

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2006

Department of the Treasury Internal Revenue Service

For calendar year 2006 or other tax year beginning 07/01, 2006, and ending 06/30, 2007. See separate instructions.

Open to Public Inspection for 501(c)(3) Organizations Only

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

D Employer identification number (Employees' trust, see instructions for Block D on page 9.)

B Exempt under section 501(c)(3) 408(e) 220(e) 408A 530(a) 529(a)

Print or Type

CRISTA MINISTRIES AMENDED RETURN

91-6012289

Number, street, and room or suite no. If a P.O. box, see page 9 of instructions.

19303 FREMONT AVE N

E Unrelated business activity codes (See instructions for Block E on page 9.)

City or town, state, and ZIP code

SEATTLE, WA 98133

515100 561300

C Book value of all assets at end of year

F Group exemption number (See instructions for Block F on page 9.)

125,290,109.

G Check organization type X 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. SEE STATEMENT 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes X No

J The books are in care of CRISTA MINISTRIES- J. JORDAN Telephone number 206-546-7272

Part I Unrelated Trade or Business Income

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales (8,606,778), Less returns and allowances, Cost of goods sold, Gross profit, Capital gain net income, Net gain (loss), Income (loss) from partnerships and S corporations, Rent income, Unrelated debt-financed income, Interest, annuities, royalties, and rents from controlled organizations, Investment income, Exploited exempt activity income, Advertising income, Other income, Total (8,606,778).

Part II Deductions Not Taken Elsewhere (See page 12 of the instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees (55,476), Salaries and wages (2,312,511), Repairs and maintenance (5,026), Bad debts (23,070), Interest (attach schedule), Taxes and licenses (23,405), Charitable contributions (20,500), Depreciation (141,845), Less depreciation claimed on Schedule A and elsewhere on return (141,845), Depletion, Contributions to deferred compensation plans, Employee benefit programs (152,135), Excess exempt expenses (Schedule I), Excess readership costs (Schedule J), Other deductions (SEE STATEMENT 2) (3,634,199), Total deductions (6,368,167), Unrelated business taxable income before net operating loss deduction (2,238,611), Net operating loss deduction (limited to the amount on line 30), Unrelated business taxable income before specific deduction (2,238,611), Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.) (1,000), Unrelated business taxable income (2,237,611).

Part III Tax Computation

| | | |
|--|------------|----------|
| 35 Organizations Taxable as Corporations. See instructions for tax computation on page 15. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) _____ (2) _____ (3) _____ b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750), (2) Additional 3% tax (not more than \$100,000) | 35c | 760,788. |
| 36 Trusts Taxable at Trust Rates. See instructions for tax computation on page 16. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) | 36 | |
| 37 Proxy tax. See page 16 of the instructions | 37 | |
| 38 Alternative minimum tax | 38 | |
| 39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies. | 39 | 760,788. |

Part IV Tax and Payments

| | | | |
|---|------------|----------|----------|
| 40 a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) | 40a | | |
| b Other credits (see page 17 of the instructions) | 40b | | |
| c General business credit. Check here and indicate which forms are attached: <input type="checkbox"/> Form 3800 <input type="checkbox"/> Form(s) (specify) ▶ | 40c | | |
| d Credit for prior year minimum tax (attach Form 8801 or 8827) | 40d | | |
| e Total credits. Add lines 40a through 40d | 40e | | |
| 41 Subtract line 40e from line 39 | 41 | | 760,788. |
| 42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule), | 42 | | |
| 43 Total tax. Add lines 41 and 42 | 43 | | 760,788. |
| 44 a Payments: A 2005 overpayment credited to 2006 | 44a | 20,230. | |
| b 2006 estimated tax payments | 44b | 736,800. | |
| c Tax deposited with Form 8868 | 44c | | |
| d Foreign organizations: Tax paid or withheld at source (see instructions) | 44d | | |
| e Backup withholding (see instructions) | 44e | | |
| f Credit for federal telephone excise tax paid (attach Form 8913) | 44f | 966. | |
| g Other credits and payments: <input type="checkbox"/> Form 2439 _____ <input checked="" type="checkbox"/> Form 4136 4,917. <input checked="" type="checkbox"/> Other 4,845. Total ▶ | 44g | 9,762. | |
| 45 Total payments. Add lines 44a through 44g. STMT. 3. | 45 | | 767,758. |
| 46 Estimated tax penalty (see page 4 of the instructions). Check if Form 2220 is attached <input checked="" type="checkbox"/> | 46 | | |
| 47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed | 47 | | NONE |
| 48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid | 48 | | 6,970. |
| 49 Enter the amount of line 48 you want: Credited to 2007 estimated tax ▶ ATTACHMENT A Refunded ▶ | 49 | | 6,970. |

Part V Statements Regarding Certain Activities and Other Information (see instructions on page 18)

| | | |
|---|-----|----|
| 1 At any time during the 2006 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1. If YES, enter the name of the foreign country here ▶ ATTACHMENT B | Yes | No |
| 2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see page 5 of the instructions for other forms the organization may have to file. | | X |
| 3 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ | | |

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

| | | | | | |
|--|-----------|--|---|----------|----|
| 1 Inventory at beginning of year | 1 | | 6 Inventory at end of year | 6 | |
| 2 Purchases | 2 | | 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2. | 7 | |
| 3 Cost of labor | 3 | | 8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? | Yes | No |
| 4 a Additional section 263A costs (attach schedule) | 4a | | | | X |
| b Other costs (attach schedule) | 4b | | | | |
| 5 Total. Add lines 1 through 4b | 5 | | | | |

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: *William J. ...* Date: 12/10/08 Title: CFO

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer's Use Only
 Preparer's signature: *James M. Seavey* Date: 12/12/08
 Firm's name (or yours if self-employed), address, and ZIP code: CLARK NUBER P.S., 10900 NE 4TH, SUITE 1700, BELLEVUE, WA 98004
 Check if self-employed Preparer's SSN or PTIN: P00000565
 EIN: 91-1194016 Phone no.: 425 454-4919

FOR PUBLIC DISCLOSURE

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions on page 20)

1 Description of property

Table with 1 column for description of property, rows (1) through (4).

2 Rent received or accrued

Table with 3 columns: (a) From personal property, (b) From real and personal property, and 3 Deductions directly connected with the income. Rows (1) through (4) and a Total row.

Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

Total deductions. Enter here and on page 1, Part I, line 6, column (B)

Schedule E - Unrelated Debt-Financed Income (see instructions on page 20)

Table with 5 columns: 1 Description of debt-financed property, 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property (a) Straight line depreciation, (b) Other deductions, 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Column 4 divided by column 5, 7 Gross income reportable, 8 Allocable deductions. Includes a Totals row and instructions for entering data on page 1.

Total dividends-received deductions included in column 8

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions on page 21)

Table for Exempt Controlled Organizations with 6 columns: 1 Name of Controlled Organization, 2 Employer Identification Number, 3 Net unrelated income, 4 Total of specified payments made, 5 Part of column 4 that is included in the controlling organization's gross income, 6 Deductions directly connected with income in column 5. Rows (1) through (4).

Nonexempt Controlled Organizations

Table for Nonexempt Controlled Organizations with 5 columns: 7 Taxable Income, 8 Net unrelated income, 9 Total of specified payments made, 10 Part of column 9 that is included in the controlling organization's gross income, 11 Deductions directly connected with income in column 10. Includes a Totals row and instructions for entering data on page 1.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions on page 22)

Table with 5 columns: 1 Description of income, 2 Amount of income, 3 Deductions directly connected, 4 Set-asides, 5 Total deductions and set-asides. Includes a Totals row at the bottom.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions on page 22)

Table with 7 columns: 1 Description of exploited activity, 2 Gross unrelated business income, 3 Expenses directly connected, 4 Net income (loss), 5 Gross income from activity, 6 Expenses attributable, 7 Excess exempt expenses. Includes a Totals row at the bottom.

Schedule J - Advertising Income (see instructions on page 23)

Part I Income From Periodicals Reported on a Consolidated Basis

Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss), 5 Circulation income, 6 Readership costs, 7 Excess readership costs. Includes a Totals row at the bottom.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss), 5 Circulation income, 6 Readership costs, 7 Excess readership costs. Includes a Totals row at the bottom.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 23)

Table with 4 columns: 1 Name, 2 Title, 3 Percent of time devoted to business, 4 Compensation attributable to unrelated business. Includes a Total row at the bottom.

Form **4136**

Credit for Federal Tax Paid on Fuels

OMB No. 1545-0162

2006

Attachment
Sequence No. **23**

Department of the Treasury
Internal Revenue Service

▶ See the separate instructions.
▶ Attach this form to your income tax return.

Name (as shown on your income tax return)

Taxpayer identification number

CRISTA MINISTRIES

91-6012289

Caution. Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 and 14), 3d, 4c, 5, and 9, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 and 14), claimant certifies that a certificate has not been provided to the credit card issuer.

1 Nontaxable Use of Gasoline

| | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|--|-----------------|----------|-------------|----------------------|---------|
| a Off-highway business use | | \$.183 | | \$ 1,131 | 362 |
| b Use on a farm for farming purposes | | .183 | | | |
| c Other nontaxable use (see Caution above line 1) | 7 | .183 | 6,183 | | |
| d Exported | | .184 | | | 411 |

2 Nontaxable Use of Aviation Gasoline

| | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|--|-----------------|----------|-------------|----------------------|---------|
| a Use in commercial aviation (other than foreign trade) | | \$.15 | | \$ | 354 |
| b Other nontaxable use (see Caution above line 1) | | .193 | | | 324 |
| c Exported | | .194 | | | 412 |

3 Nontaxable Use of Undyed Diesel Fuel

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach an explanation and check here

| | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|--|-----------------|----------|-------------|----------------------|---------|
| a Nontaxable use | 7 | \$.243 | 15,579 | \$ 3,786 | 360 |
| b Use on a farm for farming purposes | | .243 | | | |
| c Use in trains | | .22 | | | 353 |
| d Use in certain intercity and local buses (see Caution above line 1) | | .17 | | | 350 |
| e Exported | | .244 | | | 413 |

4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here

| | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|--|-----------------|----------|-------------|----------------------|---------|
| a Nontaxable use | | \$.243 | | \$ | 346 |
| b Use on a farm for farming purposes | | .243 | | | |
| c Use in certain intercity and local buses (see Caution above line 1) | | .17 | | | 347 |
| d Exported | | .244 | | | 414 |

5 Kerosene Used in Commercial Aviation (Other Than Foreign Trade)

| | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|--|----------|-------------|----------------------|---------|
| a Kerosene taxed at \$.244 (see Caution above line 1) | \$.200 | | \$ | 417 |
| b Kerosene taxed at \$.219 (see Caution above line 1) | .175 | | | 355 |

For Paperwork Reduction Act Notice, see the separate instructions.

Form **4136** (2006)

ISA

FOR PUBLIC DISCLOSURE

AMENDED RETURN

6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

Registration No. ▶

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach an explanation and check here . . . ▶

| | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|---|----------|-------------|----------------------|---------|
| a Use by a state or local government | \$.243 | | \$ | 360 |
| b Use in certain intercity and local buses | .17 | | | 350 |

7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

Registration No. ▶

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here . . . ▶

| | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|---|----------|-------------|----------------------|---------|
| a Use by a state or local government | \$.243 | } | \$ | 346 |
| b Sales from a blocked pump | .243 | | | |
| c Use in certain intercity and local buses | .17 | | | 347 |

8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation

Registration No. ▶

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

| | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|--|-----------------|----------|-------------|----------------------|---------|
| a Use in commercial aviation (other than foreign trade) taxed at \$.219 | | \$.175 | | \$ | 355 |
| b Use in commercial aviation (other than foreign trade) taxed at \$.244 | | .200 | | | 417 |
| c Nonexempt use in noncommercial aviation | | .025 | | | 418 |
| d Other nontaxable uses taxed at \$.244 | | .243 | | | 346 |
| e Other nontaxable uses taxed at \$.219 | | .218 | | | 369 |

9 Nontaxable Use of Kerosene Used in Noncommercial Aviation

| | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|--|-----------------|----------|-------------|----------------------|---------|
| a Nontaxable use (other than state) taxed at \$.244 (see Caution above line 1) | | \$.243 | | \$ | 346 |
| b Nontaxable use (other than state) taxed at \$.219 (see Caution above line 1) | | .218 | | | 369 |

10 Reserved for future use

11 Nontaxable Use of Liquefied Petroleum Gas (LPG) (before October 1, 2006)

| | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|---|--|----------|-------------|----------------------|---------|
| a | Use in certain intercity and local buses | .062 | | \$ | 352 |
| b | Use in qualified local buses or school buses | .136 | | | 361 |
| c | Other nontaxable use | .136 | | | 395 |

12 Alcohol Fuel Mixture Credit

Registration No. ►

Claimant produced an alcohol fuel mixture by mixing taxable fuel with alcohol. The alcohol fuel mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant.

| | (b) Rate | (c) Gallons of alcohol | (d) Amount of credit | (e) CRN |
|---|---|------------------------|----------------------|---------|
| a | Alcohol fuel mixtures containing ethanol | .51 | \$ | 393 |
| b | Alcohol fuel mixtures containing alcohol (other than ethanol) | .60 | | 394 |

13 Biodiesel or Renewable Diesel Mixture Credit

Registration No. ►

Claimant produced a mixture by mixing diesel fuel with biodiesel or renewable diesel. The biodiesel used to produce the biodiesel mixture must meet ASTM D6751 and be registered with the EPA as a fuel and fuel additive under section 211 of the Clean Air Act. The mixture was sold by the claimant to any person for use as fuel or was used as a fuel by the claimant. Claimant has a certificate from the producer or importer of the biodiesel which identifies the percentage of biodiesel and agri-biodiesel in the product, and has no reason to believe the information is false. See the instructions for line 13 to see if you must attach the certificate.

| | (b) Rate | (c) Gallons of biodiesel or renewable diesel | (d) Amount of credit | (e) CRN |
|---|--|--|----------------------|---------|
| a | Biodiesel (other than agri-biodiesel) mixtures | .50 | \$ | 388 |
| b | Agri-biodiesel mixtures | 1.00 | | 390 |
| c | Renewable diesel mixtures | 1.00 | | 307 |

14 Nontaxable Use of Alternative Fuel (after September 30, 2006)

Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See page 4 in the Instructions for Form 4136 for the credit rate.

| | (a) Type of use | (b) Rate | (c) Gallons or gasoline gallon equivalents (GGE) | (d) Amount of credit | (e) CRN |
|---|--|----------|--|----------------------|---------|
| a | Liquefied petroleum gas (LPG) | .183 | | \$ | 419 |
| b | "P Series" fuels | .183 | | | 420 |
| c | Compressed natural gas (CNG) (GGE = 126.67 cu. ft.) | .183 | | | 421 |
| d | Liquefied hydrogen | .183 | | | 422 |
| e | Any liquid fuel derived from coal (including peat) through the Fischer-Tropsch process | .243 | | | 423 |
| f | Liquid hydrocarbons derived from biomass | .243 | | | 424 |
| g | Liquefied natural gas (LNG) | .243 | | | 425 |

15 Alternative Fuel Credit and Alternative Fuel Mixture Credit (after September 30, 2006)

Registration No. ►

| | (b) Rate | (c) Gallons or gasoline gallon equivalents (GGE) | (d) Amount of credit | (e) CRN |
|---|--|--|----------------------|---------|
| a | Liquefied petroleum gas (LPG) | .50 | \$ | 426 |
| b | "P Series" fuels | .50 | | 427 |
| c | Compressed natural gas (CNG) (GGE = 121 cu. ft.) | .50 | | 428 |
| d | Liquefied hydrogen | .50 | | 429 |
| e | Any liquid fuel derived from coal (including peat) through the Fischer-Tropsch process | .50 | | 430 |
| f | Liquid hydrocarbons derived from biomass | .50 | | 431 |
| g | Liquefied natural gas (LNG) | .50 | | 432 |

AMENDED RETURN

16 Registered Credit Card Issuers

Registration No. ▶

| | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|---|----------|-------------|----------------------|---------|
| a Diesel fuel sold for the exclusive use of a state or local government | \$.243 | | \$ | 360 |
| b Kerosene sold for the exclusive use of a state or local government | .243 | | | 346 |
| c Kerosene for use in aviation sold for the exclusive use of a state or local government | .218 | | | 369 |

17 Nontaxable Use of a Diesel-Water Fuel Emulsion

Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See page 4 in the Instructions for Form 4136 for the credit rate.

| | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|-------------------------|-----------------|----------|-------------|----------------------|---------|
| a Nontaxable use | | \$.197 | | \$ | 309 |
| b Exported | | .198 | | | 306 |

18 Diesel-Water Fuel Emulsion Blending

Registration No.

| | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|----------------|----------|-------------|----------------------|---------|
| Blender credit | \$.046 | | \$ | 310 |

19 Exported Dyed Fuels

| | (b) Rate | (c) Gallons | (d) Amount of credit | (e) CRN |
|------------------------------------|----------|-------------|----------------------|---------|
| a Exported dyed diesel fuel | \$.001 | | \$ | 415 |
| b Exported dyed kerosene | .001 | | | 416 |

| | | | | |
|--|-----------|--|----------|--|
| 20 Total income tax credit claimed. Add lines 1 through 19, column (d). Enter here and on Form 1040, line 70 (also check box b on line 70); Form 1120, line 32f(2); Form 1120-A, line 28f(2); Form 1120S, line 23c; Form 1041, line 24h; or the proper line of other returns. ▶ | 20 | | \$ 4,917 | |
|--|-----------|--|----------|--|

AMENDED RETURN

Credit for Federal Telephone Excise Tax Paid

Form **8913**

Department of the Treasury
Internal Revenue Service

OMB No. 1545-2051

2006

Attachment
Sequence No. **63**

- ▶ See the separate instructions.
- ▶ Attach to your income tax return.

Name(s) as shown on your income tax return

Identifying number

CRISTA MINISTRIES

91-6012289

Enter the federal telephone excise tax billed during each period as listed in column (a) of lines 1 -14 below.

By filing this form, you are certifying that you (1) have not received from your service provider a credit or refund of the tax paid on long distance service or bundled service billed after February 28, 2003, and before August 1, 2006, and (2) will not ask your provider for a credit or refund or have withdrawn any request submitted to the provider for a credit or refund.

Caution. See the instructions for explanations of the services that qualify for a credit or refund of the federal telephone excise tax.

Amount of federal excise tax on long distance or bundled service only

| (a) Bills dated during: | (b) Long distance service | (c) Bundled service | (d) Tax credit or refund (add columns (b) and (c)) | (e) Interest (see instructions) |
|---|---------------------------|---------------------|--|---------------------------------|
| 1 March, April, and May 2003 | | | 69. | STMT 1 STMT 2 NONE |
| 2 June, July, and August 2003 | | | 69. | NONE |
| 3 September, October, and November 2003 | | | 69. | NONE |
| 4 December 2003; January and February 2004 | | | 69. | NONE |
| 5 March, April, and May 2004 | | | 69. | NONE |
| 6 June, July, and August 2004 | | | 69. | NONE |
| 7 September, October, and November 2004 | | | 69. | NONE |
| 8 December 2004; January and February 2005 | | | 69. | NONE |
| 9 March, April, and May 2005 | | | 69. | NONE |
| 10 June, July, and August 2005 | | | 69. | NONE |
| 11 September, October, and November 2005 | | | 69. | NONE |
| 12 December 2005; January and February 2006 | | | 69. | NONE |
| 13 March, April, and May 2006 | | | 69. | NONE |
| 14 June and July 2006 | | | 69. | NONE |
| 15 Add lines 1-14 in columns (d) and (e) | | | 966. | NONE |
| 16 Total credit or refund requested. Add columns (d) and (e) on line 15. Enter here and on Form 1040, line 71; Form 1040A, line 42; Form 1040EZ, line 9; Form 1040EZ-T, line 1a; Form 1040NR, line 69; Form 1040NR-EZ, line 21; Form 1120, line 32g; Form 1120-A, line 28g; Form 1120S, line 23d; Form 1041, line 24f; Form 1041-N, line 17; Form 1065, line 23; Form 990-T, line 44f; or the proper line of other returns ▶ | | | | 966. |

For Paperwork Reduction Act Notice, see page 2.

Form **8913** (2006)

