

**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)

OMB No 1545-0047

**2005**

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 2005 calendar year, or tax year beginning **OCT 1, 2005** and ending **SEP 30, 2006**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C</b> Name of organization <b>SOCIETY OF COLLISION REPAIR SPECIALISTS</b>		<b>D</b> Employer identification number <b>43-1275465</b>
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>P.O. BOX 909</b>		<b>E</b> Telephone number <b>877-841-0660</b>
		City or town, state or country, and ZIP + 4 <b>PROSSER, WA 99350</b>		<b>F</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <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 ▶ **N/A**

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

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

**I** Group Exemption Number ▶ **N/A**

**G** Website: ▶ **WWW.SCRS.COM**

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

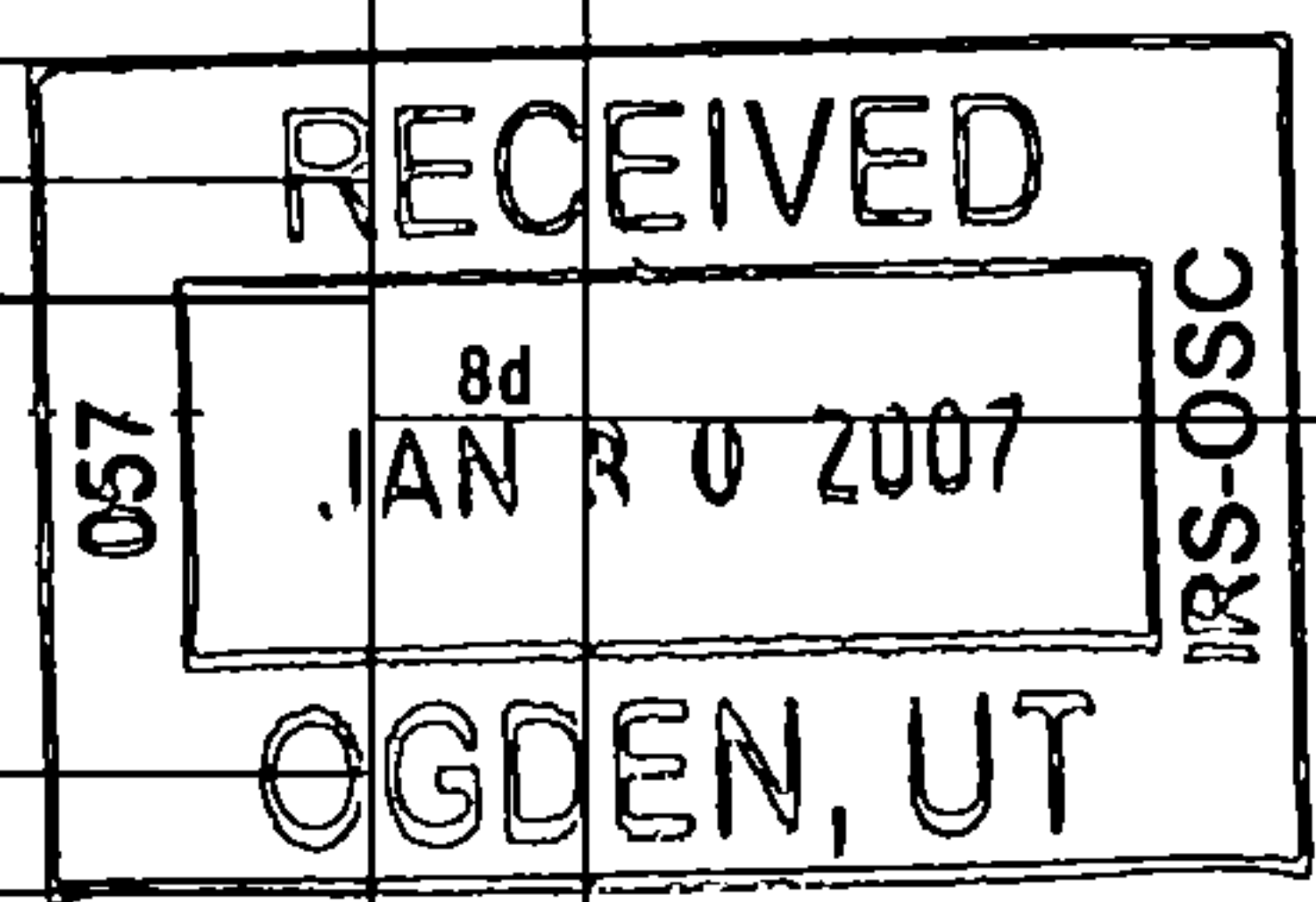
**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **304,985.**

**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**

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:				
	<b>a</b> Direct public support	<b>1a</b>			
	<b>b</b> Indirect public support	<b>1b</b>			
	<b>c</b> Government contributions (grants)	<b>1c</b>			
	<b>d</b> Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)			<b>1d</b>	<b>0.</b>
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)			<b>2</b>	<b>16,306.</b>
	<b>3</b> Membership dues and assessments			<b>3</b>	<b>288,658.</b>
	<b>4</b> Interest on savings and temporary cash investments			<b>4</b>	<b>21.</b>
	<b>5</b> Dividends and interest from securities			<b>5</b>	
	<b>6 a</b> Gross rents	<b>6a</b>			
	<b>b</b> Less: rental expenses	<b>6b</b>			
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)			<b>6c</b>	
<b>7</b> Other investment income (describe ▶ _____)			<b>7</b>		
<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		<b>8a</b>			
		<b>8b</b>			
<b>c</b> Gain or (loss) (attach schedule)	<b>8c</b>				
<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))			<b>8d</b>		
<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>			
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>			
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)			<b>9c</b>	
<b>10 a</b> Gross sales of inventory, less returns and allowances		<b>10a</b>			
	<b>b</b> Less: cost of goods sold	<b>10b</b>			
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			<b>10c</b>	
<b>11</b> Other revenue (from Part VII, line 103)			<b>11</b>		
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			<b>12</b>	<b>304,985.</b>	
Expenses	<b>13</b> Program services (from line 44, column (B))		<b>13</b>		
	<b>14</b> Management and general (from line 44, column (C))		<b>14</b>		
	<b>15</b> Fundraising (from line 44, column (D))		<b>15</b>		
	<b>16</b> Payments to affiliates (attach schedule)		<b>16</b>		
	<b>17</b> Total expenses (add lines 16 and 44, column (A))		<b>17</b>	<b>274,755.</b>	
<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)		<b>18</b>	<b>30,230.</b>		
Net Assets	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))		<b>19</b>	<b>25,925.</b>	
	<b>20</b> Other changes in net assets or fund balances (attach explanation)		<b>20</b>	<b>0.</b>	
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)		<b>21</b>	<b>56,155.</b>	



CANMED FEB 09 2007  
 Revenue

**Part II Statement of Functional Expenses**

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/>	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25	87,140.		
26 Other salaries and wages	26			
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29	7,117.		
30 Professional fundraising fees	30			
31 Accounting fees	31	3,440.		
32 Legal fees	32			
33 Supplies	33	1,017.		
34 Telephone	34	3,910.		
35 Postage and shipping	35	7,686.		
36 Occupancy	36			
37 Equipment rental and maintenance	37			
38 Printing and publications	38	3,809.		
39 Travel	39	13,609.		
40 Conferences, conventions, and meetings	40	6,499.		
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42	378.		
43 Other expenses not covered above (itemize)				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e _____	43e			
f _____	43f			
g <b>SEE STATEMENT 1</b>	43g	140,150.		
44 <b>Total functional expenses.</b> Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	274,755.		

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

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

Yes  No

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

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

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

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

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 2</u>	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)	
<b>a MEMBERSHIP AND SPECIAL PROJECTS WHICH PROMOTE THE COLLISION REPAIR INDUSTRY AND PROVIDE MEMBERS WITH NETWORKING AND EDUCATIONAL OPPORTUNITIES.</b>	
(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>b</b>	
(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>c</b>	
(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>d</b>	
(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e Other program services (attach schedule)</b> (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) ►	

**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	39,075.	45	35,447.
	46	Savings and temporary cash investments	5,000.	46	11,070.
	47 a	Accounts receivable	2,500.		
	b	Less allowance for doubtful accounts		47c	2,500.
	48 a	Pledges receivable			
	b	Less allowance for doubtful accounts		48c	
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees		50	
	51 a	Other notes and loans receivable			
	b	Less allowance for doubtful accounts		51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	6,597.	53	7,484.
	54	Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55 a	Investments - land, buildings, and equipment basis	1,134.		
	b	Less accumulated depreciation	1,134.	55c	378.
56	Investments - other		56		
57 a	Land, buildings, and equipment basis				
b	Less accumulated depreciation		57c		
58	Other assets (describe <input type="checkbox"/> )		58		
59	<b>Total assets</b> (must equal line 74) Add lines 45 through 58	54,600.	59	56,501.	
Liabilities	60	Accounts payable and accrued expenses	725.	60	346.
	61	Grants payable		61	
	62	Deferred revenue	27,950.	62	
	63	Loans from officers, directors, trustees, and key employees		63	
	64 a	Tax-exempt bond liabilities		64a	
	b	Mortgages and other notes payable		64b	
	65	Other liabilities (describe <input type="checkbox"/> )		65	
66	<b>Total liabilities.</b> Add lines 60 through 65)	28,675.	66	346.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted		67	
	68	Temporarily restricted		68	
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal, or current funds	0.	70	0.
	71	Paid-in or capital surplus, or land, building, and equipment fund	0.	71	0.
	72	Retained earnings, endowment, accumulated income, or other funds	25,925.	72	56,155.
73	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	25,925.	73	56,155.	
74	<b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	54,600.	74	56,501.	





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   N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		
	N/A		
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
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	501(c)(4), (5), or (6) organizations		
a	Were substantially all dues nondeductible by members?		X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	X	
c	Dues, assessments, and similar amounts from members		
	85c   N/A		
d	Section 162(e) lobbying and political expenditures		
	85d   N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e   N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f   N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	N/A		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	N/A		
86	501(c)(7) organizations		
a	Initiation fees and capital contributions included on line 12		
	86a   N/A		
b	Gross receipts, included on line 12, for public use of club facilities		
	86b   N/A		
87	501(c)(12) organizations		
a	Gross income from members or shareholders		
	87a   N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
	87b   N/A		
88	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
89 a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911   N/A; section 4912   N/A; section 4955   N/A		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		
	N/A		
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
			N/A
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		
			N/A
90 a	List the states with which a copy of this return is filed		
	NONE		
b	Number of employees employed in the pay period that includes March 12, 2005	90b	1
91 a	The books are in care of   LINDA ATKINS Telephone no.   (877) 841-0660 Located at   PO BOX 909, PROSSER, WA ZIP + 4   99350		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country   N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
		Yes	No
			X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country   N/A		
			X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

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

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a WEBSITE INCOME					13,333.
b INDUSTRY CHALLENGE EVENT					2,475.
c BROCHURES AND SIGN SALES					498.
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					288,658.
95 Interest on savings and temporary cash investments			14	21.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		21.	304,964.
105 Total (add line 104, columns (B), (D), and (E))					304,985.

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

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

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
94	MEMBERSHIP PROVIDES INDUSTRY NETWORKING AND EDUCATIONAL OPPORTUNITIES.
93	ALL PROGRAM SERVICES PROMOTE THE INDUSTRY AND PROVIDE MEMBERS OPPORTUNITIES TO DEMONSTRATE THEIR INDUSTRY SPECIALIZATION.

**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	%			
	%			
	%			
	%			

**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)

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

Signature of officer: Charles E. Sukkala Date: 1/20/07 Type or print name and title: Charles E. Sukkala Treasurer

Paid Preparer's Use Only: Preparer's signature: Auson M Greggo Date: 1/15/07 Check if self-employed:  Preparer's SSN or PTIN: P00595460

Firm's name (or yours if self-employed), address, and ZIP + 4: WARADY & DAVIS LLP  
1717 DEERFIELD ROAD, SUITE 300S  
DEERFIELD, ILLINOIS 60015

EIN: 36-2170602 Phone no.: (847) 267-9600

FORM 990 OTHER EXPENSES STATEMENT 1

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
DUES AND SUBSCRIPTIONS	2,231.			
ADMINISTRATION EXPENSE	90,630.			
CONSULTING	20,800.			
BANK & CREDIT CARD FEES	2,496.			
MARKETING AND PROMOTION EXPENSE	18,968.			
BENEVOLENCE AND GIFTS	19.			
COST OF SALES	841.			
MISCELLANEOUS	554.			
NCOIL PROJECT EXPENSE	486.			
BAD DEBT EXPENSE	3,125.			
<b>TOTAL TO FM 990, LN 43</b>	<b>140,150.</b>			

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 2  
PART III

EXPLANATION

TRADE ASSOCIATION TO PROMOTE THE COLLISION REPAIR INDUSTRY AND PROVIDE EDUCATION AND NETWORKING OPPORTUNITIES AND BENEFITS TO MEMBERS.

FORM 990

EXPLANATION OF RELATIONSHIP  
PART V-A, LINE 75B

STATEMENT 3

INDIVIDUAL'S NAME

TITLE OR ROLE

STACY BARTNIK

SECRETARY

INDIVIDUAL'S NAME

TITLE OR ROLE

DAN BAILEY

NAT'L DIRECTOR

EXPLANATION OF RELATIONSHIP

COWORKERS

INDIVIDUAL'S NAME

TITLE OR ROLE

CHAD SULKALA

TREASURER

INDIVIDUAL'S NAME

TITLE OR ROLE

CHUCK SULKALA

PAST CHAIRMAN

EXPLANATION OF RELATIONSHIP

SON/FATHER

<b>SCRS BOARD OF DIRECTORS 2006</b>			
<b>FIRST</b>	<b>LAST</b>	<b>TITLE</b>	<b>WEEKLY TIME DEVOTED</b>
Farzam	Afshar	National Director	2 hours
Danny	Bailey	National Director	2 hours
Stacy	Bartnik	Secretary	4 hours
Toby	Chess	National Director	2 hours
Louis	DiLisio, Jr.	Immediate Past Chairman	2 hours
Barry	Dorn	Director At Large, National Director	2 hours
Craig	Griffin	National Director	2 hours
Gene L.	Hamilton	Past Chairman	2 hours
Jeff	Hendler	Past Chairman	2 hours
Tom	Moreland	Chairman	4 hours
Bob	Smith	National Director, Executive Administrator, Director	2 hours
Chad	Sulkala	Treasurer	2 hours
Chuck	Sulkala	Past Chairman	2 hours
March	Taylor	National Director	2 hours
Tim	Waldren	National Director	2 hours
Gary	Wano, Jr.	Vice-Chairman	2 hours

SOCIETY OF COLLISION REPAIR SPECIALISTS  
FEIN # 43-1275465  
FEDERAL FORM 990 Page 4, Line 55  
OFFICE EQUIPMENT AND DEPRECIATION

<u>Asset</u>	<u>Cost</u>	<u>Accumulated Depreciation</u>	<u>Net Book Value</u>	<u>Depreciation Expense</u>
Laptop Computer	1,134.00	1,134.00	0.00	378.00