Department of the Treasury Internal Revenue Service

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 2006 Open to Public Inspection

| Α                   | For the     | 2006 calendar year, or tax year beginning , and ending  |                  |                       |        |               |               |             |
|---------------------|-------------|---|------------------|-----------------------|--------|---------------|---------------|-------------|
| В                   | Check if    | applicable Please C Name of organization use IRS TNITEDNIATIONAL ACADEMY OF DETERMINED  |                  |                       |        | Employer ide  |               | mber        |
|                     | Address     | change liabel or INTERNATIONAL ACADEMI OF DET   | OXIFI-           |                       |        | 94-33         |               |             |
|                     | Name cl     | e change print or CATION SPECIALISTS  |                  |                       |        |               | number        |             |
|                     | Initial ref | type. Number and street (or P O box if mail is not delivered to street address) Room/suite return See 4801 WIT SUIDE BLVD 216                               |                  |                       |        |               | <u>37-99:</u> |             |
| $\overline{\sqcap}$ | Final ret   | Specific 4801 WILSHIRE BLVD. 216  |                  |                       |        | Accounting in | ¬ ー           |             |
| H                   |             | Instruc- City of town, state of country, and ZIF + 4  | 1_2012           | l,                    | $\Box$ | Accrual [     | Other (s      | pecify)     |
| $\vdash$            | Amende      |   | 1                | <u>'</u>              |        |               |               |             |
| Ш                   | Applicat    | <ul> <li>Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable<br/>trusts must attach a completed Schedule A (Form 990 or 990-EZ).</li> </ul> | H and are not ap |                       |        | -             | _             | X No        |
| _                   | Wahait      | e: DETOXACADEMY.ORG   | H(a) is this a g | •                     |        |               | Yes           | Mo          |
| G<br>J              |             | zation type   | H(b) If "Yes," e |                       |        | es 🕨          | Yes           | П №         |
| •                   | _           | only one) ► 🔀 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527   | 1 ' '            | ich a list. See instr |        | ,             | res           |             |
| _                   |             |   | H(d) Is this a s |                       |        |               |               |             |
| ĸ                   | Check h     |   | 1 ' '            | on covered by a       | •      |               | Yes           | X No        |
|                     | •           | are normally <b>not</b> more than \$25,000. A return is not required, but if the organization chooses   |                  | xemption Nur          |        |               | 1 1 100       | 1001 110    |
|                     | to file a   | return, be sure to file a complete return   | M Check          | . 1                   |        | nization is r | not require   | d           |
| L                   | Gross i     | receipts Add lines 6b, 8b, 9b, and 10b to line 12  969, 565   | to attach        | Sch. B (Forn          | _      |               | •             |             |
| F                   | art l       | Revenue, Expenses, and Changes in Net Assets or Fund Ba   |                  | the instruc           |        |               | •             |             |
|                     | 1           | Contributions, gifts, grants, and similar amounts received:   |                  |                       |        |               |               |             |
|                     | а           | Contributions to donor advised funds  | 1a               |                       |        |               |               |             |
|                     | b           | Direct public support (not included on line 1a)   | 1b               | 631,958               | 3      |               |               |             |
|                     | С           | Indirect public support (not included on line 1a)   | 1c               | 335,500               | )      |               |               |             |
|                     | d           | Government contributions (grants) (not included on line 1a)   | 1d               |                       | _      |               |               |             |
|                     | е           | Total (add lines 1a through 1d) (cash \$ 967,458 noncash \$   |                  | )                     | 1€     | <u> </u>      | 967,          | 458         |
|                     | 2           | Program service revenue including government fees and contracts (from Part VII, line  | e 93)            |                       | 2      |               |               |             |
|                     | 3           | Membership dues and assessments SE:   | E STATEME        | NT                    | 3      |               | 2             | 000         |
| 97                  | 4           | Interest on savings and temporary cash investments  |                  |                       | 4      |               |               | <u> 107</u> |
| 2007,               | 5           | Dividends and interest from securities  |                  |                       | 5      |               |               |             |
| <b>₽</b>            | 6a          | Gross rents   | 6a               |                       | 4      | 1             |               |             |
| <b>က</b>            | þ           | Less: rental expenses   | 6b               |                       | 4      | -             |               |             |
| ب                   | С           | Net rental income or (loss). Subtract line 6b from line 6a  |                  |                       | 60     |               |               |             |
| ANNED DE            | 7           | Other investment income (describe   |                  |                       | 7      |               |               |             |
|                     | 8a          | Gross amount from sales of assets other (A) Secunties   |                  | Other                 | -      |               |               |             |
| ₩<br>₩              |             | than inventory  | 8a               |                       | -      |               |               |             |
| <u>z</u>            | b           | Less: cost or other basis and sales expenses  | 8b               |                       | -      |               |               |             |
| <u>=</u>            | C           | Gain or (loss) (attach schedule)  | 8c               |                       | ┨      | .             |               |             |
| 3                   | d           | Net gain or (loss) Combine line 8c, columns (A) and (B)   |                  |                       | 80     | 1             |               |             |
| עז                  | 9           | Special events and activities (attach schedule) If any amount is from gaming, check   | nere 🕨 🔛         |                       |        |               |               |             |
|                     | a           | Gross revenue (not including \$ of  | 9a               |                       |        |               |               |             |
|                     | ١ ,         | contributions reported on line 1b)  | 9b               |                       | -      |               |               |             |
|                     | b           | Less: direct expenses other than fundraising expenses  Net income or (loss) from special events. Subtract line 9b from line 9a.                             | 30 1             |                       | 90     | .             |               |             |
|                     | 10a         | · ' ' '   | 10a              |                       | 1      | <del>'</del>  |               |             |
|                     | b           | Less cost of goods sold   | 10b              |                       | 1      |               |               |             |
|                     | c           | Less. cost of goods sold  Gross profit or (loss) from sales of inventory (attach schedule) Subtractine 10b from Other revenue (from Part VII, line 103)     | n line 10a       |                       | 100    | .             |               |             |
|                     | 11          | Other revenue (from Part VII. line 103)   | D IN CORP        | -c                    | 11     |               |               |             |
|                     | 12          | Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11   | OSC -520         | : <b>o</b>            | 12     |               | 969,          | 565         |
|                     | 13          | Program services (from line 44 column (B))  |                  |                       | 13     |               | 805           |             |
| Ses                 | 14          | Management and general (from line 44, column (C))   | <b>2 3</b> 2007  |                       | 14     |               | 118           |             |
| Expenses            | 15          | Fundraising (from line 44, column (D))  |                  |                       | 15     | 5             | 162           |             |
| Exp                 | 16          |   | MALITAH          |                       | 16     |               |               |             |
| _                   | 17          | Total expenses. Add lines 16 and 44, column (A)   |                  |                       | 17     | , 1           | L,086,        |             |
| ets                 | 18          | Excess or (deficit) for the year Subtract line 17 from line 12  |                  |                       | 18     | 3             | -116,         |             |
| Net Assets          | 19          | Net assets or fund balances at beginning of year (from line 73, column (A))   |                  |                       | 19     | )             | 123,          | 583         |
| et A                | 20          | Other changes in net assets or fund balances (attach explanation)   |                  |                       | 20     |               |               |             |
| Ż                   | 21          | Net assets or fund balances at end of year Combine lines 18, 19, and 20   |                  |                       | 21     |               | 6,            | 822         |

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

DAA

Form **990** (2006

Form 990 (2006) · INTERNATIONAL ACADEMY OF DETOXIFI- 94-3382902

| Pa         |  |                | complete column (A). Co   |                             |                         |                       |
|------------|--|----------------|---------------------------|-----------------------------|-------------------------|-----------------------|
|            | Functional Expenses organization                               |                | on 4947(a)(1) nonexem     | pt charitable trusts but    | optional for others (Se | e 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.                              |                | (A) 10tai                 | services                    | and general             | (D) Fundraising       |
| 22a (      | Grants paid from donor advised funds (attach schedul           | e)             |                           |                             |                         |                       |
|            | (cash \$cash \$  | <del>_</del> } |                           |                             |                         |                       |
|            | If this amount includes foreign grants, check here             | 22a            |                           |                             |                         |                       |
|            | outer grams and amount (and on constant)                       | 2              |                           |                             |                         |                       |
| ,          | (cash \$ 28,544 non-cash \$                                    |                | 28,544                    | 28,544                      |                         |                       |
|            | If this amount includes foreign grants, check here             | 22b            | 20,344                    | 20,344                      |                         |                       |
|            | Specific assistance to individuals (attach                     | 23             |                           |                             |                         |                       |
|            | schedule)<br>Benefits paid to or for members (attach           | 23             | -                         |                             |                         |                       |
|            | schedule)  | 24             |                           |                             |                         |                       |
|            | Compensation of current officers, directors,                   | -              |                           |                             |                         |                       |
|            | key employees, etc. listed in Part V-A (attach                 |                |                           |                             |                         |                       |
|            | schedule) SEE STATEMENT 3                                      | 3 25a          | 42,130                    | 1                           | 14,043                  | 28,087                |
|            | Compensation of former officers, directors,                    |                | •                         |                             | •                       |                       |
| 1          | key employees, etc. listed in Part V-B (attach                 |                |                           |                             |                         |                       |
|            | schedule)  | 25b            |                           |                             |                         |                       |
| <b>c</b> ( | Compensation and other distributions, not included above, to   |                |                           |                             | 1                       |                       |
| (          | disqualified persons (as defined under section 4958(f)(1)) and |                |                           |                             |                         |                       |
| ţ          | 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             | 310,296                   | 257,544                     | 18,875                  | 33,877                |
| 27 F       | Pension plan contributions not included on                     |                |                           |                             |                         |                       |
|            | lines 25a, b, and c  | 27             |                           |                             |                         |                       |
|            | Employee benefits not included on lines                        |                |                           |                             |                         |                       |
|            | 25a – 27   | 28             | 35,528                    | 25,963                      | 3,318                   | 6,247                 |
|            | Payroll taxes  | 29             | 35,326                    | 25,965                      | 3,310                   | 0,241                 |
|            | Professional fundraising fees                                  | 30<br>31       | 8,030                     |                             | 8,030                   |                       |
|            | Accounting fees  | 32             | 5,517                     | 683                         | 4,809                   | 25                    |
|            | Legal fees<br>Supplies   | 33             | 70,812                    | 53,973                      | 13,941                  | 2,898                 |
|            | Telephone  | 34             | ,                         | 00,0.0                      |                         |                       |
|            | Postage and shipping   | 35             | 5,972                     |                             | 5,972                   |                       |
|            | Occupancy  | 36             | 137,527                   | 137,527                     |                         |                       |
|            | Equipment rental and maintenance                               | 37             | ,                         | ,                           |                         |                       |
|            | Printing and publications                                      | 38             | 43,638                    | 2,050                       | 1,016                   | 40,572                |
|            | Travel   | 39             | 52,265                    | 18,371                      | 17,596                  | 16,298                |
| 40 (       | Conferences, conventions, and meetings                         | 40             | 6,401                     | 1,000                       |                         | 5,401                 |
| 41 I       | Interest   | 41             |                           |                             |                         |                       |
| 42 [       | Depreciation, depletion, etc. (attach schedule)                | 42             |                           |                             |                         |                       |
| 43 (       | Other expenses not covered above (itemize)                     |                |                           |                             |                         |                       |
| а          | SEE STATEMENT 4  | 43a            | 339,666                   | 279,959                     | 30,732                  | 28,975                |
| b          |  | 43b            |                           |                             |                         |                       |
| С          |  | 43c            |                           |                             |                         |                       |
| d          |  | 43d            |                           |                             | -                       | <del></del>           |
| е          |  | 43e            |                           | <del></del>                 | _                       | <del></del>           |
| f          |  | 43f            |                           |                             |                         |                       |
| g          |  | 43g            |                           |                             |                         |                       |
|            | Total functional expenses. Add lines 22a                       |                |                           |                             |                         |                       |
|            | through 43g (Organizations completing                          |                |                           |                             |                         |                       |
|            | columns (B)-(D), carry these totals to lines<br>13-15)         | 44             | 1,086,326                 | 805,614                     | 118,332                 | 162,380               |
|            | t Costs. Check ▶ If you are following SOP 98-2                 |                | , 555,520                 | 300,014                     | , 552                   |                       |
|            | any joint costs from a combined educational campaigr           |                | ing solicitation reported | ın (B) Program service      | es?                     | Yes X No              |
|            | is," enter (i) the aggregate amount of these joint costs \$    |                | , (ii) the amou           |                             |                         |                       |
|            | he amount allocated to Management and general \$               |                |                           | nt allocated to Fundraising |                         |                       |
| DAA        |  |                | . ,                       |                             | -                       | Form <b>990</b> (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.   |

| on its return. Therefore, please make sure to<br>programs and accomplishments.  | the return is complete and accura                                     | ate and fully describes, in Part III, the organization's | <u> </u>    |   |
|---|---|--|-------------|---|
| What is the organization's primary exempt possible SEE STATEMENT 5  All organizations must describe their exempt of clients served, publications issued, etc. Durganizations and 4947(a)(1) nonexempt charge. | ot purpose achievements in a clea<br>Discuss achievements that are no |  |             | Program Service<br>Expenses<br>(Required for 501(c)(3) and<br>(4) orgs , and 4947(a)(1)<br>trusts, but optional for<br>others ) |
| a SEE "STATEMENT OF ATTACHED.   | PROGRAM SERVICE   | ACCOMPLISHMENTS"   |             |   |
| (Grants and allocations \$  | 28,544 )  | If this amount includes foreign grants, check here       | ▶ []        | 805,614   |
| ь   |   |  |             |   |
| (Grants and allocations \$  | )   | If this amount includes foreign grants, check here       | ▶ □         |   |
| c   |   |  |             |   |
| (Grants and allocations \$  | )   | If this amount includes foreign grants, check here       | <b>&gt;</b> |   |
| d ·   |   |  | . □         |   |
| (Grants and allocations \$ e Other program services (attach schedu  |   | If this amount includes foreign grants, check here       | <u> </u>    |   |
| (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)                                      | •           | 805,614   |

| _P                          | <u>art IV</u> | Balance Sheets (See the instructions.)  |                             |                          |          |  |
|-----------------------------|---------------|---|-----------------------------|--------------------------|----------|--|
|                             | Note:         | Where required, attached schedules and amounts within column should be for end-of-year amounts only             | the description             | (A)<br>Beginning of year |          | (B)<br>End of year                                 |
|                             | 45            | Cash-non-interest-bearing   |                             | 123,583                  | 45       | 17,602   |
|                             | 46            | Savings and temporary cash investments  |                             |                          | 46       |  |
|                             |               |   |                             |                          |          |  |
|                             | 47a           | Accounts receivable   | 47a                         |                          |          |  |
|                             | b             | Less: allowance for doubtful accounts   | 47b                         |                          | 47c      |  |
|                             |               |   |                             |                          |          |  |
|                             | 48a           | Pledges receivable  | 48a                         |                          |          |  |
|                             | b             | Less, allowance for doubtful accounts   | 48b                         |                          | 48c      |  |
|                             | 49            | Grants receivable   |                             | <del></del>              | 49       |  |
|                             | 50a           | Receivables from current and former officers, directors,  |                             |                          |          |  |
|                             |               | key employees (attach schedule)   | dan anadian 4050(0(4)), and |                          | 50a      |  |
|                             | b             | Receivables from other disqualified persons (as defined   |                             |                          | E01-     |  |
|                             | E4-           | persons described in section 4958(c)(3)(B) (att schedul   | =)                          |                          | 50b      | · <del>- · · · · · · · · · · · · · · · · · ·</del> |
|                             | 51a           | Other notes and loans receivable (attach schedule)  | 51a                         |                          |          |  |
| ets                         | h             | Less: allowance for doubtful accounts   | 51b                         |                          | 51c      |  |
| Assets                      | 52            | Inventories for sale or use   | 315                         |                          | 52       |  |
| •                           | 53            | Prepaid expenses and deferred charges   |                             |                          | 53       |  |
|                             | 54a           | Investments—publicly-traded securities  | Cost FMV                    |                          | 54a      |  |
|                             | b             | Investments—other securities  | Cost FMV                    |                          | 54b      |  |
|                             | 55a           | (attach schedule) Investments-land, buildings, and  |                             |                          |          |  |
|                             | JJ4           | equipment: basis  | 55a                         |                          |          |  |
|                             | b             | Less: accumulated depreciation (attach  |                             |                          |          |  |
|                             |               | schedule)   | 55b                         |                          | 55c      |  |
|                             | 56            | Investments-other (attach schedule)   |                             |                          | 56       |  |
|                             | 57a           | Land, buildings, and equipment: basis   | 57a                         |                          |          |  |
|                             | ь             | Less accumulated depreciation (attach   |                             |                          |          |  |
|                             |               | schedule)   | 57b                         |                          | 57c      |  |
|                             | 58            | Other assets, including program-related investments   |                             |                          |          |  |
|                             |               | (describe   | )                           | 100 500                  | 58       | 17 600   |
| _                           | 59            | Total assets (must equal line 74). Add lines 45 through   | 58                          | 123,583                  | 59       | 17,602   |
|                             | 60            | Accounts payable and accrued expenses   |                             |                          | 60       |  |
|                             | 61            | Grants payable  |                             |                          | 61<br>62 |  |
|                             | 62            | Deferred revenue  | oog (attach                 |                          | 62       | <u> </u>   |
| ties                        | 63            | Loans from officers, directors, trustees, and key employers schedule)   | ses (attach                 |                          | 63       |  |
| Liabilitie                  | 64a           | Tax-exempt bond liabilities (attach schedule)   |                             |                          | 64a      |  |
| Lia                         | b             | Mortgages and other notes payable (attach schedule)   | SEE WORKSHEET               |                          | 64b      | 10,780   |
|                             | 65            | Other liabilities (describe   | )                           |                          | 65       |  |
|                             |               |   | ,                           |                          |          |  |
|                             | 66            | Total liabilities. Add lines 60 through 65  |                             | 0                        | 66       | 10,780   |
|                             | Orga          | nizations that follow SFAS 117, check here ▶ 🗴 a  | nd complete lines           |                          |          | <u>-</u>   |
|                             |               | 67 through 69 and lines 73 and 74   |                             |                          |          |  |
| es                          | 67            | Unrestricted  |                             | 33,344                   | 67       | 6,822  |
| anc                         | 68            | Temporarily restricted  |                             | 90,239                   | 68       |  |
| Bala                        | 69            | Permanently restricted  |                             |                          | 69       |  |
| Pu .                        | Orga          | nizations that do not follow SFAS 117, check here   | and and                     |                          |          |  |
| Fu                          |               | complete lines 70 through 74  |                             |                          |          |  |
| Net Assets or Fund Balances | 70            | Capital stock, trust principal, or current funds  |                             |                          | 70       | <del></del>  |
| set                         | 71            | Paid-in or capital surplus, or land, building, and equipme  |                             |                          | 71       |  |
| As                          | 72            | Retained earnings, endowment, accumulated income, or  |                             |                          | 72       |  |
| Ne                          | 73            | Total net assets or fund balances (add lines 67 through 70 through 73 (Column (A) must equal line 10 and column |                             |                          |          |  |
|                             |               | 70 through 72. (Column (A) must equal line 19 and colu  | ınıı (D) <b>mus</b> t       | 123,583                  | 73       | 6,822  |
|                             | 74            | equal line 21)  Total liabilities and net assets/fund balances. Add lin   | es 66 and 73                | 123,583                  |          | 17,602   |
|                             |               | . ozar nabilitios and not absets/fully balances. Add IIII   | 55 55 WHO 1 9               |                          | .,,      |  |

| Form | 1 990 (2006) ' INTERNATIONAL ACADEMY OF DETOXI   | FI- 94-3382902        | 2            |          | Page 5                    |
|------|--|-----------------------|--------------|----------|---------------------------|
| Pa   | art IV-A Reconciliation of Revenue per Audited Financial                                 | Statements With Reve  | nue per R    | eturn    | (See the                  |
|      | instructions.)  Total revenue, gains, and other support per audited financial statements |                       |              | a        | 969,565                   |
| b    | Amounts included on line a but not on Part I, line 12:                                   |                       |              |          | <u> </u>                  |
| 1    | Net unrealized gains on investments  | b1                    |              |          |                           |
| 2    | Donated services and use of facilities   | b2                    |              |          |                           |
| 3    | Recoveries of prior year grants  | b3                    |              |          |                           |
| 4    | Other (specify):   |                       |              |          |                           |
| •    | C. (C. C. C   | b4                    |              |          |                           |
|      | Add lines b1 through b4  | <u></u>               |              | Ь        |                           |
| С    | Subtract line b from line a  |                       |              | c        | 969,565                   |
| d    | Amounts included on Part I, line 12, but not on line a:                                  |                       |              |          |                           |
| 1    | Investment expenses not included on Part I, line 6b                                      | d1                    |              |          |                           |
| 2    | Other (specify):   |                       |              |          |                           |
|      | (/)  | d2                    |              | <b>!</b> |                           |
|      | Add lines d1 and d2  |                       |              | lal      |                           |
| е    | Total revenue (Part I, line 12) Add lines c and d  |                       | •            | e        | 969,565                   |
| Pa   | art IV-B Reconciliation of Expenses per Audited Financia                                 | I Statements With Exp | enses per    | Retur    |                           |
| а    | Total expenses and losses per audited financial statements                               |                       |              | а        | 1,086,326                 |
| b    | Amounts included on line a but not Part I, line 17:                                      |                       |              |          |                           |
| 1    | Donated services and use of facilities   | b1                    |              | ] ]      |                           |
| 2    | Prior year adjustments reported on Part I, line 20                                       | b2                    |              | ]        |                           |
| 3    | Losses reported on Part I, line 20   | b3                    |              | ] ]      |                           |
| 4    | Other (specify):   |                       |              |          |                           |
|      |  | b4                    |              | ]        |                           |
|      | Add lines b1 through b4  |                       |              | ь        |                           |
| С    | Subtract line <b>b</b> from line <b>a</b>  |                       |              | С        | 1,086,326                 |
| d    | Amounts included on Part I, line 17, but not on line a:                                  |                       |              |          |                           |
| 1    | Investment expenses not included on Part I, line 6b                                      | d1                    |              | 1 1      |                           |
| 2    | Other (specify):   |                       |              |          |                           |
|      |  | d2                    |              |          |                           |
|      | Add lines d1 and d2  |                       |              | d        |                           |
| е    | Total expenses (Part I, line 17). Add lines c and d                                      | <del>, ,</del>        | <u> </u>     | е        | 1,086,326                 |
| Pa   | art V-A Current Officers, Directors, Trustees, and Key Er                                |                       |              | officer, | director, trustee,        |
|      | or key employee at any time during the year even if they were no                         |                       |              | I (D) C- |                           |
|      |  | 1 (P) 1(C) C          | ompoperation | וטוטויי  | ntributions to (E) Evenne |

| (A) Name and             | 1 address   | (B) Title and average hours per week devoted to position | (C) Compensation<br>(If not paid, enter<br>-0) | (D) Contributions to<br>employee benefit plans &<br>deferred compensation<br>plans | (E) Expense account and other allowances |
|--------------------------|-------------|--|--|--|--|
| ELLEN EDMONDSON          | LOS ANGELES | PRES/TRUSTEE   |  |  |  |
| 4801 WILSHIRE BLVD. #215 | CA 90010    | 0  | 0  | 0  | 0  |
| CARL SMITH               | LOS ANGELES | SEC/TRUSTEE  |  |  |  |
| 4801 WILSHIRE BLVD. #215 | CA 90010    | 0  | 0  | 0  | 0  |
| JAMES BARNES             | LOS ANGELES | TRS/TRUSTEE  |  |  |  |
| 4801 WILSHIRE BLVD. #215 | CA 90010    | 0  | 0  | 0  | 0  |
| CAROLYN HAMAKER          | LOS ANGELES | CLINIC ED  |  |  |  |
| 4801 WILSHIRE BLVD. #215 | CA 90010    | 40   | 42,130   | 0  | _0                                       |
|                          |             |  |  |  |  |
|                          |             |  |  |  |  |

| Form        | 990 (2006) ' INTERNATIONAL ACADEMY OF DETOX  | <u> </u>                    | 2902                        |  |                   | F        | age 6       |
|-------------|--|-----------------------------|-----------------------------|--|-------------------|----------|-------------|
| _Pa         | rt V-A Current Officers, Directors, Trustees, and Key En   | ployees (continu            | <u>ed)</u>                  |  |                   | Yes      | No          |
| 75a         | Enter the total number of officers, directors, and trustees permitted to vote on o   | organization business at    | board                       |  |                   |          |             |
|             | meetings   | •                           |                             |  |                   |          |             |
| þ           | Are any officers, directors, trustees, or key employees listed in Form 990, Part   | = -                         | sated                       |  |                   |          |             |
|             | employees listed in Schedule A, Part I, or highest compensated professional ar   | •                           |                             |  |                   |          |             |
|             | contractors listed in Schedule A, Part II-A or II-B, related to each other through   | •                           |                             |  |                   |          |             |
|             | relationships? If "Yes," attach a statement that identifies the individuals and exp  | plains the relationship(s   | )                           | ļ  | 75b               | _        | X           |
| _           | De constitue des des des des des des des des Constitues de de Constitue de Constitu | / A b b                     |                             |  |                   |          |             |
| С           | Do any officers, directors, trustees, or key employees listed in Form 990, Part V  |                             |                             |  |                   |          |             |
|             | compensated employees listed in Schedule A, Part II, or highest compensated  | •                           |                             |  |                   |          |             |
|             | 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."  | one see the instructions    | 5 101                       |  | 75c               | •        | х           |
|             | If "Yes," attach a statement that includes the information described in the instru   | etione                      |                             |  | 750               |          |             |
| а           | Does the organization have a written conflict of interest policy?  | CHOITS.                     |                             |  | 75d               | •        | x           |
| Pa          | rt V-B Former Officers, Directors, Trustees, and Key Em  | nlovees That Rec            | eived Com                   | nensation or Oth                               | _                 | enef     |             |
|             | (If any former officer, director, trustee, or key employee received of   | • •                         |                             |  |                   |          |             |
|             | person below and enter the amount of compensation or other bene  | -                           |                             | • -  | , ,               |          | •           |
|             |  |                             |                             | (D) Contributions to employe                   | e (E              | ) Expe   | ense        |
|             | (A) Name and address   | (B) Loans and Advances      | (if not paid,<br>enter -0-) | benefit plans & deferred<br>compensation plans |                   | ount and |             |
| N/2         |  |                             | 0                           | omponoadon prano                               | †                 |          |             |
| ,-          |  |                             |                             |  |                   |          |             |
|             |  |                             |                             |  |                   |          |             |
|             |  |                             |                             |  |                   |          |             |
|             |  |                             |                             |  |                   |          |             |
|             |  |                             |                             |  |                   |          |             |
|             |  |                             | I                           |  |                   |          |             |
|             |  |                             |                             |  | <u> </u>          |          |             |
|             |  |                             |                             |  |                   |          |             |
|             | ·  |                             |                             |  |                   |          |             |
|             |  |                             | İ                           |  |                   |          |             |
|             |  |                             |                             |  | ↓_                |          |             |
|             |  |                             |                             | •  |                   |          |             |
|             |  |                             |                             |  | ↓_                |          |             |
|             |  |                             |                             |  |                   |          |             |
|             |  |                             |                             |  | <u> </u>          |          |             |
|             |  |                             |                             |  |                   |          |             |
|             |  |                             |                             |  | $\bot$            |          |             |
|             |  |                             |                             |  | 1                 |          |             |
|             | (0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -   |                             |                             |  |                   |          |             |
|             | rt VI Other Information (See the instructions.)  |                             |                             |  |                   | Yes      | No          |
| 76          | Did the organization make a change in its activities or methods of conducting a  | ctivities? If "Yes," attach | n a                         |  |                   |          | v           |
|             | detailed statement of each change  |                             |                             | }  | 76                |          | X           |
| 77          | Were any changes made in the organizing or governing documents but not rep   | orted to the IRS?           |                             | •  | 77                |          |             |
| <b>7</b> 0- | If "Yes," attach a conformed copy of the changes.  Did the organization have unrelated business gross income of \$1,000 or more  | d                           | . h                         |  |                   |          | ĺ           |
| 78a         |  | during the year covered     | Бу                          |  | 70-               |          | x           |
| <b>.</b>    | this return?  If "Yes," has it filed a tax return on Form 990-T for this year?   |                             |                             | T  | <u>78a</u><br>78b |          | <u> </u>    |
| ь<br>79     | Was there a liquidation, dissolution, termination, or substantial contraction durin  | ng the year? If "Vec " at   | tach                        | ļ  | 760               |          |             |
| 13          | a statement  | ig the year: it les, at     | LaCIT                       |  | 79                |          | x           |
| 80a         | Is the organization related (other than by association with a statewide or nation  | wide organization) throi    | ıah                         | ļ  | 13                |          | <del></del> |
| ova         | common membership, governing bodies, trustees, officers, etc., to any other ex   |                             | ייפי                        |  |                   |          |             |
|             | organization?  | compt or nonexempt          |                             |  | 80a               |          | x           |
| b           | If "Yes," enter the name of the organization   |                             |                             | ŀ  | J.U.              |          | <del></del> |
| ~           |  | eck whether it is e         | xempt or                    | nonexempt                                      |                   |          |             |
| 81a         | Enter direct and indirect political expenditures. (See line 81 instructions )  |                             | 81a                         | · · · · · · · ·                                |                   |          |             |
| b           | Did the organization file Form 1120-POL for this year?   |                             |                             |  | 81b               |          | x           |
|             |  |                             |                             |  |                   |          |             |

|         | 990 (2006) INTERNATIONAL ACADEMY OF DETOXIFI- 94-33829   | UZ                  | _    |            | age :  |
|---------|--|---------------------|------|------------|--|
|         | rt VI Other Information (continued)  |                     | Τ    | Yes        | No   |
| 82a     | -  |                     | 1    |            |  |
|         | or at substantially less than fair rental value?   |                     | 82a  |            | X  |
| ь       | If "Yes," you may indicate the value of these items here. Do not include this  |                     |      |            |  |
|         | amount as revenue in Part I or as an expense in Part II.   | a. 1                |      |            |  |
|         |  | 2b ]                |      | .,         | 1  |
| 83a     |  | ,                   | 83a  | X          | <del>                                     </del> |
| 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  |            | <u> </u>   |
| b       | If "Yes," did the organization include with every solicitation an express statement that such contributions or   | N/A                 | 84b  |            |  |
| 0.5     | gifts were not tax deductible? 501(c)(4), (5), or (6) organizations, a Were substantially all dues nondeductible by members?   | N/A                 | 85a  |            | ┢  |
| 85<br>b | Did the organization make only in-house lobbying expenditures of \$2,000 or less?  | N/A                 | 85b  |            | $\vdash$   |
| b       | If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization  | •                   | 000  |            | $\vdash$   |
|         | received a waiver for proxy tax owed for the prior year.   | •                   |      |            |  |
| С       | · · · · · · · · · · · · · · · · · · ·  | 5c                  |      |            |  |
| d       | · · · · · · · · · · · · · · · · · · ·  | 5d                  | 1    |            |  |
| e       |  | 5e                  | 1    |            |  |
| f       | i de la companya de  | 5f                  | 1    |            |  |
| g<br>g  | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  | N/A                 | 85g  | İ          | 1  |
| 9<br>h  | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f   | ,                   |      | <b></b>    |  |
| ••      | to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the  |                     |      |            |  |
|         | following tax year?  | N/A                 | 85h  |            |  |
| 86      |  | 6a                  |      |            |  |
| b       |  | 6b                  | 1    |            | l  |
| 87      |  | 7a                  | 1    |            |  |
| b       | Gross income from other sources (Do not net amounts due or paid to other   |                     | ]    |            |  |
|         | sources against amounts due or received from them.)  | 7b                  |      |            |  |
| 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  |            | 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  | <b>•</b>            | 88b  |            | X  |
| 89a     | 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 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  |                     |      |            |  |
|         | a statement explaining each transaction  |                     | 89b  | ļ          | X  |
| С       | 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                  |      |            |  |
| е       | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter   |                     |      | •          |  |
| _       | transaction?   | -10                 | 89e  | ļ <u>.</u> | X  |
| f       | All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contra   | ict?                | 89f  | <u> </u>   | -  |
| 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  |                     | 00-  |            | x  |
| 00-     | at any time during the year?  List the states with which a copy of this return is filed   CA, NY   |                     | 89g  | L          |  |
| 90a     | •  |                     |      |            |  |
| þ       | Number of employees employed in the pay period that includes March 12, 2006 (See   | 90ь                 |      |            | 1 :  |
| 040     | Instructions.) The books are in care of ▶ ALI DATARDINA  | Telephone no ▶ 323- | .037 | -99        | <del>11</del>                                    |
| 91a     | 4801 WILSHIRE BLVD., SUITE 216   | relephone no P 323  | 951  | 99         |  |
|         | Located at LOS ANGELES, CA   | ZIP+4 ▶ 90010       |      |            |  |
|         |  | <del>-</del>        |      |            |  |
| b       | At any time during the calendar year, did the organization have an interest in or a signature or other authorities over a financial account in a foreign country (such as a bank account, securities account, or other financial | у                   |      | Yes        | No   |
|         | · · · · · · · · · · · · · · · · · · ·  |                     | 91b  | 162        | X  |
|         | account)?  If " Yes," enter the name of the foreign country  |                     | 310  | <b></b>    | <del>                                     </del> |
|         | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank  |                     |      |            |  |
|         | and Financial Accounts   |                     |      |            |  |
|         | and i mandal ricodumo  | <del></del>         |      | 000        | 1 (000)  |

| Form  | 1 990 (200         | 6) · INTERNATIONAL  |  | DETOXI               | FI- 94-              | 3382902          | <u></u> .                   |                     | Page 8          |
|-------|--------------------|---|--|----------------------|----------------------|------------------|-----------------------------|---------------------|-----------------|
|       | art VI             | Other Information (cont   |  |                      |                      |                  |                             | Ye                  |                 |
| С     |                    | me during the calendar year, did the  |  | n an office out      | side of the United   | States?          |                             | 91c                 | <u> </u>        |
|       |                    | enter the name of the foreign count   |  |                      |                      |                  |                             |                     | . —             |
| 92    |                    | 4947(a)(1) nonexempt chantable tru  |  |                      |                      |                  | . 1                         |                     | ▶ _             |
|       | and ente           | r the amount of tax-exempt interest   |  |                      |                      |                  | ▶ 92                        |                     |                 |
| Pa    | art VII            | Analysis of Income-Pro  | ducing Activities  | s (See the           | instructions.)       |                  |                             |                     |                 |
| Note  | : Enter gr         | oss amounts unless otherwise  | ļ  | Unrelate             | d business income    | Exclude          | by section 512, 513, or 514 | (E)<br>Related      |                 |
| ındıc | ated.              |   | ł  | (A)<br>Business code | (B)<br>Amount        | (C)<br>Exclusion | (D)<br>Amount               | exempt fun          |                 |
| 93    | Program            | service revenue.  | Ļ  | Busiless code        | Amount               | code             | Amount                      | income              |                 |
| а     |                    |   |  |                      |                      |                  |                             |                     |                 |
| b     |                    |   |  |                      |                      |                  |                             |                     |                 |
| C     |                    |   |  |                      |                      |                  |                             |                     |                 |
| d     |                    |   |  |                      |                      |                  |                             |                     |                 |
| е     |                    |   |  |                      |                      |                  |                             |                     |                 |
| f     | Medicar            | e/Medicaid payments   |  |                      |                      |                  |                             |                     |                 |
| g     | Fees an            | d contracts from government agenc   | ies  |                      |                      |                  |                             |                     |                 |
| 94    | Member             | ship dues and assessments   |  |                      |                      |                  |                             | 2                   | ,000            |
| 95    | Interest           | on savings and temporary cash inve  | estments   |                      |                      | 14               | 107                         |                     |                 |
| 96    | Dividend           | s and interest from securities  |  |                      |                      |                  |                             |                     |                 |
| 97    | Net renta          | al income or (loss) from real estate:   |  |                      |                      |                  |                             |                     |                 |
| а     | debt-fina          | inced property  |  |                      |                      |                  |                             |                     |                 |
| b     | not debt           | financed property   |  |                      |                      |                  |                             |                     |                 |
| 98    | Net renta          | al income or (loss) from personal pro   | operty   |                      |                      |                  |                             |                     |                 |
| 99    | Other in           | vestment income   |  |                      |                      |                  |                             |                     |                 |
| 100   | Gain or            | (loss) from sales of assets other tha   | n inventory  |                      |                      |                  |                             |                     |                 |
| 101   |                    | me or (loss) from special events  | , and the second |                      |                      |                  |                             | <u>.</u>            |                 |
|       |                    | ofit or (loss) from sales of inventory  |  |                      |                      |                  |                             |                     |                 |
|       | -                  | venue: a  | Ì  |                      |                      |                  |                             |                     |                 |
| b     | -                  |   |  |                      |                      |                  |                             |                     |                 |
| c     |                    |   |  |                      |                      |                  |                             |                     |                 |
| d     |                    |   |  |                      |                      |                  |                             |                     |                 |
| e     |                    |   |  |                      |                      |                  |                             |                     |                 |
|       | Subtotal           | (add columns (B), (D), and (E))   |  |                      |                      | 0                | 107                         | 2                   | ,000            |
|       |                    | dd line 104, columns (B), (D), and (E)  | =))<br>=))   |                      |                      | <u> </u>         |                             |                     | ,107            |
|       |                    | plus line 1e, Part I, should equal th   |  | Part I               |                      |                  |                             |                     | 7               |
|       | art VIII           | Relationship of Activitie   |  |                      | of Exempt Pu         | rnoses (S        | see the instruction         | s )                 |                 |
|       | ine No.            | Explain how each activity for wh  |  |                      |                      |                  |                             |                     |                 |
| _     | ₩                  | of the organization's exempt pu   |  |                      |                      |                  | intry to the accomplishin   |                     |                 |
| 9     | 4                  | MEMBERSHIPS IN T  | HE ACADEMY   | RECEIV               | ED.                  |                  |                             |                     |                 |
|       | -                  |   |  |                      |                      |                  |                             |                     |                 |
|       |                    |   |  |                      |                      |                  |                             |                     |                 |
|       |                    |   |  |                      |                      |                  |                             |                     |                 |
| p:    | art IX             | Information Regarding   | Taxable Subsidi:   | aries and F          | )isregarded F        | ntities (S       | ee the instructions         | s.)                 |                 |
|       |                    | (A)   | (B)  |                      | (C)                  |                  | (D)<br>Total income         | (E)                 |                 |
|       | partner            | lress, and ÉIN of corporation,<br>ship, or disregarded entity                 | Percentage of<br>ownership interest  | t                    | lature of activities | 5                | Total income                | End-of-ye<br>assets | ar<br>          |
|       | N/A                |   |  | %                    |                      |                  |                             |                     | _               |
|       |                    |   |  | %                    |                      |                  |                             |                     |                 |
|       |                    |   |  | %                    |                      |                  |                             |                     |                 |
|       |                    |   |  | %                    |                      |                  |                             |                     |                 |
|       | art X              | Information Regarding   |  |                      |                      |                  |                             |                     | [ <del></del> ] |
| (     | ( <b>b)</b> Did th | e organization, during the year, rece<br>e organization, during the year, pay | premiums, directly or  | indirectly, on       |                      |                  | benefit contract?           | _                   | X No            |
|       | NOTE: IT "Y        | es" to (b), file Form 8870 and Form   | 4/20 (see instruction  | 19)                  |                      |                  |                             | Form 99             | (2006)          |

| Form 990 Part X                                  | ***************************************   |   |   | , if the or    | ganizatio       |             | age 9      |
|--|---|---|---|----------------|-----------------|-------------|------------|
| Falt   | is a controlling organization as defin  |   |   | N/A            | yanızalıdı      | 1           |            |
|  |   |   |   | -              |                 | Yes         | No         |
| <b>106</b> D                                     | nd the reporting organization make any transfers to a con   | ntrolled entity as defined                    | in section 512(b)(13) of                      |                |                 |             |            |
| th   | ne Code? If "Yes," complete the schedule below for each   | controlled entity                             |   |                |                 |             |            |
|  | (A)   | (B)   | (C)   |                | 1 0             | D)          |            |
|  | Name, address, of each  | Employer ID                                   | Description of                                |                | Amount          |             | ansfer     |
|  | controlled entity   | Number  | transfer                                      |                |                 |             |            |
| ŀ  |   |   |   |                | İ               |             |            |
| a  |   |   |   |                |                 |             |            |
| b  |   |   |   |                |                 |             |            |
| c  |   |   |   |                |                 |             |            |
|  | Totals  |   | <del></del>                                   |                |                 |             |            |
|  |   | <u> </u>                                      |   |                |                 | Yes         | No         |
| <b>107</b> D                                     | id the reporting organization receive any transfers from  | a controlled entity as de                     | fined in section                              |                | ŀ               | 163         | NO.        |
|  | 12(b)(13) of the Code? If "Yes," complete the schedule b  |   |   |                |                 |             |            |
|  | (A)   | (B)   | (C)   |                | <u> </u>        |             | •          |
|  | Name, address, of each  | Employer ID                                   | Description of                                |                | Amount          | D)<br>of tw | notor      |
|  | controlled entity   | Number  | transfer                                      |                | Amount          | OI II Z     | alisiei    |
|  |   |   |   |                |                 |             |            |
| а  |   |   |   |                |                 |             |            |
| 4  |   |   |   |                |                 |             |            |
|  |   |   |   |                |                 |             |            |
| b  |   |   |   |                |                 |             |            |
| +  |   | <del>                                  </del> |   |                | <del> </del>    |             |            |
|  |   |   |   |                |                 |             |            |
| 7  |   |   |   |                |                 |             |            |
| <del>-                                    </del> | 7.4.1   |   | ······································        | i              |                 |             |            |
|  | Totals  |   |   |                |                 |             |            |
|  |   |   |   |                |                 | Yes         | No         |
| 108 D  | id the organization have a binding written contract in effe   | ect on August 17, 2006, e                     | covering the interest,                        |                |                 |             |            |
| re   | ents, royalties, and annuities described in question 107 a  | bove?   |   |                |                 |             | <u> </u>   |
|  | Under penalties of penury, I declare that I have examined and belief, it is true, correct, and complete. Declaration of | this return, including accom                  | npanying schedules and statements, and to     | the best of m  | y knowledge     |             |            |
| Please   | and belief, it is true, correct, and complete Declaration of  | preparer (other than officer                  | ) is based on all information of which prepar | rer nas any kr | lowledge        |             |            |
| Sign   |   |   |   |                |                 |             |            |
| Here   | Signarture of offider   | acre for                                      |   | Date///        | 101 2           | 7_          | -          |
|  |   | ecretary                                      | <del></del>                                   | <i>!'}</i> ,   |                 | 7           |            |
|  | Type or print name and title  | $\frac{1}{2}$                                 |   | <del>'</del> - | Preparer's SS   | SN or I     | PTIN       |
| Paid<br>Prepare                                  | Preparer's signature Wand W   | Sunk CP                                       | Date Check if self- employed                  | ×              | (See Gen In:    |             |            |
| Use On   | Firm's name (or yours A ROLAND W. I   | FINK, CPA                                     |   | EIN            | <u> </u>        |             |            |
| 330 011  | if self-employed), 2441 HONOLU  | JLU AVE., SU                                  |   | Phone          |                 |             |            |
|  | address, and ZIP + 4 MONTROSE,  | CA 91020-18                                   | 47  | no ▶ 8         | 318-24 <u>9</u> | <u> </u>    | <u>577</u> |

Department of the Treasury Internal Revenue Service\_

## **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

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ OMB No 1545-0047

2006

| -  |                                       | XIFI- CATION SPEC                   | CIALISTS                                |                    |               | ntification number  |
|--|---------------------------------------|-------------------------------------|---|--------------------|---------------|---------------------|
| Part I   | •                                     |                                     |   | •                  |               |                     |
|  |                                       |                                     | (b) Title and average hour              | s (a) Comp         | empl ben pla  | ans account & other |
| INTERNATIONAL ACADEMY OF DETOXIFI- CATION SPECIALISTS   94-338290    Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 2 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 (c) Comp (d) Complete paid and the set of the per week devoted to position   (c) Comp (d) Complete paid and the set of the set of the set of the per week devoted to position   (c) Comp (d) Complete paid and the set of the |                                       |                                     |   |                    |               |                     |
|  |                                       |                                     |   |                    |               |                     |
|  |                                       |                                     |   |                    | <del> </del>  |                     |
|  |                                       |                                     |   |                    |               |                     |
|  |                                       |                                     |   |                    |               |                     |
|  |                                       |                                     |   |                    |               |                     |
|  |                                       | <b>&gt;</b>                         |   |                    |               |                     |
| Part II-A  | •                                     |                                     |   |                    |               | er "None.")         |
|  | (a) Name and address of each independ | dent contractor paid more than \$50 | ,000                                    | (b) Type of s      | service       | (c) Compensation    |
|  | ·                                     |                                     |   |                    |               | 129,620             |
| <del></del>  |                                       |                                     |   |                    |               |                     |
|  |                                       |                                     |   |                    |               |                     |
|  |                                       |                                     | <del>.</del>                            |                    |               |                     |
|  |                                       |                                     |   |                    | <u> </u>      | •••••               |
| ***************************************  |                                       | ighest Paid Independe               |   | her Services       |               | <u></u>             |
| Fattura  | (List each contractor who pe          | rformed services other              | than professional sei                   |                    | r individuals | s or                |
|  |                                       |                                     |   | (b) Type of s      | service       | (c) Compensation    |
| NONE   | (-,                                   |                                     | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | (=) 1)   0   0   1 |               | (0) 00              |
|  |                                       |                                     |   |                    |               |                     |
|  | · · · · · ·                           |                                     |   |                    |               |                     |
|  |                                       |                                     |   |                    |               |                     |
|  |                                       |                                     |   |                    |               |                     |
|  |                                       |                                     |   |                    |               |                     |
| Total number of  | of other contractors receiving over   |                                     | =                                       |                    | L             |                     |
| \$50,000 for oth   | <del></del>                           |                                     | <u> </u>                                |                    |               |                     |
| For Paperwor   | k Reduction Act Notice, see the Instr | uctions for Form 990 and Fo         | rm 990-EZ.                              | Schedu             | le A (Form 99 | 0 or 990-EZ) 2006   |

| Sche | edule A (Form 990 or 990-EZ) 2006 INTERNATIONAL ACADEMY OF DETOXIFI 94-3382902   |                  | F   | Page 2 |
|------|--|------------------|-----|--------|
| P    | art III. Statements About Activities (See page 2 of the instructions.)   | ··· <del>-</del> | 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)  | 1                |     | х      |
|      | 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.  |                  |     |        |
| 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.) |                  |     |        |
| а    | Sale, exchange, or leasing of property?  | 2a               |     | х      |
| b    | Lending of money or other extension of credit?   | 2b               |     | х      |
| С    | Furnishing of goods, services, or facilities?  | 2c               |     | х      |
| d    | Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990   | 2d               | X   |        |
| е    | Transfer of any part of its income or assets?  | 2e               |     | х      |
| 3a   | Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)  | 3a               |     | x      |
| b    | Did the organization have a section 403(b) annuity plan for its employees?   | 3b_              |     | х      |
| c    | Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement   | 3c               |     | х      |
| d    | Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?  | 3d               |     | х      |
| 4a   | Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g   | <b>4</b> a       |     | x      |
| b    | Did the organization make any taxable distributions under section 4966?  | 4b               |     |        |
| С    | Did the organization make a distribution to a donor, donor advisor, or related person?   | 4c               |     |        |
| d    | Enter the total number of donor advised funds owned at the end of the tax year   |                  |     |        |
| е    | Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year   |                  |     |        |
| f    | Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts   |                  | 0   | 1      |
| g    | Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year   |                  |     | 0      |

| _P;        | art I  | V. Reason for Non-Private Found   | ation Status (See p            | pages 4 through 7                   | of the instr         | uctions.)         |           |  |  |  |
|------------|--|---|--------------------------------|-------------------------------------|----------------------|-------------------|-----------|--|--|--|
| l cer<br>5 | tify th  | nat the organization is not a private foundation be<br>A church, convention of churches, or association   |                                |                                     | ox )                 |                   |           |  |  |  |
| 6          |  | A school. Section 170(b)(1)(A)(II) (Also comple   | te Part V.)                    |                                     |                      |                   |           |  |  |  |
| 7          |  | A hospital or a cooperative hospital service orga   | anization. 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 co  | njunction with a hospital.     | Section 170(b)(1)(A)(III)           | . Enter the ho       | spital's name,    | city,     |  |  |  |
|            |  | and state ▶   |                                |                                     |                      |                   |           |  |  |  |
| 10         |  | An organization operated for the benefit of a col<br>(Also complete the <b>Support Schedule</b> in Part I |                                | or operated by a govern             | nmental unit. S      | ection 170(b)(1)  | )(A)(ıv)  |  |  |  |
| 11a        | X  | An organization that normally receives a substation 170(b)(1)(A)(vi). (Also complete the <b>Support S</b> |                                | om a governmental unit              | or from the ger      | neral public. Sed | ction     |  |  |  |
| 11b        |  | A community trust. Section 170(b)(1)(A)(vi). (Al  | so 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         | requirements of section 509(a)(3). Check the box that describes the type of supporting organization:  Type I Type II Type III-Functionally Intergrated Type III-Other  |   |                                |                                     |                      |                   |           |  |  |  |
|            |  | Provide the following inform  | nation about the suppor        | ted organizations. (Se              | e page 7 of the      | instructions)     |           |  |  |  |
|            |  | (a)   | (b)                            | (c)                                 |                      | d)                | (e)       |  |  |  |
|            |  | Name(s) of supported organization(s)  | Employer                       | Type of                             |                      | ipported          | Amount of |  |  |  |
|            |  |   | identification<br>number (EIN) | organization<br>(described in lines | organization the sur | porting           | support   |  |  |  |
|            |  |   | namber (Em)                    | 5 through 12                        | organiz              | · •               |           |  |  |  |
|            |  |   |                                | above or IRC                        | governing of         |                   |           |  |  |  |
|            |  |   |                                | section)                            |                      |                   |           |  |  |  |
|            |  |   |                                |                                     | Yes                  | No                |           |  |  |  |
|            |  |   |                                |                                     |                      |                   |           |  |  |  |
|            |  |   |                                |                                     |                      |                   |           |  |  |  |
|            |  |   |                                |                                     |                      |                   |           |  |  |  |
|            |  |   |                                |                                     |                      |                   |           |  |  |  |
|            |  |   |                                |                                     |                      |                   |           |  |  |  |
|            | _  |   |                                |                                     |                      |                   |           |  |  |  |
| Tota       | 1  |   |                                |                                     |                      | <b>&gt;</b>       |           |  |  |  |
| 14         | $\Box$   | An organization organized and operated to test  | for public safety Section      | 509(a)(4) (See page 7               | of the instruction   | ons )             |           |  |  |  |
|            |  |   |                                |                                     |                      |                   |           |  |  |  |

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

|           | . Tou may use the worksheet in the instruc  | T              | _           |              | li tile a   |                |                 | Ĭ            |                                  |                   | [          |                  |
|-----------|---|----------------|-------------|--------------|-------------|----------------|-----------------|--------------|----------------------------------|-------------------|------------|------------------|
|           | ndar year (or fiscal year beginning in)   | ├              | (a) 2005    | <u> </u>     | <b>_</b>    | <b>(b)</b> 200 | 4               |              | (c) 2003                         | (d) 2002          | ! -        | (e) Total        |
| 15        | Gifts, grants, and contributions received (Do   | ۱ ,            | , 858       | 00E          | ۱,          | 671            | 906             |              | 702 016                          | E 77              | 047        | 4 000 564        |
|           | not include unusual grants. See line 28.)   | -              | , 656       | , 603        |             | , 6 / 1        | <u>,896</u>     | <del> </del> | 792,016                          | 5//               | 847        | 4,900,564        |
| 16        | Membership fees received  | ┼              | <del></del> |              |             |                |                 |              |                                  |                   |            | 0                |
| 17        | Gross receipts from admissions, merchandise   | l              |             |              |             |                |                 |              |                                  |                   |            |                  |
|           | sold or services performed, or furnishing of  |                |             |              |             |                |                 |              |                                  |                   |            |                  |
|           | facilities in any activity that is related to the   |                |             |              |             |                |                 |              |                                  |                   |            | _                |
|           | organization's chantable, etc , purpose   | ļ              |             |              |             |                |                 |              |                                  |                   |            | 0                |
| 18        | Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalities, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 |                |             | 152          |             |                | 23              |              |                                  |                   |            | 175              |
| 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  |                |             |              |             |                |                 |              |                                  |                   | ł          |                  |
|           | ıts behalf  |                |             |              | <u></u>     |                |                 |              |                                  | _                 |            | 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  |                |             |              |             |                |                 |              | <u> </u>                         |                   |            | 0                |
| <u>23</u> | Total of lines 15 through 22  |                | <u>,858</u> |              |             |                | <u>,919</u>     |              | 792,016                          |                   |            | 4,900,739        |
| 24        | Line 23 minus line 17   | 1              | <u>,858</u> |              |             |                | ,919            |              | 792,016                          |                   |            | 4,900,739        |
| <u>25</u> | Enter 1% of line 23   |                | 18          | <u>, 590</u> |             | 16             | <u>, 719</u>    | l            | 7,920                            | 5,                | 778        | <del></del>      |
| 26        | Organizations described on lines 10 or  | 11:            | a Ente      | г 2% of      | amoun       | t in colu      | mn (e), l       | ine 24       |                                  | <b>&gt;</b>       | 26a        | 98,015           |
| b         | Prepare a list for your records to show the   | e name         | of and a    | mount o      | contribu    | ited by e      | each per        | son (oth     | ner than a                       |                   |            |                  |
|           | governmental unit or publicly supported or  | rganiza        | ation) wh   | ose tota     | l gifts fe  | or 2002        | through         | 2005 ex      | ceeded the                       |                   |            |                  |
|           | amount shown in line 26a. Do not file thi   | s list w       | vith you    | return       | . Enter     | the total      | of all th       | ese exc      | ess amounts                      | •                 | 26b        | 1,434,915        |
| С         | Total support for section 509(a)(1) test: E   | nter lin       | e 24, col   | umn (e)      |             |                |                 |              |                                  | •                 | 26c        | 4,900,739        |
| d         | Add: Amounts from column (e) for lines:   | 18             |             |              | <u> 175</u> | 19             |                 |              |                                  |                   |            |                  |
|           |   | 22             |             |              |             | 26b            | 1               | ,434         | ,915                             | •                 | 26d        | 1,435,090        |
| е         | Public support (line 26c minus line 26d tol   | tal)           |             |              |             |                |                 |              |                                  | •                 | 26e        | 3,465,649        |
| f         | Public support percentage (line 26e (no   | umerat         | tor) divid  | ded by I     | ine 26      | deno           | minator         | ))           |                                  | •                 | 26f        | 70.7169%         |
| 27        | Organizations described on line 12: person," prepare a list for your records to Do not file this list with your return. En  | show t         | he name     | of, and      | total a     | mounts         | received        |              | were received for year from, eac | •                 |            | N/A              |
|           | (2005) (2   | (004           |             |              |             |                | (2003)          | )            |                                  | (2002             | 2)         |                  |
| b         | For any amount included in line 17 that wa  | as rece        | eived fron  | n each p     | person      | (other th      | an "disc        | ualified     | persons"), prep                  | are a list for yo | ur record  | ds to            |
|           | show the name of, and amount received f   | or each        | h year, th  | at was       | more th     | an the I       | <b>arger</b> of | (1) the      | amount on line                   | 25 for the year   | or (2) \$5 | 5,000.           |
|           | (Include in the list organizations described  | in line        | s 5 throu   | ıgh 11b,     | , as we     | ll as ındı     | viduals)        | Do no        | t file this list wi              | ith your return   | . After co | omputing         |
|           | the difference between the amount receive amounts) for each year  |                | the large   | er amou      | nt desc     | ribed in       | •               |              | the sum of thes                  |                   |            | ss<br><b>N/A</b> |
|           |   | (004)          |             |              |             |                | (2003)          | •            |                                  | (2002             | 2)         |                  |
| С         | Add Amounts from column (e) for lines.  |                | 15          |              |             | 16             |                 |              |                                  | _                 | 1 1        |                  |
|           | 17  | — <sup>:</sup> | 20          |              |             | 21             |                 |              |                                  | <b>.</b>          | 27c        |                  |
| d         | Add: Line 27a total   |                |             | ıne 27b      | total       |                |                 |              |                                  | <b>.</b>          | 27d        |                  |
| е         | Public support (line 27c total minus line 27  |                | •           |              |             |                |                 | _            | 1 1                              | •                 | 27e        |                  |
| f         | Total support for section 509(a)(2) test: El  |                |             |              |             |                |                 |              | 27f                              |                   | <b>↓</b>   |                  |
| g         | Public support percentage (line 27e (nu   |                | •           | •            |             | •              | •               | •            |                                  | <b>.</b>          | 27g        | %                |
| <u>h</u>  | Investment income percentage (line 18   |                |             |              |             |                |                 |              |                                  |                   | 27h        | %                |
| 28        | Unusual Grants: For an organization des   |                |             |              |             |                | -               | `            | -                                | •                 |            |                  |
|           | prepare a list for your records to show, for  |                |             |              |             |                |                 |              | •                                |                   | f          |                  |
|           | description of the nature of the grant Do   | not file       | this list   | with ye      | our ret     | urn. Do        | not inclu       | ide thes     | e grants in line                 | 15.               |            |                  |

|     | edule A (Form 990 or 990-EZ) 2006 INTERNATIONAL ACADEMY OF DETOXIFI- 94-338  | 2902        |    | Pa       | age 5 |
|-----|--|-------------|----|----------|-------|
| Pa  | Private School Questionnaire (See page 9 of the instructions.)  (To be completed ONLY by schools that checked the box on line 6 in Part IV)  |             |    |          |       |
| 29  | (To be completed ONLY by schools that checked the box on line 6 in Part IV)  Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, | N/A         | Τ, | Yes      | No    |
|     | other governing instrument, or in a resolution of its governing body?  |             | 29 |          | 110   |
| 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?  | _3          | 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   | 1.          | .  |          |       |
|     | 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.)         | <del></del> | 31 |          |       |
|     | The second described, if they predict explains (if you need more space, datasit a separate statement.)   |             |    |          |       |
| 32  | Does the organization maintain the following:  |             |    |          |       |
| а   | Records indicating the racial composition of the student body, faculty, and administrative staff?  | 3:          | 2a | -        |       |
| b   | Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory   |             | ,  |          |       |
| _   | basis?  Copies of all catalogues, brochures, announcements, and other written communications to the public dealing   | <u>3</u>    | 2b | $\dashv$ |       |
| С   | with student admissions, programs, and scholarships?   | 3:          | 2c |          |       |
| d   | Copies of all material used by the organization or on its behalf to solicit contributions?   |             | 2d |          |       |
|     |  |             | T  |          |       |
|     | If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement)  |             |    |          |       |
| 33  | Does the organization discriminate by race in any way with respect to:   |             |    |          |       |
| а   | Students' rights or privileges?  | 3:          | 3a |          |       |
| b   | Admissions policies?   | 3:          | 3ь |          |       |
| С   | Employment of faculty or administrative staff?   | 3:          | 3c |          |       |
| d   | Scholarships or other financial assistance?  | 3:          | 3d |          |       |
| е   | Educational policies?  | 3:          | 3e |          |       |
| f   | Use of facilities?   | 3:          | 3f | $\dashv$ |       |
| g   | Athletic programs?   |             | 3g | $\dashv$ |       |
| h   | Other extracurricular activities?  | 33          | 3h |          |       |
|     | If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)  |             |    |          |       |
| 84a | Does the organization receive any financial aid or assistance from a governmental agency?  | 34          | 4a |          |       |
| b   | Has the organization's right to such aid ever been revoked or suspended?   | 34          | 4b |          |       |
|     | If you answered "Yes" to either 34a or b, please explain using an attached statement.  |             |    |          |       |
| 35  | Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05  |             |    |          |       |

of Rev\_Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

| Sch        | edule A (Form 990 or 990-EZ) 2006           | NTERNATIONA  | L ACADEMY OF                              | DET        | OXI       | FI94            | -338                                  | 290        | <b>2</b> Page €   |
|------------|---|--|---|------------|-----------|-----------------|---------------------------------------|------------|---|
|            | art VI-A Lobbying Expend                    | litures by Electin   | g Public Charities(                       | See p      | age 1     | 0 of the ins    | _                                     |            |   |
|            |   |  | ible organization tha                     |            |           |                 | N/A                                   |            |   |
| <u>Che</u> | Limits or                                   | ngs to an affiliated ground to the service of the s | nditures                                  | o     ı    | ıf you c  | Affiliate       | id "limite<br>(a)<br>ed group<br>tals | d cont     | rol" provisions apply.  (b)  To be completed for all electing organizations |
| 36         | Total lobbying expenditures to influence    |  |   |            | 36        |                 |                                       |            |   |
|            | Total lobbying expenditures to influence    |  | , ,,                                      |            | 37        |                 |                                       |            |   |
|            | Total lobbying expenditures (add lines 3    | • • • •  | , , <b></b> ,                             |            | 38        |                 | -                                     |            |   |
|            | Other exempt purpose expenditures           | , and an ,   |   |            | 39        |                 |                                       |            |   |
|            | Total exempt purpose expenditures (ad-      | d lines 38 and 39)   |   |            | 40        | 1               |                                       |            |   |
|            | Lobbying nontaxable amount Enter the        | •  | ung table-                                |            |           | <u> </u>        |                                       |            | <del> </del>  |
|            | If the amount on line 40 is-                |  | ontaxable amount is-                      |            |           |                 |                                       |            |   |
|            | Not over \$500,000                          | 20% of the amount  |   |            |           |                 |                                       |            |   |
|            | Over \$500,000 but not over \$1,000,000     |  | of the excess over \$500,000              |            |           |                 |                                       |            |   |
|            | Over \$1,000,000 but not over \$1,500,000   | · ·  | of the excess over \$1,000,00             | 。 <b>卜</b> | 41        |                 |                                       |            |   |
|            | Over \$1,500,000 but not over \$17,000,000  | •  | of the excess over \$1,500,000            | 1          |           |                 |                                       |            | ***************************************                                     |
|            | Over \$17,000,000                           | \$1,000,000  | . , ,                                     |            |           |                 |                                       |            |   |
| 42         | Grassroots nontaxable amount (enter 2       |  |   | _          | 42        | Ī               |                                       |            |   |
| 43         | Subtract line 42 from line 36. Enter -0- if | f line 42 is more than lir   | ne 36                                     |            | 43        |                 |                                       |            |   |
| 44         | Subtract line 41 from line 38 Enter -0- if  | fline 41 is more than lir  | ne 38                                     |            | 44        |                 |                                       |            |   |
|            |   |  |   |            |           |                 |                                       |            |   |
|            | Caution: If there is an amount on either    | line 43 or line 44, you  | must file Form 4720.                      |            |           |                 |                                       |            |   |
|            |   | 4-Year Aver  | aging Period Under                        | Section    | on 50     | 1(h)            |                                       |            |   |
|            | (Some organization                          | ons that made a section  | n 501(h) election do not ha               | ve to co   | mplete    | all of the five | columns                               | below      | <b>'.</b>   |
|            |   | See the instructions for   | or lines 45 through 50 on p               | age 13 d   | of the in | structions.)    |                                       |            |   |
|            |   |  | Lobbying Expend                           | litures C  | During    | 4-Year Avera    | ging Pe                               | riod       |   |
|            | Calendar year (or                           | (a)  | (b)                                       | (          | (c)       |                 | (d)                                   |            | (e)   |
|            | fiscal year beginning in)                   | 2006   | 2005                                      | 20         | 004       |                 | 2003                                  |            | Total   |
|            |   |  |   |            |           |                 |                                       |            |   |
| <u>45</u>  | Lobbying nontaxable amount                  |  |   |            |           |                 |                                       | .,,,,,,,,, |   |
| 46         | Lobbying ceiling amount (150% of            |  | <b>!</b>                                  |            |           |                 |                                       |            |   |
|            | line 45(e))                                 |  |   |            |           |                 |                                       |            |   |
|            |   |  |   |            |           |                 |                                       |            |   |
| 47         | Total lobbying expenditures                 |  | +   |            |           |                 |                                       |            |   |
| 48         | Grassroots nontaxable amount                |  |   |            |           |                 |                                       |            |   |
|            | Grassroots ceiling amount (150% of          |  |   |            |           |                 |                                       |            |   |
|            | line 48(e))                                 |  |   |            |           |                 |                                       |            |   |
|            |   |  |   |            |           |                 |                                       |            |   |
|            | Grassroots lobbying expenditures            |  |   |            |           |                 |                                       |            |   |
| ۲          | art VI-B Lobbying Activity                  |  | Public Charities<br>s that did not comple | ata Da     | rt \/I_4  | 1) (See nad     | 12 A                                  | of the     | instructions )  |
|            | ing the year, did the organization attemp   |  |   |            |           | n) (See pa      | <u> </u>                              | 1          | instructions.)  |
|            | mpt to influence public opinion on a legis  |  |   | icidaling  | ally      |                 | Yes                                   | No         | Amount  |
|            | Volunteers                                  | siauve matter or referer   | iddin, anough the use of.                 |            |           |                 |                                       | х          |   |
| a          |   | moonsation in exponse  | es reported on lines a thro               | uch h ì    |           |                 |                                       | x          |   |
| b          |   | mpensadon in expense   | o reported on mies c allo                 | ugn II.)   |           |                 |                                       | X          |   |
| c<br>d     |   | ne public  |   |            |           |                 |                                       | X          |   |
| e          |   | •  |   |            |           |                 |                                       | X          |   |
| f          | Grants to other organizations for lobb      |  |   |            |           |                 |                                       | x          |   |
|            | Direct contact with legislators, their st   |  | als or a legislative body                 |            |           |                 |                                       | X          |   |
| g<br>h     | <b>5</b>                                    |  |   | ns         |           |                 |                                       | x          |   |
| i          | Total lobbying expenditures (Add lines      | •  | octaros, or any other meal                |            |           |                 |                                       |            | <del></del>   |
| •          | If "Yes" to any of the above, also attac    | - ·  | detailed description of the               | lobbvin    | ıq activı | ties.           | <b></b>                               |            |   |
|            |   |  |   |            |           |                 |                                       |            |   |

| P          | art VII      |                            |               | insfers To and Transaction ee page 13 of the instruction                        | s and Relationships With Noncharitabl               | е        |             |             |
|------------|--------------|----------------------------|---------------|---|---|----------|-------------|-------------|
| 51         | Did the repo |                            |               |   | h any other organization described in section       |          |             |             |
| ٠.         |              |                            | -             | organizations) or in section 527, re  |   |          |             |             |
| а          |              |                            |               | oncharitable exempt organization of   |   |          | Yes         | No          |
|            | (i) Cash     |                            |               | , 0   |   | 51a(i)   |             | X           |
|            | (ii) Other   | assets                     |               |   |   | a(ii)    |             | X           |
| b          | Other transa | actions:                   |               |   |   |          |             |             |
|            | (i) Sales    | or exchanges of assets     | s with a nonc | charitable exempt organization  |   | b(i)     |             | X           |
|            | (ii) Purch   | ases of assets from a r    | noncharitable | exempt organization   |   | b(ii)    |             | X           |
|            | , ,          | al of facilities, equipmen |               | sets  |   | b(iii)   |             | X           |
|            | • •          | bursement arrangemen       | ts            |   |   | b(iv)    |             | X           |
|            | , ,          | s or loan guarantees       |               | 6 d b-d-d-b   |   | b(v)     | -           | X           |
| _          |              |                            |               | or fundraising solicitations  |   | b(vi)    |             | X           |
| c<br>d     | -            |                            |               | ier assets, or paid employees<br>Nete the following schedule. Column            | (b) should always show the fair market value of the |          | !           |             |
| ŭ          |              | <del>-</del>               |               |   | tion received less than fair market value in any    |          |             |             |
|            | _            | _                          | -             | umn (d) the value of the goods, other   |   |          |             |             |
|            | (a)          | (b)                        |               | (c)   | (d)   |          |             |             |
|            | Line no      | Amount involved            | Name o        | f nonchantable exempt organization  | Description of transfers, transactions, and sharing | arrangem | ents        |             |
|            |              |                            |               |   |   |          |             |             |
| _ <u>N</u> | /A           |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   | -        |             |             |
|            |              |                            | <del> </del>  | <del></del>   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               | <del></del>   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
| _          |              |                            |               |   |   |          |             | -           |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              | ļ                          |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            | I- 4h        |                            | -41 651:-44   | with a related to one or recently   |   |          | _           |             |
| 52a        |              |                            |               | with, or related to, one or more tax-<br>nan section 501(c)(3)) or in section 5 |   | - 🗆 v    | s 2         | Z N         |
| h          |              | nplete the following sch   |               | tian section 30 f(c)(3)) or in section (  | 521:  | '' '     | -5 <u>-</u> | <b>3</b> 17 |
|            | 11 100, 0011 | (a)                        |               | (b)   | (c)   |          |             |             |
|            |              | Name of organization       |               | Type of organization  | Description of relationship                         |          |             |             |
|            | N/A          |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            | <del> </del>  |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            | <del></del>   |   | _   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |
|            |              |                            |               | ļ   |   |          |             |             |
|            |              |                            |               |   |   |          |             |             |

Totals

| IAD         | S 11/14/2007 3 42 PM        |               |                        |                   |                     |                  |                    |
|-------------|-----------------------------|---------------|------------------------|-------------------|---------------------|------------------|--------------------|
| F           | orms.                       |               | Mort                   | gages and Oth     | er Notes Payable    |                  | 0000               |
| 9           | 90 / 990-PF                 | For calor     | ndar year 2006, or ta  | y year heginning  | , and ending        |                  | 2006               |
| Nan         | ne                          | 1 to cale     | iluai yeai 2000, oi ta | ix year beginning | , and ending        | Employer Ider    | ntification Number |
|             | NTERNATIONAL                |               |                        | OXIFI-            |                     | 04 2206          |                    |
|             | CATION SPECIA               | TISIS         |                        |                   |                     | 94-3382          | 2902               |
| <b>F</b>    | FORM 990, PAR               | RT IV,        | LINE 64B               | - ADDITIONA       | L INFORMATION       |                  | <del></del>        |
|             |                             | Name of       | f lender               |                   | Relationship to dis | qualified person |                    |
| (1)         | F.A.S.E.                    |               |                        |                   | NONE                |                  |                    |
| <u>(2)</u>  |                             |               |                        |                   |                     |                  |                    |
| (3)<br>(4)  |                             |               |                        |                   |                     |                  | ···                |
| (5)         |                             |               |                        |                   |                     |                  |                    |
| (6)         |                             |               |                        |                   |                     |                  |                    |
| <u>(7)</u>  |                             |               |                        |                   |                     | <u> </u>         |                    |
| <u>(8)</u>  |                             |               |                        |                   |                     |                  |                    |
| (9)<br>(10) | )                           |               |                        |                   |                     |                  |                    |
|             |                             | ······        |                        |                   | T                   |                  |                    |
|             | Original amount<br>borrowed |               | Date of loan           | Maturity<br>date  | Repayment terms     |                  | Interest rate      |
| (1)         | 10,7                        | 80            | 12/31/06               | 4/30/07           | ONE OR BEFORE 04/3  | 30/07            | 0.000              |
| <u>(2)</u>  | <del> </del>                |               |                        |                   |                     |                  |                    |
| (3)         |                             |               |                        |                   |                     | <del></del>      |                    |
| (4)<br>(5)  |                             |               |                        |                   |                     |                  |                    |
| (6)         |                             |               |                        |                   |                     |                  |                    |
| <u>(7)</u>  |                             |               |                        |                   |                     |                  |                    |
| (8)         |                             |               |                        |                   | ·                   |                  |                    |
| (9)<br>(10) |                             | 1             |                        |                   |                     |                  |                    |
| 7.07        |                             |               |                        |                   | <u> </u>            |                  |                    |
|             | 9.0                         |               | ided by borrower       |                   | Purpose o           | floor            | · · · · · ·        |
| <u>(1)</u>  | NONE                        | curity provi  | ided by borrower       |                   | Pulpose o           |                  |                    |
| (2)         |                             |               |                        |                   |                     |                  |                    |
| <u>(3)</u>  |                             |               |                        |                   |                     |                  |                    |
| <u>(4)</u>  |                             |               |                        |                   |                     |                  | <del></del>        |
| (5)<br>(6)  |                             |               |                        |                   |                     |                  |                    |
| (7)         |                             |               |                        |                   |                     |                  |                    |
| <u>(8)</u>  |                             |               |                        |                   | <u>.</u>            |                  |                    |
| <u>(9)</u>  |                             |               |                        |                   |                     |                  |                    |
| <u>(10)</u> | <u> </u>                    |               |                        |                   | <u> </u>            |                  |                    |
|             |                             |               |                        |                   | Balance due at      |                  | nce due at         |
|             |                             |               | shed by lender         |                   | beginning of year   | en               | d of year          |
| <u>(1)</u>  | CASH OF \$1                 | <u>.0,780</u> |                        |                   |                     |                  | 10,780             |
| (2)         | <del>-</del>                |               |                        |                   |                     |                  |                    |
| (3)<br>(4)  |                             |               |                        |                   |                     |                  |                    |
| (5)         |                             |               |                        |                   |                     |                  |                    |
| <u>(6)</u>  |                             |               |                        |                   |                     |                  |                    |
| <u>(7)</u>  | <del></del>                 |               | <del></del>            |                   | <del> </del>        | <del> </del>     |                    |
| (8)<br>(9)  |                             |               |                        |                   | <u> </u>            |                  |                    |
| (10)        |                             |               |                        |                   |                     |                  |                    |

10,780

IADS INTERNATIONAL ACADEMY OF DETOXIFI-

FYE: 12/31/2006

94-3382902

**Federal Statements** 

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

| Description | Amount   | _           |
|-------------|----------|-------------|
| MEMBERSHIPS | \$ 2,000 | )           |
| TOTAL       | \$ 2,000 | _<br>)<br>= |

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IADS INTERNATIONAL ACADEMY OF DETOXIFI-

**Federal Statements** 

FYE: 12/31/2006 94-3382902

|                             | Statement 2 - Form 990, Part II, Line 22b - Other Grants and Allocations     | Part II, Line 22b -     | Other Grants an      | d Allocations    |                | •              |
|-----------------------------|--|-------------------------|----------------------|------------------|----------------|----------------|
| Name<br>Address             | Rek<br>t   | Relationship<br>to Org  | Class of<br>Activity |                  |                |                |
| Date of Gift                | Description of Property  | Cash<br>Contrib         | NonCash<br>Contrib   | Book<br>Value    | BV<br>Explantn | FMV<br>Explntn |
| RESEARCH FDN UNIV OF ALBANY |  |                         | OX PGM RES           | ARCH             |                |                |
| 1 UNIVERSITY PLACE          |  | \$ 000 <b>1</b> 07 \$   | ሱ                    |                  |                | •              |
| RENSSELAER NY 12144         |  |                         |                      |                  |                |                |
| VARIOUS CONTRACTORS         | NONE   | 0 F A A                 | DETOX FACIL BUILDOUT | ILDOUT           |                |                |
| VAR                         |  | 94.0                    |                      |                  |                |                |
| TOTAL                       |  | \$ 28,544               | \$ 0                 | 0                |                |                |
|                             | Statement 3 - Form 990, Part II, Line 25a - Compensation of Current Officers | art II, Line 25a - C    | ompensation of (     | Surrent Officers |                |                |
| Name                        | Program<br>Services  | Management &<br>General |                      | Fundraising      |                |                |

EXPENSES

CAROLYN HAMAKER COMPENSATION

TOTAL

28,087

14,043

28,087

14,043

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IADS INTERNATIONAL ACADEMY OF DETOXIFI-

94-3382902

# **Federal Statements**

FYE: 12/31/2006

# Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses

| Description                   | Total<br>Expense | es     | Program<br>Service | Mgt &<br>General | Fund-<br>Raising |
|-------------------------------|------------------|--------|--------------------|------------------|------------------|
|                               | \$               | \$     |                    | \$               | \$               |
| EXPENSES                      |                  |        |                    |                  |                  |
| BANK AND CC MERCHANT FEES     | 4,               | 864    |                    | 4,864            |                  |
| INSURANCE                     | 6,               | 845    | 3,684              | 3,161            |                  |
| LABORATORY TESTING            | 5,               | 909    | 5,909              |                  |                  |
| LICENSE, FEES & TAXES         | 1,               | 500    |                    | 1,500            |                  |
| MEDICAL CONSULTING SERVICES   | 131,             | 468    | 131,468            |                  |                  |
| PROFESSIONAL FEES             | 16,              | 274    | 9,524              |                  | 6,750            |
| PROJECT SUPPORT/RSRCH COORD   | 58,              | 159    | 19,387             | 19,386           | 19,386           |
| PROMOTION, PR & MARKETING     | 3,               | 052    |                    | 213              | 2,839            |
| REPAIRS & MAINTENANCE         | 30,              | 972    | 29,364             | 1,608            |                  |
| RESEARCH CONSULTING SERVICES  | 25,              | 134    | 25,134             |                  |                  |
| STAFF TRAINING                | 1,               | 979    | 1,979              |                  |                  |
| TECHNICAL CONSULTING SERVICES | 32,              | 884    | 32,884             |                  |                  |
| UTILITIES                     | 20,              | 626    | 20,626             |                  |                  |
| TOTAL                         | \$ 339,          | 666 \$ | 279,959            | \$ 30,732        | \$ 28,975        |

IADS INTERNATIONAL ACADEMY OF DETOXIFI-

**Federal Statements** 

FYE: 12/31/2006

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## Statement 5 - Form 990, Part III - Organization's Primary Exempt Purpose

THE PRIMARY PURPOSE OF THE ACADEMY IS TO PROVIDE INFORMATION TO PHYSICIANS, PUBLIC HEALTH SPECIALISTS, RESEARCHERS, HEALTH CARE PROVIDERS AND OTHERS INTERESTED IN IMPLEMENTING THE DETOXIFICATION PROCEDURE DEVELOPED BY L. RON HUBBARD TO TREAT THE EFFECTS OF CHEMICAL EXPOSURES AND DRUG ABUSE.

THE ACADEMY ALSO SUPPORTS EFFORTS BY ITS MEMBERS TO ASSIST PUBLIC HEALTH OFFICIALS AND HEALTH CARE PROVIDERS TO IMPLEMENT DETOXIFICATION ON A HUMANITARIAN BASIS. IN 2005, THE ACADEMY ALSO BEGAN ITSELF TO OPERATE A CLINIC FOR DELIVERY OF THE DETOXIFICATION PROCEDURE ON A HUMANITARIAN BASIS.

## INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS #94-3382902 ATTACHMENT TO FORM 990 2006

## STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

## **Description of Program Services**

The International Academy of Detoxification Specialists was formed by individuals interested in the implementation of the detoxification program developed by L. Ron Hubbard to addressing the growing public health threat resulting from the proliferation of synthetic chemicals in the environment and the food chain, as well as the abuse of both prescription and illicit drugs.

Despite the steady accumulation of data regarding the adverse health effects resulting from human contamination by these substances, modern medicine has almost nothing to offer those who have been harmed by chemical contamination. This has been dramatically evident in the aftermath of the exposure of tens of thousands of rescue workers during the WTC rescue and recovery operations, where a large population has manifested continuously declining health.

Addiction may be an even greater public health disaster; according to scientists at Brandeis University, untreated addiction (including smoking) costs the US \$400 billion each year. In recent years, researchers have begun to notice that drug residues and chemicals that have lodged in body tissue have similar impacts on health. The three international conferences that the Academy has organized were among the first large-scale meetings to address this issue.

Academy membership consists largely of physicians, drug rehabilitation personnel, health care personnel, health advocates and others who share concern regarding these problems and a conviction that detoxification has a place in the public health response to them.

## New York Rescue Workers Detoxification Project

Since 1981, the results of detoxification studies and pilot projects have been presented in peer-reviewed journal and at scientific meetings, and reported in professional publications. A number of these papers and presentations have related to the use of detoxification to relieve the adverse health effects suffered by firefighters exposed to the toxic by-products of building fires.

Consequently, within weeks of the attacks on the World Trade Center, members of the Academy began to receive calls from firefighters and union officials interested in detoxification. Academy members first traveled to New York in January 2002, to gain a first-hand view of the situation and the need for rehabilitation.

The New York Rescue Workers Detoxification Project was formed to respond to requests from the rescue worker community to bring detoxification to a clinic in Manhattan. The city and state were facing their worst budget crisis in decades, straining to meet the demands of an unprecedented public

health emergency. At the recommendation of project advisors, a fund was established that could receive donations to cover the costs of treatment. The hundreds of donors to this fund include individual philanthropists, foundations, corporations and government.

The project opened its doors to rescue workers in September, 2002. Since that time, nearly 900 men and women have completed detoxification under the supervision of project physicians. In 2006, the project provided services to 249 individuals.

Participants routinely experience dramatic, if not complete, alleviation of a range of symptoms associated with toxic exposures, including: inability to sleep, mood swings, fatigue, muscle and joint aches and pains, difficulty breathing, decreased mental acuity and "post traumatic stress." As a result, they are able to discontinue the use of medications that have been prescribed with the hope that they will suppress their symptoms and make daily life bearable.

As a result, the project has the strong support of numerous rescue worker unions, whose primary desire is quality of life and job fitness for their members.

## **Utah Meth Cops Project**

America's epidemic of methamphetamine abuse, and the illegal manufacture of the drug, has created significant challenges for law enforcement. Increasingly, police officers who participate in raids on illegal meth labs, are exposed to both the drug and the toxic chemicals used in its manufacture. As might be expected, these illegal and unregulated "labs" place no emphasis on safe storage or use of materials.

Officers who suffer such toxic assaults are manifesting the same health problems that have long been associated with other occupational and environmental chemical exposures. Recognizing this, the Utah attorney general contacted the Academy regarding the possibility of establishing a facility where detoxification could be provided to the state's "meth cops." In 2006, Academy members traveled to Utah for preliminary meetings regarding such a project.

## Maryland Detoxification Project

Aware of the results achieved by the New York project, a group of urban fire services personnel in Maryland contacted the Academy and requested that a pilot project be established to evaluate the use of detoxification as a rehabilitative service for firefighters exposed to the toxic by-products of urban fires. The pilot was completed, with several individuals achieving significant benefits from detoxification. Implementation of the findings and recommendations resulting from the pilot are underway.

## Other Program Services

On a routine basis, the Academy provides information to healthcare professionals interested in learning more about detoxification research projects and pilot programs, and in establishing facilities that provide the Hubbard program. In 2006, these included individuals in the U.S., Greece, Egypt and the United Kingdom.

# INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS

FINANCIAL STATEMENTS

December 31, 2006

# INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS

# Index to Financial Statements

# December 31, 2006

|  | Page No. |
|--|----------|
| Independent Auditor's Report   | 1        |
| Statement of Assets, Liabilities and Net Assets – Cash Basis as of December 31, 2006 and 2005                              | 2        |
| Statement of Support, Expenses and Other Changes in Net Assets – Cash Basis for the Years Ended December 31, 2006 and 2005 | 3        |
| Notes to Financial Statements  | 4        |
| Independent Auditor's Report on Supplementary Information  | 7        |
| Supplementary Information: Schedule of Functional Expenses – Cash Basis for the Years Ended December 31, 2006 and 2005     | 8        |

## ROLAND W. FINK, CPA

ACCOUNTING & TAX SERVICES · BUSINESS & FINANCIAL CONSULTING
2441 HONOLULU AVE., SUITE 126
MONTROSE, CA 91020

PHONE: (818) 249-4577 FAX: (818) 745-1291

#### INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees International Academy of Detoxification Specialists

I have audited the accompanying statement of assets, liabilities and net assets - cash basis of the International Academy of Detoxification Specialists (a California non-profit public benefit corporation) as of December 31, 2006 and 2005, and the related statements of support, expenses and other changes in net assets - cash basis for the years then ended. These financial statements are the responsibility of the Organization's management. My responsibility is to express an opinion on these financial statements based on my audits.

I conducted my audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that I plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. I believe that my audits provide a reasonable basis for my opinion.

As described in Note 1, these financial statements were prepared on the cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles.

Roband W Sent CPA

In my opinion, the financial statements referred to above present fairly, in all material respects, the assets, liabilities, and net assets of the International Academy of Detoxification Specialists as of December 31, 2006 and 2005, and its support, expenses and other changes in net assets for the years then ended on the basis of accounting described in Note 1.

November 14, 2007

# **INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS**STATEMENT OF ASSETS, LIABILITIES AND NET ASSETS - CASH BASIS

## As of December 31, 2006 and 2005

|                                  |           | Decem  | ıber      | 31      |
|----------------------------------|-----------|--------|-----------|---------|
|                                  |           | 2006   |           | 2005    |
| <u>ASSETS</u>                    |           |        |           |         |
| Current Assets:                  |           |        |           |         |
| Cash and cash equivalents        | <u>\$</u> | 17,602 | \$        | 123,583 |
| Total Assets                     | <u>\$</u> | 17,602 | <u>\$</u> | 123,583 |
|                                  |           |        |           |         |
| LIABILITIES AND NET ASSETS       |           |        |           |         |
| Current Liabilities:             |           |        |           |         |
| Loan payable                     | <u>\$</u> | 10,780 | <u>\$</u> |         |
|                                  |           |        |           |         |
| Net Assets:                      |           |        |           |         |
| Unrestricted                     |           | 6,822  |           | 33,344  |
| Temporarily restricted           |           | -      |           | 90,239  |
| Total Net Assets                 |           | 6,822  | ·         | 123,583 |
| Total Liabilities and Net Assets | \$        | 17,602 | \$        | 123,583 |

The accompanying notes are an integral part of these financial statements.

# INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS

# STATEMENT OF SUPPORT, EXPENSES AND OTHER CHANGES IN NET ASSETS - CASH BASIS

# For the Years Ended December 31, 2006 and 2005

|  | 2006       | 2005              |
|--|------------|-------------------|
| UNRESTRICTED NET ASSETS                                |            |                   |
| Support - unrestricted                                 | \$ 794,560 | \$ 1,108,340      |
| Net assets released from restriction                   | 265,137    | 773,226           |
| Interest income  | 107        | 152               |
| Total Support and Net Assets Released from Restriction | 1,059,804  | 1,881,718         |
| Program Expenses -                                     |            |                   |
| New York Rescue Workers Detoxification Project:        |            |                   |
| Grants and allocations                                 | 28,544     | 550,649           |
| Other program-related expenses                         | 777,070    | 670,154           |
| Total Program Expenses                                 | 805,614    | 1,220,803         |
| Administrative Expenses                                | 118,332    | 178,162           |
| Fund-raising Expenses                                  | 162,380    | 340,961           |
| Total Expenses   | 1,086,326  | 1,739,926         |
| Increase (Decrease) in Unrestricted Net Assets         | (26,522)   | 141,792           |
| TEMPORARILY RESTRICTED NET ASSETS                      |            |                   |
| Support - temporarily restricted                       | 174,898    | 750,465           |
| Net assets released from restriction                   | (265,137)  | (773,226)         |
| Decrease in Temporarily Restricted Net Assets          | (90,239)   | (22,761)          |
| Increase (Decrease) in Total Net Assets                | (116,761)  | 119,031           |
| NET ASSETS, beginning of year                          | 123,583    | 4,552             |
| NET ASSETS, end of year                                | \$ 6,822   | <u>\$ 123,583</u> |

The accompanying notes are an integral part of these financial statements.

# INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS NOTES TO FINANCIAL STATEMENTS

# NOTE 1 – BACKGROUND AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

## Background -

The International Academy of Detoxification Specialists, a California non-profit public benefit corporation (hereinafter "IADS" or the "Organization"), was incorporated in 1999. The Organization's primary purpose is to conduct and support research and education regarding the use of the detoxification procedure developed by L. Ron Hubbard to address the effects of environmental chemical contamination, occupational exposures and drug abuse The Organization is tax exempt under Section 501(c)(3) of the Internal Revenue Code.

In 2002 the New York Rescue Workers Detoxification Project was formed in response to requests from union officials and rescue workers that detoxification be made available to firefighters, paramedics, police and other rescue workers present at the World Trade Center site. On this project, in addition to its research and education activities, IADS assists and supports public health officials and health care providers to deliver the detoxification procedure to New York rescue workers on a humanitarian basis.

## Basis of Presentation -

The accompanying financial statements have been prepared under the cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles ("GAAP"). The principal differences between GAAP and the cash basis are that, under GAAP, support is generally recorded when pledged rather than when collected, and expenses and grants to others are generally recorded when incurred or committed to rather than when paid. Additionally, under the cash basis no statement of cash flows is presented.

## Restricted Support —

Grants and contributions of cash or other assets are recorded as temporarily restricted support if they are received with donor stipulations regarding their use. When a donor-imposed restriction expires, that is, when a stipulated time restriction ends or stipulated purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of support, expenses and other changes in net assets as net assets released from restriction.

## Functional Allocation of Expenses -

The Organization allocates direct costs incurred to its respective program, administrative, or fund-raising expense category. Indirect costs are allocated based on management's estimate of the relative effort expended.

# INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS NOTES TO FINANCIAL STATEMENTS

(continued)

## Cash and Cash Equivalents -

Cash and cash equivalents includes all monies deposited in banks and highly liquid investments with maturity dates of three months or less.

## Restatement -

Certain amounts included in the accompanying financial statements for the year ended December 31, 2005 have been reclassified to conform to the current presentation.

#### NOTE 2 – LOAN PAYABLE

At December 31, 2006, the Organization had borrowed a total of \$10,780 from another non-profit organization. The loans bore no interest and were due and payable on or before April 30, 2007, and were repaid in full by that date.

#### NOTE 3 – CONCENTRATIONS OF CREDIT RISK

From time to time during the year ended December 31, 2006, the Organization's cash balances in banks exceeded the federally insured limits. There were no cash balances in excess of the federally insured limits at December 31, 2006. Management does not believe this issue to be of concern.

## NOTE 4 - CONCENTRATIONS OF SUPPORT

During the year ended December 31, 2006 the Organization received approximately 21% of its support from a co-founder and major contributor. During the year ended December 31, 2005, the organization received approximately 15% of its support from a governmental entity, and 13% from a public charity. As it is always considered reasonably possible that any contributor or public funding source could be lost, it therefore must also be considered that the Organization's ability to carry out its purposes could be impaired by such a loss. Management believes that the Organization's fundraising efforts subsequent to December 31, 2006 have been and will continue to be successful, including obtaining a substantial number of new contributors, and that the impact of the loss of any major contributor would be mitigated by contributions from these new contributors or other sources identified by its ongoing fundraising efforts.

# INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS NOTES TO FINANCIAL STATEMENTS

(continued)

## NOTE 5 - COMMITMENTS AND CONTINGENCIES

The Organization entered into an agreement with the Foundation for Advancements in Science and Education ("FASE"), a California non-profit public benefit corporation tax-exempt under Section 501(c)3 of the Internal Revenue Code, which organization was involved in founding IADS and with which IADS shares office facilities, to provided certain support to the New York Rescue Workers Detoxification Project. The agreement specifies that FASE' compensation shall be in accordance with the project's budget as it may exist from time to time, and that payment thereof is subject to the availability of funds. Total payments to FASE under this agreement were \$47,327 in 2006 and \$101,088 in 2005.

Effective January 1, 2004, the Organization entered into an agreement with the Association for Better Living and Education ("ABLE"), a non-profit public benefit corporation tax-exempt under Section 501(c)(3) if the Internal Revenue Code. In exchange for certain management, program and fundraising support provided by ABLE as specified in the agreement, the Organization has agreed to pay ABLE an amount generally equal to 5% of contributions received. The agreement is subject to automatic annual renewal, but may be terminated by either party upon thirty days' notice. A total of \$10,832 and \$38,832 was paid to ABLE in 2006 and 2005, respectively, pursuant to this agreement.

The Organization is obligated under a long-term non-cancelable operating lease for its detoxification facility in New York, which expired September 30, 2007. Minimum rentals due under the lease were \$49,748 in 2007. As of November 14, 2007, the date of these financial statements, the Organization intends to renew the lease effective October 1, 2007 at a monthly minimum rental of \$9,172 through September 30, 2008.

Total rentals under all operating leases included in expense in the accompanying statement of activities were \$137,527 in 2006 and \$84,500 in 2005.

## NOTE 6 – NON-CASH TRANSACTIONS

During 2005, a total of \$280,000 in short-terms loans were forgiven by contributors and converted to contributions received.

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## INDEPENDENT AUDITOR'S REPORT ON SUPPLEMENTARY INFORMATION

To the Board of Trustees International Academy of Detoxification Specialists

My report on my audit of the basic financial statements of the International Academy of Detoxification Specialists for 2006 and 2005 appears on Page 1. I conducted my audits in accordance with auditing standards generally accepted in the United States of America for the purpose of forming an opinion on the basic financial statements taken as a whole. The schedule of functional expenses is presented for supplementary analysis and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in my opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

November 14, 2007

# INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS SCHEDULE OF FUNCTIONAL EXPENSES - CASH BASIS

For the Years Ended December 31, 2006 and 2005

|   |            | 2006           | 90           |              |              | 2005           | )5           | ,            |
|---|------------|----------------|--------------|--------------|--------------|----------------|--------------|--------------|
|   | Program    | Administrative | Fund-raising |              | Program      | Administrative | Fund-raising |              |
|   | Expenses   | Expenses       | Expenses     | Total        | Expenses     | Expenses       | Expenses     | Total        |
| Accounting and audit services                   | ·<br>&     | \$ 8,030       | <del>S</del> | \$ 8,030     | -<br>-       | \$ 13,564      | \$           | \$ 13,564    |
| Bank and credit card merchant fees              | •          | 4,864          | •            | 4,864        | •            | 5,776          | •            | 5,776        |
| Conferences, conventions and meetings           | 1,000      | •              | 5.401        | 6,401        | 5,463        | 601            | 176,958      | 183,022      |
| Grants for delivery of detoxification procedure | 8,544      | •              | •            | 8,544        | 550,649      | •              | •            | 550.649      |
| Grants for research                             | 20,000     | 1              | •            | 20,000       | •            | •              | •            | •            |
| Insurance                                       | 3,684      | 3,161          | •            | 6,845        | •            | 2,891          | •            | 2,891        |
| Laboratory testing                              | 5,909      | •              | •            | 5,909        | 8,037        | •              | •            | 8,037        |
| Legal fees                                      | 683        | 4,809          | 25           | 5,517        | •            | 17,738         |              | 17,738       |
| Licenses, fees and taxes                        | 1          | 1,500          | •            | 1,500        | •            | 1,470          | •            | 1,470        |
| Medical consulting services                     | 131,468    | •              | •            | 131,468      | 88,456       | •              | •            | 88,456       |
| Payroll taxes                                   | 25,963     | 3,318          | 6,247        | 35,528       | 18,697       | 1,330          | 776          | 20,803       |
| Postage and shipping                            | •          | 5.972          | ı            | 5.972        | 4,350        | 3,426          | 3,427        | 11,203       |
| Printing and publications                       | 2,050      | 1.016          | 40,572       | 43,638       | 15,286       | 5,471          | 4,676        | 25,433       |
| Professional tees                               | 9,524      | •              | 6,750        | 16,274       | 3.712        | 16.486         | 34,752       | 54,950       |
| Project support and research coordination       | 19,387     | 19 386         | 19.386       | 58,159       | 46,593       | 46,593         | 46,734       | 139,920      |
| Promotion, public relations & marketing         |            | 213            | 2.839        | 3,052        | •            | 10,000         | 10,141       | 20,141       |
|   | 137.527    | ,              | •            | 137,527      | 84,500       | •              | •            | 84,500       |
| Repairs & maintenance                           | 29,364     | 1.608          | •            | 30.972       | 9,574        | 1              | 1            | 9,574        |
| Research consulting services                    | 25.134     | •              | 1            | 25,134       | 1,389        | •              | •            | 1,389        |
| Salaries and wages                              | 257,544    | 32.918         | 61,964       | 352,426      | 183,907      | 24,690         | 14.400       | 222,997      |
| Staff training                                  | 1,979      | •              | ı            | 1.979        | 950          | •              | •            | 950          |
| Supplies  | 53,973     | 13,941         | 2.898        | 70.812       | 30.602       | 8,135          | 4,374        | 43,111       |
| Technical consulting services                   | 32.884     | •              | •            | 32.884       | 120,185      | ,              |              | 120,185      |
|   | 18,371     | 17.596         | 16.298       | 52,265       | 44,526       | 16.61          | 44,723       | 109,240      |
|   | 20.626     | .              | •            | 20.626       | 3,927        | •              | 1            | 3,927        |
| Total   | \$ 805,614 | \$ 118,332     | \$ :62.380   | \$ 1,086,326 | \$ 1,220,863 | \$ 178,162     | \$ 340.961   | \$ 1.739,926 |

See Independent Auditor's Report on Supplementary Information