

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)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

B Check if applicable:

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization Southern Humboldt Community Park			D Employer identification number 75-3073362	
Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	E Telephone number	
P.O. Box 185			(707) 923-4022	
City or town	State or country	ZIP + 4	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	
Garberville	CA	95542-0185	<input type="checkbox"/> Other (specify) ▶	

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

H and I are not applicable to section 527 organizations

- H(a) Is this a group return for affiliates? Yes No
- H(b) If "Yes," enter number of affiliates ▶
- H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
- H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶ www.sohumpark.org

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

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

I Group Exemption Number ▶

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 102,147

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

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

SCANNED JUL 06 2007

1 Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a	0	
b	Direct public support (not included on line 1a)	1b	35,252	
c	Indirect public support (not included on line 1a)	1c	0	
d	Government contributions (grants) (not included on line 1a)	1d	4,863	
e	Total (add lines 1a through 1d) (cash \$ 38,627 noncash \$ 1,488)	1e		40,115
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		25,792
3	Membership dues and assessments	3		0
4	Interest on savings and temporary cash investments	4		0
5	Dividends and interest from securities	5		0
6 a	Gross rents	6a		
b	Less: rental expenses	6b		
c	Net rental income or (loss). Subtract line 6b from line 6a	6c		0
7	Other investment income (describe)	7		0
8 a	Gross amount from sales of assets other than inventory	(A) Securities	0	(B) Other
b	Less: cost or other basis and sales expenses	8a	0	0
c	Gain or (loss) (attach schedule)	8b	0	0
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8c	0	0
8d		8d		0
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
a	Gross revenue (not including \$ 0 of contributions reported on line 1b)	9a	0	
b	Less: direct expenses other than fundraising expenses	9b	0	
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c		0
10 a	Gross sales of inventory, less returns and allowances	10a	0	
b	Less: cost of goods sold	10b	0	
c	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c		0
11	Other revenue (from Part VII, line 103)	11		36,240
12	Total revenue. Add lines 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		102,147
13	Program services (from line 44, column (B))	13		107,087
14	Management and general (from line 44, column (C))	14		9,623
15	Fundraising (from line 44, column (D))	15		2,889
16	Payments to affiliates (attach schedule)	16		0
17	Total expenses. Add lines 13 through 16	17		119,599
18	Excess or (deficit) for the year. Subtract line 17 from line 12	18		-17,452
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		347,470
20	Other changes in net assets or fund balances (attach explanation)	20		0
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		330,018

Handwritten initials/signature

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 a	Grants paid from donor advised funds (attach schedule) (cash \$ 0 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
22 b	Other grants and allocations (attach schedule) (cash \$ 0 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0			
25 a	Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule)	0	0	0	0
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	0	0	0	0
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b, and c	6,365	6,365		
27	Pension plan contributions not included on lines 25a, b, and c	0			
28	Employee benefits not included on lines 25a - 27	0			
29	Payroll taxes	2,623	2,623		
30	Professional fundraising fees	0			
31	Accounting fees	2,137		2,137	
32	Legal fees	520		520	
33	Supplies	460	427	8	25
34	Telephone	953	953		
35	Postage and shipping	95		95	
36	Occupancy	8,219	4,953	3,266	
37	Equipment rental and maintenance	1,466	1,466		
38	Printing and publications	413		127	286
39	Travel	0			
40	Conferences, conventions, and meetings	0			
41	Interest	23,225	23,225		
42	Depreciation, depletion, etc (attach schedule) Stmt, #1	26,501	26,501	0	0
43	Other expenses not covered above (itemize)				
a	Professional Contracted Services	37,068	34,050	3,018	0
b	Other Rents, Repairs & Maint.	5,037	4,997	40	0
c	Advertising/Promotional	2,428	0	0	2,428
d	Permits & Fees	472	100	372	0
e	Taxes	1,408	1,408	0	0
f	Bank & Finance Charges	59	19	40	0
g	Fundraising Expense	150	0	0	150
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	119,599	107,087	9,623	2,889

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ 0 ; (ii) the amount allocated to Program services \$; (iii) the amount allocated to Management and general \$; and (iv) the amount allocated to Fundraising \$

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

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

What is the organization's primary exempt purpose? ▶ See Attached Statement #2	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others)
<p>a Community Park - Fund established for the aquisition, development & management of 380 acres for a community park to serve the general public. During 2006, the farm cooperative continued to produce food and again had a pumpkin patch for children to pick pumpkins at Halloween. There was a "Walk for the Park" event to promote the rebuilding of the old children's playground at Tooby Park, which continues to be refurbished. The park continued to promote public and educational use of the park by holding community events and weekend nature walks.</p> <p>(Grants and allocations \$ 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	107,087
<p>b</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	
<p>c</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	
<p>d</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	
<p>e Other program services (attach schedule)</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	0
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶</p>	107,087

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	6,703	45	19,181
	46 Savings and temporary cash investments	75	46	75
	47 a Accounts receivable	47a 0		
	b Less: allowance for doubtful accounts	47b 0	0	47c 0
	48 a Pledges receivable	48a 0		
	b Less: allowance for doubtful accounts	48b 0	0	48c 0
	49 Grants receivable			49
	50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		0	50a 0
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b
	51 a Other notes and loans receivable (attach schedule)	51a 0		
	b Less: allowance for doubtful accounts	51b 0	0	51c 0
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges		805	53 0
	54 a Investments—publicly-traded securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54a 0
	b Investments—other securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54b 0
	55 a Investments—land, buildings, and equipment: basis	55a 0		
	b Less: accumulated depreciation (attach schedule)	55b 0	0	55c 0
	56 Investments—other (attach schedule)		0	56 0
	57 a Land, buildings, and equipment: basis (Cost)	57a 1,334,826		
b Less: accumulated depreciation (attach schedule) Statement #3	57b 137,798	1,213,750	57c 1,197,028	
58 Other assets, including program-related investments (describe <input type="checkbox"/> Insurance Premium on Deposit)		954	58 751	
59 Total assets (must equal line 74). Add lines 45 through 58		1,222,287	59 1,217,035	
Liabilities	60 Accounts payable and accrued expenses	47,962	60	47,938
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule) Statement #4	93,900	63	93,900
	64 a Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b Mortgages and other notes payable (attach schedule) Statement #5	730,955	64b	743,179
	65 Other liabilities (describe <input type="checkbox"/> Rental Deposit)	2,000	65	2,000
66 Total liabilities. Add lines 60 through 65		874,817	66 887,017	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	327,756	67	315,113
	68 Temporarily restricted	19,714	68	14,905
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21).	347,470	73	330,018
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73.	1,222,287	74	1,217,035

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	N/A
b	Amounts included on line a but not on Part I, line 12:		
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):	b4	0
	Add lines b1 through b4	b	0
c	Subtract line b from line a	c	0
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	0
	Add lines d1 and d2	d	0
e	Total revenue (Part I, line 12). Add lines c and d	e	0

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	N/A
b	Amounts included on line a but not on 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	0
	Add lines b1 through b4	b	0
c	Subtract line b from line a	c	0
d	Amounts included on Part I, line 17, but not on line a:		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	0
	Add lines d1 and d2	d	0
e	Total expenses (Part I, line 17). Add lines c and d	e	0

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name Timothy A. Metz Str 1593 Old Briceland City Garberville ST CA ZIP 95542	Title President Hr/WK 2	0	0	0
Name Kathryn Lobato Str P O. Box 1824 City Redway ST CA ZIP 95560	Title Secretary Hr/WK 2	0	0	0
Name Peter R. Ryce Str P O. Box 1205 City Redway ST CA ZIP 95560	Title Treasurer Hr/WK 2	0	0	0
Name Elizabeth Arnoul Str P O. Box 1778 City Redway ST CA ZIP 95560	Title Board Member Hr/WK 2	0	0	0
Name Doug Wallace Str P.O. Box 1625 City Redway ST CA ZIP 95560	Title Board Member Hr/WK 2	0	0	0
Name Stephen Dazey Str P.O. Box 168 City Garberville ST CA ZIP 95542	Title Operations Mgr. Hr/WK 5	0	0	0
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)		Yes	No
75 a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 5		
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	X
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization " If "Yes," attach a statement that includes the information described in the instructions.	75c	X
d	Does the organization have a written conflict of interest policy?	75d	X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any form officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP	None			
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				

Part VI Other Information (See the instructions.)		Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct and indirect political expenditures (See line 81 instructions.) 0	81a	
b	Did the organization file Form 1120-POL for this year?	81b	X

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III.)		
82b Undetermined			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83 b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84 b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85 a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?	N/A	
85 b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	N/A	
85 c	Dues, assessments, and similar amounts from members	N/A	
85 d	Section 162(e) lobbying and political expenditures	N/A	
85 e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
85 f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
85 g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
85 h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86 a	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	N/A	
86 b	Gross receipts, included on line 12, for public use of club facilities	N/A	
87 a	501(c)(12) orgs. Enter: a Gross income from members or shareholders	N/A	
87 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	N/A	
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
88 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		X
89 a	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		
89 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		X
89 c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	0	
89 d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	0	
89 e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
89 f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
89 g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
89 g		N/A	
90 a	List the states with which a copy of this return is filed CA		
90 b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)		2
91 a	The books are in care of Courtois Accounting Services Telephone no. (707) 923-4123 Located at P.O. Box 10 City Garberville ST CA ZIP + 4 95542-0010		
91 b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No

If "Yes," enter the name of the foreign country

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

and enter the amount of tax-exempt interest received or accrued during the tax year **92** N/A

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Park Rental/Use Fees					23,318
b Hay Sales					2,474
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than invento					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Gravel Royalties		0	15	36,240	0
b		0		0	0
c		0		0	0
d		0		0	0
e		0		0	0
104 Subtotal (add columns (B), (D), and (E))		0		36,240	25,792
105 Total (add line 104, columns (B), (D), and (E))					62,032

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

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

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93 A.)	Fees received from the rental/use of park bunkhouse, barn, pasture grazing, farm land & the general public use of the park
93 B.)	Promoting traditional agricultural land use of park land by volunteers raising & selling feed hay.

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

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%		0	0
	%		0	0
	%		0	0
	%		0	0

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

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

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

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

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

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b			N/A	
c				
Totals				0

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

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b			N/A	
c				
Totals				0

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

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

Please Sign Here

Signature of officer: *Peter R. Ryce*
Date: 5/15/07

Peter R. Ryce
Type or print name and title: Treasurer

Paid Preparer's Use Only

Preparer's signature: *Joan E. Courtors*
Date: 5/14/2007
Check if self-employed:
Preparer's SSN or PTIN (See Gen. Inst. X): P00365332

Firm's name (or yours if self-employed), address, and ZIP + 4: Joan E. Courtors
P.O. Box 10, Garberville, CA 95542-0010
EIN:
Phone no: (707) 923-4123

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2006

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Southern Humboldt Community Park

Employer identification number

75-3073362

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) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

Total number of other employees paid over \$50,000 . ▶ 0

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of others receiving over \$50,000 for professional services ▶ 0

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of other contractors receiving over \$50,000 for other services ▶ 0

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

Schedule A (Form 990 or 990-EZ) 2006

(HTA)

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

Table with 3 columns: Question, Yes, No. Rows include: 1. Lobbying activities; 2. Acts with contributors; 3a-d. Grants and other activities; 4a-g. Donor advised funds.

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____ City _____ ST _____ Country _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
- 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					0

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting*
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	32,946	32,165	36,147	416,718	517,976
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	22,070	11,902	13,130		47,102
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	22,262	34,103	30,093		86,458
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income. Attach a schedule Do not Stmt. #9 include gain or (loss) from sale of capital assets			700		700
23 Total of lines 15 through 22	77,278	78,170	80,070	416,718	652,236
24 Line 23 minus line 17	55,208	66,268	66,940	416,718	605,134
25 Enter 1% of line 23	773	782	801	4,167	

26 Organizations described on lines 10 or 11:	a	Enter 2% of amount in column (e), line 24 ▶	26a	12,103
b	Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶		26b	0
c	Total support for section 509(a)(1) test: Enter line 24, column (e) ▶		26c	605,134
d	Add: Amounts from column (e) for lines 18 <u>86,458</u> 19 <u>0</u> 22 <u>700</u> 26b <u>0</u> ▶		26d	87,158
e	Public support (line 26c minus line 26d total) ▶		26e	517,976
f	Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶		26f	85.60%

27 Organizations described on line 12:	a	For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2005) _____ (2004) _____ (2003) <u>N/A</u> (2002) _____	
b	For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2005) _____ (2004) <u>N/A</u> (2003) _____ (2002) _____		
c	Add Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶	27c	0
d	Add: Line 27a total and line 27b total ▶	27d	0
e	Public support (line 27c total minus line 27d total) ▶	27e	0
f	Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶	27f	
g	Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	0.00%
h	Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	27h	0.00%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See page 9 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures

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

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

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45	Lobbying nontaxable amount				0
46	Lobbying ceiling amount (150% of line 45(e))				0
47	Total lobbying expenditures		N/A		0
48	Grassroots nontaxable amount				0
49	Grassroots ceiling amount (150% of line 48(e))				0
50	Grassroots lobbying expenditures				0

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

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

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

Yes	No	Amount
	N/A	
		N/A
		0

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
(ii) Other assets

b Other transactions:

- (i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Table with columns Yes and No. Rows include 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c. All 'No' boxes are checked (X).

Schedule table with columns (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, and (d) Description of transfers, transactions, and sharing arrangements. The table is mostly empty with a diagonal line drawn through it.

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (X) No

b If "Yes," complete the following schedule

Schedule table with columns (a) Name of organization, (b) Type of organization, and (c) Description of relationship. The table is mostly empty with a diagonal line drawn through it.

Southern Humboldt Community Park
P.O. Box 185
Garberville, CA 95542
FEIN 75-3073362
For Tax Year Ended 12/31/06

Form 990
Attachment

Part II
Statement of Functional Expenses

Statement 1
Line 42
Depreciation

See Attached Depreciation Schedule.

Part III
Statement of Program Serv. Accomplishments

Statement 2
Organization's Primary Exempt Purpose:

The primary exempt purpose of Southern Humboldt Community Park is to own, operate and maintain one or more parks for the benefit of the Southern Humboldt community, visitors and the general public.

Part IV
Balance Sheets

Assets

Statement 3
Line 57 a.)
Land, Buildings & Equipment

	<u>Asset</u> <u>12/31/06</u>	<u>Accum.</u> <u>Deprec.</u>	<u>Net Asset</u> <u>Value</u>
Land	718,000	0	718,000
Buildings	533,811	115,193	418,618
Equipment	14,510	5,084	9,426
Property Development	58,931	12,954	45,977
Fixtures	9,574	4,567	5,007
Total:	<u>1,334,826</u>	<u>137,798</u>	<u>1,197,028</u>

(Basis of Value is Cost)

Southern Humboldt Community Park
P.O. Box 185
Garberville, CA 95542
FEIN 75-3073362
For Tax Year Ended 12/31/06

Form 990
Attachment
(Continued)

Part IV
Balance Sheets

Assets
(Continued)

Statement 3
Line 57b
Depreciation

See Attached Depreciation Schedule

Liabilities

Statement 4
Line 63
Loans from Officers, Directors & Key Employees

	<u>1/1/2006</u>	<u>12/31/2006</u>	<u>Details of Terms</u>
Timothy A. Metz President	92,000	92,000	Original Amount: \$ 92,000 Date of Note: 10/2/00 Interest: 5% Per Annum - 1st Year 10% Per Annum - 2nd Year Compounded Monthly Maturity Date of Note: 10/2/02 Purpose: Property Acquisition Funds Secured by Deed of Trust Pertaining to Property Purchase
Stephen Dazey Park Operations Manager	1,900	1,900	Original Amount: \$ 500 5/30/02 Add'l. Amount: \$ 600 9/06/02 Add'l. Amount: \$ 1600 10/29/02 Add'l. Amount: \$ 3600 1/28/04 Interest: 0% Per Annum Maturity Date of Note: Open Purpose: Small Operating Loans Unsecured Loans
Total Loans from Officers, etc.:	93,900	93,900	

Southern Humboldt Community Park
P.O. Box 185
Garberville, CA 95542
FEIN 75-3073362
For Tax Year Ended 12/31/06

Form 990
Attachment
(Continued)

Part IV
Balance Sheets
(Continued)

Liabilities
(Continued)

Statement 5
Line 64b
Mortgages & Notes Payable

	<u>1/1/2006</u>	<u>12/31/2006</u>	
<u>Mortgage Payable:</u>			
Buck Mountain Ranch	483,369	483,369	
<u>Notes Payable:</u>			
Gilbert Gregori	127,899	140,123	<u>Terms</u> Original Amount: \$100,000 Date of Note: 10/2/00 Interest: 10% Per Annum Compounded Monthly Maturity Date of Note: 10/2/01 Purpose: Property Acquisition Funds Secured by Deed of Trust Pertaining to Property Purchase
Mark Drake	119,687	119,687	Original Amount: \$ 120,000 Date of Note: 3/1/02 Interest: 10% Per Annum Maturity Date of Note: 5/7/07 Purpose: Property Acquisition Funds Secured by Deed of Trust Pertaining to Property Purchase
	_____	_____	
Total Mortg. & Notes Payable:	730,955	743,179	

No relationship exists between these lenders and any officer or director of this organization.

Southern Humboldt Community Park
P.O. Box 185
Garberville, CA 95542
FEIN 75-3073362
For Tax Year Ended 12/31/06

Form 990 / Schedule A
Attachment

Part III
Statements About Activities

Statement 6

Line 2b

Lending of Money

See Form 990 / Part IV / Line 63 / Statement #4 - Attachment for Details

Statement 7

Line 2c

Furnishing of Goods, Services or Facilities

Stephen Dazey, our Park Operations Manager, has been volunteering his managerial services and has been voluntarily performing the duties of Park Operations Manager.

During 2006, Southern Humboldt Community Park engaged the services of Restoration Forestry, Inc., a forest management corporation, wholly owned by our president, Timothy A. Metz. Restoration Forestry, Inc. was contracted to perform forest stand improvement and restoration work and to upgrade the park roads. The compensation paid to Restoration Forestry, Inc. for this work was \$29,390. This work was funded by government grants secured for these purposes.

Statement 8

Line 2d

Reimbursement of Expenses

During 2006, our Park Operations Manager, Stephen Dazey, was reimbursed for the following expenses:

Permit Fee	79	As of 12/31/06, the following expenses	
Gate Purchase	350	to Stephen Dazey were not reimbursed:	
From Prior Years A/P:		Well Construction	21582
Fundraising Consultant	1500	Carts to Bridges-Materials	2935
		Fundraising Consultants	4252
Total Payments & Reimbursed Expenses:	<u>1929</u>	A/P as of 12/31/06:	<u>28768</u>

Southern Humboldt Community Park
P.O. Box 185
Garberville, CA 95542
FEIN 75-3073362
For Tax Year Ended 12/31/06

Form 990 / Schedule A
Attachment
(Continued)

Part IV-A
Support Schedule

Statement 10
Line 22
Other Income

	<u>(B)</u> <u>2003</u>
Hay Delivery Fee	700
	<hr/>
Total Other Income:	700

SOUTHERN HUMBOLDT COMMUNITY PARK

DEPRECIATION SCHEDULE

pg #2

Date Placed in Service	Type of Property	# of Years	Cost or Basis	Method	Fund	Accumul Deprec Previously Taken	Dep. Exp. 2001	Dep Exp. 2002	Dep. Exp. 2003	Dep Exp 2004	Dep Exp 2005	Dep Exp 2006
EQUIPMENT												
12/01	Portable Restroom	3 Yrs.	1965.55	(GDS)Macrs	Gen	0	163.80	655.18	655.18	491.39	0.00	
12/01	Stove	7 Yrs.	941.70	(GDS)Macrs	Gen	0	33.63	134.53	134.53	134.53	134.53	134.53
03/03	Tappan 30" Range	7 Yrs.	259.01	(GDS)Macrs	Gen	0	0.00	0.00	27.75	37.00	37.00	37.00
03/03	Servel Refrigerator	7 Yrs.	1085.37	(GDS)Macrs	Gen	0	0.00	0.00	116.29	155.05	155.05	155.05
06/03	4 - Picnic Tables	7 Yrs.	1930.50	(GDS)Macrs	Gen	0	0.00	0.00	149.38	275.79	275.79	275.79
03/04	Mower	7 Yrs.	500.00	(GDS)Macrs	Gen	0	0.00	0.00	0.00	59.52	71.43	71.43
06/05	10'x10' Canopy	7 Yrs.	213.41	(GDS)Macrs	Gen	0	0.00	0.00	0.00	0.00	15.24	30.49
09/05	Playground Equipment	15 Yrs.	5260.55	(GDS)Macrs	Gen	0	0.00	0.00	0.00	0.00	87.68	350.70
12/06	Generator	7 Yrs.	2353.55	(GDS)Macrs	Gen	0	0.00	0.00	0.00	0.00	0.00	28.02
FURNITURE & FIXTURES												
06/03	Portable Toilet Unit	3 Yrs.	2200.00	(GDS)Macrs	HAF	0	0.00	0.00	397.22	733.33	733.33	336.12
06/03	Trail Signs	7 Yrs.	1525.61	(GDS)Macrs	Gen	0	0.00	0.00	108.97	217.94	217.94	217.94
09/03	Window Blinds	7 Yrs.	764.89	(GDS)Macrs	Gen	0	0.00	0.00	36.42	109.27	109.27	109.27
09/03	Range Hood	7 Yrs.	171.59	(GDS)Macrs	Gen	0	0.00	0.00	8.17	24.51	24.51	24.51
09/03	Used Cabinet	7 Yrs.	99.98	(GDS)Macrs	Gen	0	0.00	0.00	4.76	14.28	14.28	14.28
11/03	Shelf Units	7 Yrs.	225.19	(GDS)Macrs	Gen	0	0.00	0.00	4.02	32.17	32.17	32.17
01/04	3 Shelving Units	7 Yrs.	225.19	(GDS)Macrs	Gen	0	0.00	0.00	0.00	32.17	32.17	32.17
02/04	Picnic Table	7 Yrs.	144.78	(GDS)Macrs	Gen	0	0.00	0.00	0.00	18.96	20.68	20.68
04/04	Storage Cabinet	7 Yrs.	341.03	(GDS)Macrs	Gen	0	0.00	0.00	0.00	32.48	48.72	48.72
04/04	Tent Building	7 Yrs.	431.00	(GDS)Macrs	Gen	0	0.00	0.00	0.00	41.05	61.57	61.57
05/04	Cabinets & Countertops	7 Yrs.	393.56	(GDS)Macrs	Gen	0	0.00	0.00	0.00	32.80	56.22	56.22
05/04	Used Gas Dryer	7 Yrs.	150.00	(GDS)Macrs	Gen	0	0.00	0.00	0.00	12.50	21.43	21.43
06/04	Fan & Light	7 Yrs.	107.47	(GDS)Macrs	Gen	0	0.00	0.00	0.00	7.68	15.35	15.35
11/04	Cabinets	7 Yrs.	1077.35	(GDS)Macrs	Gen	0	0.00	0.00	0.00	12.83	153.91	153.91
12/06	Water Heater	7 Yrs.	423.76	(GDS)Macrs	Gen	0	0.00	0.00	0.00	0.00	0.00	0.00
12/06	Bathroom Fixtures	7 Yrs.	1292.66	(GDS)Macrs	Gen	0	0.00	0.00	0.00	0.00	0.00	0.00
Total Depreciation Expense:							23589.20	24962.14	26574.79	32558.88	35676.87	36514.99