Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

A  For the 2005 calendar year, or tax year beginning JUN 28, 2005 and ending DEC 31, 2005

B  Check if applicable

C  Name of organization
APS FOUNDATION OF AMERICA, INC.

D  Employer identification number
20-3085295

E  Telephone number
608-782-2626

F  Accounting method
X  Cash

G  Website
WWW.APSFA.ORG

H  I and I are not applicable to section 527 organizations:
H(a) Is this a group return for affiliates? Yes  X No
H(b) If "Yes," enter number of affiliates
N/A
H(c) Are all affiliates included? Yes  X No
(If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes  X No

I  Group Exemption Number
N/A

J  Organization type
X  501(c)(3)  501(c)(4)  501(c)(5)  501(c)(6)  501(c)(7)  527

K  Check here  X if the organization’s gross receipts are normally not more than $5,000.00. 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
2,787

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Expenses</th>
<th>Net Assets</th>
</tr>
</thead>
</table>
| a  Contributions, gifts, grants, and similar amounts received:
  a  Direct public support
  b  Indirect public support
  c  Government contributions (grants)
  d  Total (add lines 1a through 1c) (cash $1,260.00, noncash $1,140.00)
  e  Interest on savings and temporary cash investments
  f  Dividends and interest from securities
  g  Gross rents
  h  Less: rental expenses
  i  Net rental income or (loss) (subtract line 6b from line 6a)
  j  Other investment income (describe)
  k  Gross amount from sales of assets other than inventory
  l  Less: cost or other basis and sales expenses
  m  Gain or (loss) (attach schedule)
  n  Net gain or (loss) (combine line 8c, columns (A) and (B))
  o  Special events and activities (attach schedule). If any amount is from gaming, check here
  p  Gross revenue (not including $1,387 from special events (subtract line 9b from line 9a))
  q  Less: direct expenses other than fundraising expenses
  r  Net income or (loss) from special events (subtract line 9b from line 9a)
  s  Gross sales of inventory, less returns and allowances
  t  Less: cost of goods sold
  u  STMT 1
  v  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10b, and 11)
  w  Program services (from line 44, column (B))
  x  Management and general (from line 44, column (C))
  y  Fundraising (from line 44, column (D))
  z  Payments to affiliates (attach schedule)
  {  Total expenses (add lines 16 and 44, column (A))
  |  Excess or (deficit) for the year (subtract line 17 from line 12)
  |  Net assets or fund balances at beginning of year (from line 73, column (A))
  |  Changes in net assets or fund balances (attach explanation)
  |  Total net assets or fund balances at end of year (combine lines 18, 19, and 20) |
### 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.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total</th>
<th>(B) Program services</th>
<th>(C) Management and general</th>
<th>(D) Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Grants and allocations (attach schedule)</td>
<td>$0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>(cash)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(noncash)</td>
<td>22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Specific assistance to individuals (attach schedule)</td>
<td>23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Benefits paid to or for members (attach schedule)</td>
<td>24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Compensation of officers, directors, etc.</td>
<td>25</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>26</td>
<td>Other salaries and wages</td>
<td>26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Pension plan contributions</td>
<td>27</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Other employee benefits</td>
<td>28</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>Payroll taxes</td>
<td>29</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>Professional fundraising fees</td>
<td>30</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Accounting fees</td>
<td>31</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Legal fees</td>
<td>32</td>
<td>1,300</td>
<td>1,300</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Supplies</td>
<td>33</td>
<td>32</td>
<td></td>
<td>32</td>
</tr>
<tr>
<td>34</td>
<td>Telephone</td>
<td>34</td>
<td>405</td>
<td>405</td>
<td></td>
</tr>
<tr>
<td>35</td>
<td>Postage and shipping</td>
<td>35</td>
<td>54</td>
<td></td>
<td>54</td>
</tr>
<tr>
<td>36</td>
<td>Occupancy</td>
<td>36</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>37</td>
<td>Equipment rental and maintenance</td>
<td>37</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>38</td>
<td>Printing and publications</td>
<td>38</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39</td>
<td>Travel</td>
<td>39</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>40</td>
<td>Conferences, conventions, and meetings</td>
<td>40</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>41</td>
<td>Interest</td>
<td>41</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>42</td>
<td>Depreciation, depletion, etc. (attach schedule)</td>
<td>42</td>
<td>17</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>43</td>
<td>Other expenses not covered above (itemize):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>ADVERTISING</td>
<td>43a</td>
<td>43</td>
<td>43</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>BANK CHARGES</td>
<td>43b</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>OFFICE EXPENSES</td>
<td>43c</td>
<td>46</td>
<td>46</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td>43d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td>43e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td></td>
<td>43f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td></td>
<td>43g</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>44</td>
<td>Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)</td>
<td></td>
<td>1,899</td>
<td>405</td>
<td>1,494</td>
</tr>
</tbody>
</table>

**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.

Form 990 (2005)
### 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 STATEMENT 2

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.)

<table>
<thead>
<tr>
<th>Program Service Expenses</th>
<th>(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a TO PROVIDE INFORMATION AND EDUCATION ON ANTIPHOSPHOLIPID ANTIBODY SYNDROME</td>
<td></td>
</tr>
<tr>
<td>(Grants and allocations $ ) If this amount includes foreign grants, check here □</td>
<td>405</td>
</tr>
<tr>
<td>b TO SUPPORT RESEARCH REGARDING ANTIPHOSPHOLIPID ANTIBODY SYNDROME</td>
<td></td>
</tr>
<tr>
<td>(Grants and allocations $ ) If this amount includes foreign grants, check here □</td>
<td>0</td>
</tr>
<tr>
<td>c</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
</tr>
<tr>
<td>(Grants and allocations $ ) If this amount includes foreign grants, check here □</td>
<td></td>
</tr>
<tr>
<td>e Other program services (attach schedule)</td>
<td>(Grants and allocations $ ) If this amount includes foreign grants, check here □</td>
</tr>
<tr>
<td>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</td>
<td>405</td>
</tr>
</tbody>
</table>
### Balance Sheets

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>45</td>
<td>Cash - non-interest-bearing</td>
<td>45</td>
</tr>
<tr>
<td>46</td>
<td>Savings and temporary cash investments</td>
<td>46</td>
</tr>
<tr>
<td>47a</td>
<td>Accounts receivable</td>
<td>47a</td>
</tr>
<tr>
<td>47b</td>
<td>Less: allowance for doubtful accounts</td>
<td>47b</td>
</tr>
<tr>
<td>48a</td>
<td>Pledges receivable</td>
<td>48a</td>
</tr>
<tr>
<td>48b</td>
<td>Less: allowance for doubtful accounts</td>
<td>48b</td>
</tr>
<tr>
<td>49</td>
<td>Grants receivable</td>
<td>49</td>
</tr>
<tr>
<td>50</td>
<td>Receivables from officers, directors, trustees, and key employees</td>
<td>50</td>
</tr>
<tr>
<td>51a</td>
<td>Other notes and loans receivable</td>
<td>51a</td>
</tr>
<tr>
<td>51b</td>
<td>Less: allowance for doubtful accounts</td>
<td>51b</td>
</tr>
<tr>
<td>52</td>
<td>Inventories for sale or use</td>
<td>52</td>
</tr>
<tr>
<td>53</td>
<td>Prepaid expenses and deferred charges</td>
<td>53</td>
</tr>
<tr>
<td>54</td>
<td>Investments - securities</td>
<td>54</td>
</tr>
<tr>
<td>55a</td>
<td>Investments - land, buildings, and equipment: basis</td>
<td>55a</td>
</tr>
<tr>
<td>55b</td>
<td>Less: accumulated depreciation</td>
<td>55b</td>
</tr>
<tr>
<td>56</td>
<td>Investments - other</td>
<td>56</td>
</tr>
<tr>
<td>57a</td>
<td>Land, buildings, and equipment: basis</td>
<td>57a</td>
</tr>
<tr>
<td>57b</td>
<td>Less: accumulated depreciation</td>
<td>57b</td>
</tr>
<tr>
<td>58</td>
<td>Other assets (describe)</td>
<td>58</td>
</tr>
<tr>
<td>59</td>
<td>Total assets (must equal line 74; Add lines 45 through 58)</td>
<td>59</td>
</tr>
<tr>
<td>60</td>
<td>Accounts payable and accrued expenses</td>
<td>60</td>
</tr>
<tr>
<td>61</td>
<td>Grants payable</td>
<td>61</td>
</tr>
<tr>
<td>62</td>
<td>Deferred revenue</td>
<td>62</td>
</tr>
<tr>
<td>63</td>
<td>Loans from officers, directors, trustees, and key employees</td>
<td>63</td>
</tr>
<tr>
<td>64a</td>
<td>Tax-exempt bond liabilities</td>
<td>64a</td>
</tr>
<tr>
<td>64b</td>
<td>Mortgages and other notes payable</td>
<td>64b</td>
</tr>
<tr>
<td>65</td>
<td>Other liabilities (describe)</td>
<td>65</td>
</tr>
<tr>
<td>66</td>
<td>Total liabilities. Add lines 60 through 65</td>
<td>66</td>
</tr>
<tr>
<td>67</td>
<td>Organizations that follow SFAS 117, check here ✔ and complete lines 67 through 69 and lines 73 and 74.</td>
<td>67</td>
</tr>
<tr>
<td>68</td>
<td>Unrestricted</td>
<td>68</td>
</tr>
<tr>
<td>69</td>
<td>Temporarily restricted</td>
<td>69</td>
</tr>
<tr>
<td>70a</td>
<td>Organizations that do not follow SFAS 117, check here ❌ and complete lines 70 through 74.</td>
<td>70</td>
</tr>
<tr>
<td>71</td>
<td>Capital stock, trust principal, or current funds</td>
<td>71</td>
</tr>
<tr>
<td>72</td>
<td>Paid-in or capital surplus, or land, building, and equipment fund</td>
<td>72</td>
</tr>
<tr>
<td>73</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>73</td>
</tr>
<tr>
<td>74</td>
<td>Total net assets of fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)</td>
<td>74</td>
</tr>
<tr>
<td>75</td>
<td>Total liabilities and net assets/fund balances. Add lines 66 and 73</td>
<td>75</td>
</tr>
</tbody>
</table>
Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Part IV-A

a. Total revenue, gains, and other support per audited financial statements
   b. Amounts included on line a but not on Part I, line 12:
      1. Net unrealized gains on investments
      2. Donated services and use of facilities
      3. Recoveries of prior year grants
      4. Other (specify):
         Add lines b1 through b4
   c. Subtract line b from line a
   d. Amounts included on Part I, line 12, but not on line a:
      1. Investment expenses not included on Part I, line 6b
      2. Other (specify):
         Add lines d1 and d2
   e. Total revenue (Part I, line 12). Add lines c and d

Part IV-B

a. Total expenses and losses per audited financial statements
   b. Amounts included on line a but not on Part I, line 17:
      1. Donated services and use of facilities
      2. Prior year adjustments reported on Part I, line 20
      3. Losses reported on Part I, line 20
      4. Other (specify):
         Add lines b1 through b4
   c. Subtract line b from line a
   d. Amounts included on Part I, line 17, but not on line a:
      1. Investment expenses not included on Part I, line 6b
      2. Other (specify):
         Add lines d1 and d2
   e. Total expenses (Part I, line 17). Add lines c and d

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)

<table>
<thead>
<tr>
<th>(A) Name and address</th>
<th>(B) Title and average hours per week devoted to position</th>
<th>(C) Compensation (If not paid, enter 0.)</th>
<th>(D) Contributions to employees' benefit plans &amp; deferred compensation plans</th>
<th>(E) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHRISTINA M POHLMAN</td>
<td>PRESIDENT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>624 NORTH 10TH STREET #4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LA CROSSE, WI 54601</td>
<td>40.00</td>
<td>0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>HEIDI A PONAGAI</td>
<td>VICE PRESIDENT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26155 PALMER STREET</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MADISON HEIGHTS, WI 48071</td>
<td>30.00</td>
<td>0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>TODD PONAGAI</td>
<td>TREASURER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26155 PALMER STREET</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MADISON HEIGHTS, WI 48071</td>
<td>10.00</td>
<td>0.</td>
<td></td>
<td>0.</td>
</tr>
</tbody>
</table>

520641 02-03-98

Page 5
### Part V-A: Current Officers, Directors, Trustees, and Key Employees (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>75a</td>
<td>Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings</td>
<td></td>
</tr>
<tr>
<td>75b</td>
<td>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 &quot;Yes,&quot; attach a statement that identifies the individuals and explains the relationship(s).</td>
<td>X</td>
</tr>
<tr>
<td>75c</td>
<td>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 this organization through common supervision or common control?</td>
<td>X</td>
</tr>
<tr>
<td><strong>Note.</strong> Related organizations include section 509(a)(3) supporting organizations. If &quot;Yes,&quot; attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75d</td>
<td>Does the organization have a written conflict of interest policy?</td>
<td>X</td>
</tr>
</tbody>
</table>

### Part V-B: Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

If any former 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.

<table>
<thead>
<tr>
<th>(A) Name and address</th>
<th>(B) Loans and Advances</th>
<th>(C) Compensation</th>
<th>(D) Contributions to employee benefit plans &amp; deferred compensation plans</th>
<th>(E) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>...</td>
<td></td>
<td></td>
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<td>...</td>
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<tr>
<td>...</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### Part VI: Other Information (See the instructions.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>76a</td>
<td>Did the organization engage in any activity not previously reported to the IRS? If &quot;Yes,&quot; attach a detailed description of each activity</td>
<td>X</td>
</tr>
<tr>
<td>77</td>
<td>Were any changes made in the organizing or governing documents but not reported to the IRS? If &quot;Yes,&quot; attach a conforming copy of the changes.</td>
<td>X</td>
</tr>
<tr>
<td>78a</td>
<td>Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?</td>
<td>X</td>
</tr>
<tr>
<td>78b</td>
<td>If &quot;Yes,&quot; has it filed a tax return on Form 990-T for this year?</td>
<td>N/A</td>
</tr>
<tr>
<td>79</td>
<td>Was there a liquidation, dissolution, termination, or substantial contraction during the year? If &quot;Yes,&quot; attach a statement.</td>
<td>X</td>
</tr>
<tr>
<td>80a</td>
<td>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?</td>
<td>X</td>
</tr>
<tr>
<td>81a</td>
<td>Enter direct or indirect political expenditures. (See line 81 instructions.)</td>
<td>0</td>
</tr>
<tr>
<td>81b</td>
<td>Did the organization file Form 1120-POL for this year?</td>
<td>X</td>
</tr>
</tbody>
</table>
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?  
   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.)  
   82a X

83 a Did the organization comply with the public inspection requirements for returns and exemption applications?  
   b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?  
   83a X

84 a Did the organization solicit any contributions or gifts that were not tax deductible?  
   b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  
   84a X

85 a 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?  
   b Did the organization make only in-house lobbying expenditures of $2,000 or less?  
   85a N/A

86 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 12  
   b Gross receipts, included on line 12, for public use of club facilities  
   86a N/A

87 501(c)(12) organizations. Enter: a Gross income from members or shareholders  
   b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)  
   87a 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  
   88 X

89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:  
   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  
   c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  
   d Enter: Amount of tax on line 89c raised by reimbursement of the organization  
   89b X

90 a List the states with which a copy of this return is filed  
   b Number of employees employed in the pay period that includes March 12, 2005  
   90b 0

91 a The books are in care of CHRISTINA POHLMAN Telephone no 608-782-2626  
   Located at 624 NORTH 10TH STREET #4, LA CROSSE, WI ZIP + 4 54601

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.  
   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  

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**

<table>
<thead>
<tr>
<th>Note: Enter gross amounts unless otherwise indicated.</th>
</tr>
</thead>
<tbody>
<tr>
<td>93 Program service revenue:</td>
</tr>
<tr>
<td>a</td>
</tr>
<tr>
<td>b</td>
</tr>
<tr>
<td>c</td>
</tr>
<tr>
<td>d</td>
</tr>
<tr>
<td>e</td>
</tr>
<tr>
<td>f</td>
</tr>
<tr>
<td>g</td>
</tr>
<tr>
<td>94 Membership dues and assessments</td>
</tr>
<tr>
<td>95 Interest on savings and temporary cash investments</td>
</tr>
<tr>
<td>96 Dividends and interest from securities</td>
</tr>
<tr>
<td>97 Net rental income or (loss) from real estate:</td>
</tr>
<tr>
<td>a</td>
</tr>
<tr>
<td>b</td>
</tr>
<tr>
<td>98 Net rental income or (loss) from personal property</td>
</tr>
<tr>
<td>99 Other investment income</td>
</tr>
<tr>
<td>100 Gain or (loss) from sales of assets</td>
</tr>
<tr>
<td>other than inventory</td>
</tr>
<tr>
<td>101 Net income or (loss) from special events</td>
</tr>
<tr>
<td>102 Gross profit or (loss) from sales of inventory</td>
</tr>
<tr>
<td>103 Other revenue:</td>
</tr>
<tr>
<td>a</td>
</tr>
<tr>
<td>b</td>
</tr>
<tr>
<td>c</td>
</tr>
<tr>
<td>d</td>
</tr>
<tr>
<td>e</td>
</tr>
<tr>
<td>104 Subtotal (add columns (B), (C), and (E))</td>
</tr>
<tr>
<td>105 Total (add line 104, columns (B), (C), and (E))</td>
</tr>
</tbody>
</table>

**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**

<table>
<thead>
<tr>
<th>Line No.</th>
<th>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).</th>
</tr>
</thead>
<tbody>
<tr>
<td>102</td>
<td>TO PROMOTE PUBLIC AWARENESS OF ANTIPHOSPHOLIPID ANTIBODY SYNDROME</td>
</tr>
<tr>
<td>102</td>
<td>THROUGH PROMOTIONAL ITEMS</td>
</tr>
</tbody>
</table>

**Part IX | Information Regarding Taxable Subsidiaries and Disregarded Entities**

<table>
<thead>
<tr>
<th>(A) Name, address, and EIN of corporation, partnership, or disregarded entity</th>
<th>(B) Percentage of ownership interest</th>
<th>(C) Nature of activities</th>
<th>(D) Total income</th>
<th>(E) End-of-year assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
</tbody>
</table>

**Part X | Information Regarding Transfers Associated with Personal Benefit Contracts**

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

**Please Sign**

<table>
<thead>
<tr>
<th>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. (Preparer's signature)</th>
<th>Matthew T. Nelson</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of officer</td>
<td>Signature of officer</td>
</tr>
<tr>
<td>Date</td>
<td>05/11/06</td>
</tr>
<tr>
<td>Type or print name and title</td>
<td></td>
</tr>
</tbody>
</table>

**Paid**

<table>
<thead>
<tr>
<th>Preparer's signature</th>
<th>Matthew T. Nelson</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>05/11/06</td>
</tr>
<tr>
<td>Check if self-employed</td>
<td></td>
</tr>
<tr>
<td>Preparer's SSN or PTIN</td>
<td></td>
</tr>
</tbody>
</table>

**Use Only**

<table>
<thead>
<tr>
<th>Firm's name (or years if self-employed), address, and ZIP code</th>
<th>NELSON &amp; ASSOCIATES, SC P.O. BOX 98 LA CROSSE, WI 54602-0098</th>
</tr>
</thead>
<tbody>
<tr>
<td>FPI</td>
<td>(608) 782-8410</td>
</tr>
</tbody>
</table>

Form 990 (2005)
Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust
Supplementary Information—(See separate instructions.)
➤ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization: APS FOUNDATION OF AMERICA, INC.
Employer identification number: 20-3085295

Part I
Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000

(b) Title and average hours per week devoted to position

(c) Compensation

(d) Contributions to employees 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
Part III  Statements About Activities  (See page 2 of the instructions.)

1  During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum?  If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities $ ___________ $ ___________  (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

   Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B and attach a statement giving a detailed description of the lobbying activities.

   (a) Sale, exchange, or leasing of property?  2a  X
   (b) Lending of money or other extension of credit?  2b  X
   (c) Furnishing of goods, services, or facilities?  2c  X
   (d) Payment of compensation (or payment or reimbursement of expenses) if more than $1,000?  2d  X
   (e) Transfer of any part of its income or assets?  2e  X

2  During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, major owner, or principal beneficiary?  (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

   a.  Sale, exchange, or leasing of property?  2a  X
   b.  Lending of money or other extension of credit?  2b  X
   c.  Furnishing of goods, services, or facilities?  2c  X
   d.  Payment of compensation (or payment or reimbursement of expenses) if more than $1,000?  2d  X
   e.  Transfer of any part of its income or assets?  2e  X

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

The organization is not a private foundation because it is:  (Please check only ONE applicable box.)

   5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
   6  A school. Section 170(b)(1)(A)(ii).  (Also complete Part V.)
   7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
   8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(iv).
   9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(vii). Enter the hospital's name, city, and state.  

   10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(vii).  (Also complete the Support Schedule in Part IV-A.)

   11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public.  

   Section 170(b)(1)(A)(viii).  (Also complete the Support Schedule in Part IV-A.)

   11b  A community trust. Section 170(b)(1)(A)(ix).  (Also complete the Support Schedule in Part IV-A.)

   12  An organization that normally receives:  (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.  See section 509(a)(2).  (Also complete the Support Schedule in Part IV-A.)

13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in:  (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2).  Check the box that describes the type of supporting organization.  

   (a) Name(s) of supported organization(s)  

   (b) Line number from above  

   (c) Type 1  

   (d) Type 2  

   (e) Type 3  

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

   (a) Name(s) of supported organization(s)  

   (b) Line number from above  

14  An organization organized and operated to test for public safety. Section 509(a)(4).  (See page 6 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2005  APS FOUNDATION OF AMERICA, INC.  20-3085295  Page 2
### 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.*

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2004</th>
<th>(b) 2003</th>
<th>(c) 2002</th>
<th>(d) 2001</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Membership fees received</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Net income from unrelated business activities not included in line 18</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Other income. Attach a schedule. Do not include gain or loss from sale of capital assets</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Total of lines 15 through 22</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Line 23 minus line 17</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>25 Enter 1% of line 23</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Total support for section 509(a)(1) test: Enter line 24, column (e)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Add: Amounts from column (e) for lines: 18</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>0</td>
<td>22b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Public support (line 26c minus line 26d total)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Public support percentage (line 26e (numerator) divided by line 26f (denominator))</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Public support percentage (line 26e (numerator) divided by line 26f (denominator))</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a &quot;disqualified person,&quot; prepare a list for your records to show the name of, and total amounts received in each year from, each &quot;disqualified person.&quot; Do not file this list with your return. Enter the sum of such amounts for each year:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2004)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2003)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2002)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2001)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b For any amount included in line 17 that was received from each person (other than &quot;disqualified persons&quot;), 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:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2004)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2003)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2002)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2001)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add: Amounts from column (e) for lines: 17</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>0</td>
<td>21b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Add: Line 27a total and line 27b total</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Public support (line 27c total minus line 27d total)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)</td>
<td>27f</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Public support percentage (line 27e (numerator) divided by line 27f (denominator))</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part V: Private School Questionnaire

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; please describe; if &quot;No,&quot; please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32 Does the organization maintain the following:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Records indicating the racial composition of the student body, faculty, and administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Copies of all material used by the organization or on its behalf to solicit contributions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;No&quot; to any of the above, please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33 Does the organization discriminate by race in any way with respect to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Students' rights or privileges?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Admissions policies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Employment of faculty or administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Scholarships or other financial assistance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Educational policies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Use of facilities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Athletic programs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Other extracurricular activities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to any of the above, please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34 a Does the organization receive any financial aid or assistance from a governmental agency?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Has the organization's right to such aid ever been revoked or suspended?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to either 34a or b, please explain using an attached statement.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;No,&quot; attach an explanation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part VI-A  Lobbying Expenditures by Electing Public Charities

(See page 9 of the instructions.)(To be completed ONLY by an eligible organization that filed Form 5768)

Check [ ] if the organization belongs to an affiliated group. Check [ ] if you checked "a" and "limited control" provisions apply.

<table>
<thead>
<tr>
<th>(a) Affiliated group totals</th>
<th>(b) To be completed for ALL electing organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>36 Total lobbying expenditures to influence public opinion (grassroots lobbying)</td>
<td>36</td>
</tr>
<tr>
<td>37 Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>37</td>
</tr>
<tr>
<td>38 Total lobbying expenditures (add lines 36 and 37)</td>
<td>38</td>
</tr>
<tr>
<td>39 Other exempt purpose expenditures</td>
<td>39</td>
</tr>
<tr>
<td>40 Total exempt purpose expenditures (add lines 38 and 39)</td>
<td>40</td>
</tr>
<tr>
<td>41 Lobbying nontaxable amount. Enter the amount from the following table. If the amount is less than $1,000,000, multiply it by 20%.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The lobbying nontaxable amount is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not over $500,000</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $1,700,000</td>
</tr>
<tr>
<td>Over $1,700,000</td>
</tr>
</tbody>
</table>

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)

(See page 9 of the instructions.)(To be completed ONLY by an eligible organization that filed Form 5768)

### Lobbying Expenditures During 4-Year Averaging Period

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>2005</th>
<th>2004</th>
<th>2003</th>
<th>2002</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>45 Lobbying nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>46 Lobbying ceiling amount (150% of line 45(c))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>47 Total lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>48 Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>49 Grassroots ceiling amount (150% of line 48(c))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>50 Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
</tbody>
</table>

## Part VI-B  Lobbying Activity by Nonelecting Public Charities

(See page 9 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 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.
### Part VII | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

(See page 12 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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Cash</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>(ii) Other assets</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Sales or exchanges of assets with a noncharitable exempt organization</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>(ii) Purchases of assets from a noncharitable exempt organization</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>(iii) Rental of facilities, equipment, or other assets</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>(iv) Reimbursement arrangements</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>(v) Loans or loan guarantees</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>(vi) Performance of services or membership or fundraising solicitations</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sharing of facilities, equipment, mailing lists, other assets, or paid employees</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

52  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?

<table>
<thead>
<tr>
<th>(a) Name of organization</th>
<th>(b) Type of organization</th>
<th>(c) Description of relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

N/A
<table>
<thead>
<tr>
<th>Description</th>
<th>Date Acquired</th>
<th>Method</th>
<th>Life</th>
<th>Asset No.</th>
<th>36M</th>
<th>42</th>
<th>063005</th>
<th>17</th>
<th>17</th>
<th>17</th>
</tr>
</thead>
<tbody>
<tr>
<td>MANAGEMENT AND GENERAL</td>
<td>1 QUICKBOOKS SOFTWARE</td>
<td>063005</td>
<td>36M</td>
<td>42</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
### INCOME

1. GROSS RECEIPTS .......................... 387
2. RETURNS AND ALLOWANCES .................
3. LINE 1 LESS LINE 2 ....................... 387

4. COST OF GOODS SOLD (LINE 13) ........... 233
5. GROSS PROFIT (LINE 3 LESS LINE 4) ....... 154

### COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR .........
7. MERCHANDISE PURCHASED .................. 325
8. COST OF LABOR .............................
9. MATERIALS AND SUPPLIES .................
10. OTHER COSTS ................................
11. ADD LINES 6 THROUGH 10 ................. 325

12. INVENTORY AT END OF YEAR ............... 92
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12) .... 233
EXPLANATION

TO FOSTER AND FACILITATE JOINT EFFORTS IN THE AREAS OF EDUCATION, SUPPORT, RESEARCH, PATIENT SERVICES AND PUBLIC AWARENESS OF ANTIPHOSPHOLIPID ANTIBODY SYNDROME IN AN EFFECTIVE AND ETHICAL MANNER.

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>COST OR OTHER BASIS</th>
<th>ACCUMULATED DEPRECIATION</th>
<th>BOOK VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>QUICKBOOKS SOFTWARE</td>
<td>100.</td>
<td>17.</td>
<td>83.</td>
</tr>
</tbody>
</table>

TOTAL TO FORM 990, PART IV, LN 57  
100.  
17.  
83.
## Form 4562
### Depreciation and Amortization

**Incorporated Information on Listed Property**

**Part I**

1. Maximum amount. See the instructions for a higher limit for certain businesses: 105,000.
2. Total cost of section 179 property placed in service (see instructions). 420,000.
3. Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter 0:
4. Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter 0:

**Part II**

- **Special Depreciation Allowance and Other Depreciation**
  - Do not include listed property.
  - 14. Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property (other than listed property) placed in service during the tax year:
  - 15. Property subject to section 168(f)(1) election:
  - 16. Other depreciation (including ACRS):

**Part III**

- **MACRS Depreciation** (Do not include listed property.) (See instructions.)

### Section A

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

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

- **Classification of property**
- **Month and year placed in service**
- **Basis for depreciation (business/investment use only - see instructions)**
- **Recovery period**
- **Convention**
- **Method**
- **Depreciation deduction**

| 19a | 3-year property | 25 yrs. | S/L |
| 19b | 5-year property | 25 yrs. | S/L |
| 19c | 7-year property | 25 yrs. | S/L |
| 19d | 10-year property | 25 yrs. | S/L |
| 19e | 15-year property | 25 yrs. | S/L |
| 19f | 20-year property | 25 yrs. | S/L |
| 19g | 25-year property | 25 yrs. | S/L |
| 19h | Residential rental property | 25 yrs. | S/L |
| 19i | Nonresidential real property | 25 yrs. | S/L |

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

- **Classification of property**
- **Month and year placed in service**
- **Basis for depreciation (business/investment use only - see instructions)**
- **Recovery period**
- **Convention**
- **Method**
- **Depreciation deduction**

| 20a | Class life | 12 yrs. | S/L |
| 20b | 12-year property | 12 yrs. | S/L |
| 20c | 40-year property | 12 yrs. | S/L |

### Part IV - Summary (see instructions)

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

---

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

LHA For Paperwork Reduction Act Notice, see separate instructions.
**Part V**

**Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

### Section A - Depreciation and Other Information

(Caution: See the instructions for limits for passenger automobiles.)

24a. Do you have evidence to support the business/investment use claimed? **Yes** | **No**

<table>
<thead>
<tr>
<th>(a) Type of property (list vehicles first)</th>
<th>(b) Date placed in service</th>
<th>(c) Business/investment use percentage</th>
<th>(d) Other basis</th>
<th>(e) Basis for depreciation (business/investment use only)</th>
<th>(f) Recovery period</th>
<th>(g) Method/Convention</th>
<th>(h) Depreciation deduction</th>
<th>(i) Elected section 179 cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property placed in service during the tax year and used more than 50% in a qualified business use</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>S/L</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property used more than 50% in a qualified business use:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td>%</td>
<td>S/L</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property used 50% or less in a qualified business use:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td>%</td>
<td>S/L</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

25. Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1

26. Add amounts in column (i), line 26. Enter here and on line 7, page 1

### Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

<table>
<thead>
<tr>
<th>(a) Vehicle</th>
<th>(b) Vehicle</th>
<th>(c) Vehicle</th>
<th>(d) Vehicle</th>
<th>(e) Vehicle</th>
<th>(f) Vehicle</th>
</tr>
</thead>
</table>

30. Total business/investment miles driven during the year (do not include commuting miles)

31. Total commuting miles driven during the year

32. Total other personal (noncommuting) miles driven

33. Total miles driven during the year.

34. Was the vehicle available for personal use during off-duty hours? **Yes** | **No**

35. Was the vehicle used primarily by a more than 5% owner or related person? **Yes** | **No**

36. Is another vehicle available for personal use? **Yes** | **No**

### Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? **Yes** | **No**

38. Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners

39. Do you treat all use of vehicles by employees as personal use?

40. Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?

41. Do you meet the requirements concerning qualified automobile demonstration use? **Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

<table>
<thead>
<tr>
<th>(a) Description of costs</th>
<th>(b) Date amortization begins</th>
<th>(c) Amortizable amount</th>
<th>(d) Code section</th>
<th>(e) Amortization period or percentage</th>
<th>(f) Amortization for this year</th>
</tr>
</thead>
</table>

42. Amortization of costs that begins during your 2005 tax year: **QUICKBOOKS SOFTWARE 063005 100. 36M 17.**

43. Amortization of costs that began before your 2005 tax year

44. Total. Add amounts in column (f). See the instructions for where to report

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

S10252/01-05-06