>2003</u>	<u>2002</u>	<u>2001</u>
SPECIAL EVENTS	\$ <u> </u>	\$ <u> 2,025 </u>	\$ <u> 10,900 </u>	\$ <u> 13,306 </u>
TOTAL	\$ <u> 0 </u>	\$ <u> 2,025 </u>	\$ <u> 10,900 </u>	\$ <u> 13,306 </u>

Federal Asset Report**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
1	Computers	12/15/04	2,582			2,582	5 MO S/L	172	517
2	Furniture & equipment	4/01/98	19,812			19,812	5 MO S/L	19,812	0
	Total Other Depreciation		<u>22,394</u>			<u>22,394</u>		<u>19,984</u>	<u>517</u>
	Total ACRS and Other Depreciation		<u>22,394</u>			<u>22,394</u>		<u>19,984</u>	<u>517</u>
	Grand Totals		22,394			22,394		19,984	517
	Less: Dispositions		0			0		0	0
	Net Grand Totals		<u>22,394</u>			<u>22,394</u>		<u>19,984</u>	<u>517</u>