

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)

2006

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **2006** calendar year, or tax year beginning **2006**, and ending **20**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization: **REACT INTERNATIONAL, INC.**
 Number and street (or P O box if mail is not delivered to street address) Room/suite: **5210 AUTH ROAD**
 City or town, state or country, and ZIP + 4: **SUITLAND, MD 20746-4393**

D Employer identification number: **51-0168558**

E Telephone number: **301-316-2900**

F Accounting method: Cash Accrual
 Other (specify) ▶

G Website: ▶

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

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

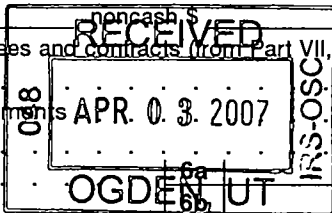
L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **93,242**

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

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

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

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a		20	
	b Direct public support (not included on line 1a)	1b			
	c Indirect public support (not included on line 1a)	1c			
	d Government contributions (grants) (not included on line 1a)	1d			
	e Total (add lines 1a through 1d) (cash \$ _____ non-cash \$ _____)	1e			20
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			0
	3 Membership dues and assessments	3			55,848
	4 Interest on savings and temporary cash investments	4			2,191
	5 Dividends and interest from securities	5			6,002
	6a Gross rents				
	b Less: rental expenses				
c Net rental income or (loss). Subtract line 6b from line 6a	6c			0	
7 Other investment income (describe ▶ _____)	7				
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	24,181	8a			
	24,177	8b			
	4	8c	0		
d Net gain or (loss). Combine line 8c, columns (A) and (B)	8d			4	
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	a Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a			
	b Less: direct expenses other than fundraising expenses	9b			
	c Net income or (loss) from special events. Subtract line 9b from line 9a	9c			0
10a Gross sales of inventory, less returns and allowances	3,909	10a			
	3,839	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			70
11 Other revenue (from Part VII, line 103)	11			1,091	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			65,226	
Expenses	13 Program services (from line 44, column (B))	13		50,316	
	14 Management and general (from line 44, column (C))	14		10,700	
	15 Fundraising (from line 44, column (D))	15			
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses. Add lines 16 and 44, column (A)	17			61,016
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18		4,210	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		108,198	
	20 Other changes in net assets or fund balances (attach explanation)	20		8,146	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21			120,554



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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	0			
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	0			
23	Specific assistance to individuals (attach schedule)	0			
24	Benefits paid to or for members (attach schedule)	0			
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	0			
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	0			
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	0			
26	Salaries and wages of employees not included on lines 25a, b, and c	15,716	13,359	2,357	
27	Pension plan contributions not included on lines 25a, b, and c	0			
28	Employee benefits not included on lines 25a - 27	213		213	
29	Payroll taxes	1,288	1,095	193	
30	Professional fundraising fees	0			
31	Accounting fees	3,600		3,600	
32	Legal fees	525	446	79	
33	Supplies	1,903	1,618	285	
34	Telephone	1,623	1,380	243	
35	Postage and shipping	4,076	2,660	1,416	
36	Occupancy	9,960	8,466	1,494	
37	Equipment rental and maintenance	2,765	2,350	415	
38	Printing and publications	17,508	17,508		
39	Travel	0			
40	Conferences, conventions, and meetings	1,434	1,434		
41	Interest	0			
42	Depreciation, depletion, etc. (attach schedule)	0			
43	Other expenses not covered above (itemize):				
a	<u>BANK SERVICE CHARGES</u>	405		405	
b	_____	0			
c	_____	0			
d	_____	0			
e	_____	0			
f	_____	0			
g	_____	0			
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	61,016	50,316	10,700	

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 \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

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

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

What is the organization's primary exempt purpose? ► <u>CITIZENS RADIO SERVICE</u>	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others.)
a <u>EDUCATING 2,318 MEMBERS AND THE PUBLIC THROUGH A BI-MONTHLY NEWSLETTER ABOUT USING PERSONAL RADIO SERVICES FOR EMERGENCY AID TO INDIVIDUALS, PROMOTE TRANSPORTATION SAFETY</u> (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	27,395
b <u>MAKE PERSONAL EQUIPMENT AVAILABLE FOR USE AT COMMUNITY EVENTS. PARTICIPATE IN CITIZENS CRIME PREVENTION PROGRAMS. PROVIDE SUPPORT SERVICES TO VOLUNTEERS OF THE ORGANIZATION THROUGH MEETINGS AND CONVENTIONS</u> (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22,921
c _____ _____ _____ _____ _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d _____ _____ _____ _____ _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). . . . ►	50,316

Part IV Balance Sheets (See the instructions.)

		(A) Beginning of year		(B) End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only					
Assets	45	Cash—non-interest-bearing	6,874	45	1,938
	46	Savings and temporary cash investments	15,295	46	16,905
	47a	Accounts receivable			
		b Less: allowance for doubtful accounts			
	47a			33	
	47b		200	47c	33
	48a	Pledges receivable			
		b Less: allowance for doubtful accounts			
	48a			48c	0
	48b				
	49	Grants receivable		49	
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
		b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a	Other notes and loans receivable (attach schedule)			
		b Less: allowance for doubtful accounts			
51a			51c	0	
51b					
52	Inventories for sale or use	15,627	52	14,219	
53	Prepaid expenses and deferred charges	7,522	53	5,517	
54a	Investments—publicly-traded securities	97,761	54a	103,945	
	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV				
	b Investments—other securities (attach schedule)		54b		
	<input type="checkbox"/> Cost <input type="checkbox"/> FMV				
55a	Investments—land, buildings, and equipment: basis		55a		
	b Less: accumulated depreciation (attach schedule)				
55a			55c	0	
55b					
56	Investments—other (attach schedule)		56		
57a	Land, buildings, and equipment: basis		57a		
	b Less: accumulated depreciation (attach schedule)				
57a			57c	0	
57b					
58	Other assets, including program-related investments (describe ► RENT DEPOSIT)	660	58	660	
59	Total assets (must equal line 74). Add lines 45 through 58	143,939	59	143,217	
Liabilities	60	Accounts payable and accrued expenses	10,400	60	2,983
	61	Grants payable		61	
	62	Deferred revenue	25,341	62	19,680
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a	Tax-exempt bond liabilities (attach schedule)		64a	
		b Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe ►)		65	
66	Total liabilities. Add lines 60 through 65	35,741	66	22,663	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted	105,198	67	117,534
	68	Temporarily restricted	3,000	68	3,020
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	108,198	73	120,554
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73	143,939	74	143,217

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

		Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ <u>12</u>			
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . .	75b		X
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶ If "Yes," attach a statement that includes the information described in the instructions.	75c		X
d Does the organization have a written conflict of interest policy?	75d		X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any 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.)

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

Part VI Other Information (See the instructions.)

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

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Part VI Other Information (continued)

		Yes	No
82a	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		
83a	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 <i>quid pro quo</i> contributions?	X	
83b			
84a	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?		
84b			
85	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? 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.		
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	0
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
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?	85h	
86	501(c)(7) orgs Enter: a Initiation fees and capital contributions included on line 12.	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI.	88b	X
89a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="text"/> ; section 4912 <input type="text"/> ; section 4955 <input type="text"/>		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction.	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text"/>		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <input type="text"/>		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90a	List the states with which a copy of this return is filed <input type="text"/> <u>ILLNOIS</u>		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.) 90b <input type="text"/> <u>1</u>		
91a	The books are in care of <input type="text"/> <u>REACT INTERNATIONAL</u> Telephone no. <input type="text"/> <u>301-316-2900</u> Located at <input type="text"/> <u>5210 AUTH RD, #403 SUITLAND MD</u> ZIP + 4 <input type="text"/> <u>20746-4325</u>		
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 <input type="text"/>	91b	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶ _____

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92** | _____

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

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					55,848
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	2,191	
96 Dividends and interest from securities			14	6,002	
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				4	
101 Net income or (loss) from special events					70
102 Gross profit or (loss) from sales of inventory					670
103 Other revenue: a Late fees					
b publication advert.	51120	421			
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		421		8,197	56,588
105 Total (add line 104, columns (B), (D), and (E))					65,206

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

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

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93 TO 103	TO PROMOTE THE USE OF THE CITIZEN BAND RADIO SERVICES AND OTHER PERSONAL RADIO SERVICES AS AN ADDITIONAL SOURCE OF COMMUNICATION FOR EMERGENCIES, DISASTERS AND OTHER FORMS OF AID TO THE PUBLIC

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
	%			
	%			
	%			

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

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

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

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

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

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
---	-----	----

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

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
--	-----	----

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

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	Yes	No
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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 <u>Norman Kaplan</u>	Date <u>2/20/2007</u>
	Type or print name and title <u>NORMAN KAPLAN</u>	<u>TREASURER</u>

Paid Preparer's Use Only	Preparer's signature <u>Aure A Plante CPA</u>	Date <u>2/12/07</u>	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst X)
	Firm's name (or yours if self-employed), address, and ZIP + 4 <u>SINGLETON & BARDOWSKI, LLC</u> <u>10107 GRANDHAVEN AVE UPR MARLBORO, MD</u>	EIN <u>52-1160954</u>	Phone no <u>301-627-7937</u>	

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

2006

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

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

Name of the organization: **REACT INTERNATIONAL, INC.** Employer identification number: **51-0168558**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 ▶				

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 ▶		

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 ▶		

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line of Part VI-B.)		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		X
b Did the organization have a section 403(b) annuity plan for its employees?		X
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
b Did the organization make any taxable distributions under section 4966?		X
c Did the organization make a distribution to a donor, donor advisor, or related person?		X
d Enter the total number of donor advised funds owned at the end of the tax year ▶		0
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year . . . ▶		0
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶		0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶		0

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

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

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

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

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

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

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	3,826	186	1,341	8,663	14,016
16 Membership fees received	53,569	57,691	60,322	63,465	235,047
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	6,067	3,973	4,972	4,988	20,000
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	7,720	9,572	9,365	8,821	35,478
19 Net income from unrelated business activities not included in line 18.					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	1,331	2,189	1,167	689	5,376
23 Total of lines 15 through 22	72,513	73,611	77,167	86,626	309,917
24 Line 23 minus line 17	66,446	69,638	72,195	81,638	289,917
25 Enter 1% of line 23	725	736	772	866	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶					26c
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d
e Public support (line 26c minus line 26d total) ▶					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
c Add: Amounts from column (e) for lines: 15 <u>14,016</u> 16 <u>235,047</u> 17 <u>20,000</u> 20 _____ 21 _____ ▶					27c 269,063
d Add: Line 27a total _____ and line 27b total _____ ▶					27d 0
e Public support (line 27c total minus line 27d total) ▶					27e 269,063
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶					27f 309,917
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g 86.82 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶					27h 11.45 %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures

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

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

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

4-Year Averaging Period Under Section 501(h)

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

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

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

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

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

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

FORM 990, PART I, LINE 10C - SALES OF INVENTORY

<u>DESCRIPTION</u>	<u>GROSS SALES</u>	<u>COST OF GOODS</u>	<u>GROSS PROFIT</u>
REACT ID MATERIAL	\$3,909	\$3,839	<u>\$70</u>

FORM 990, PART I, LINE 8C GAIN OR (LOSS)

<u>DESCRIPTION</u>	<u>COST</u>	<u>SALES</u>	<u>GAIN(LOSS)</u>
REALIZED GAIN (LOSS) ON SALE OF SECURITIES			
SECURITIES	\$24,177	\$24,181	<u>\$4</u>

FORM 990, PART I, LINE 20 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES

<u>DESCRIPTION</u>	
UNREALIZED GAIN (LOSS) ON INVESTMENTS	<u>\$8,146</u>

FORM 990, PART IV, LINE 54 - INVESTMENTS IN SECURITIES

DESCRIPTION

STOCKS	\$43,955
CLOSED END FUNDS	31,352
MUTUAL FUNDS	10,645
US TREAS. & FED HOME MTG	17,993
	<u>\$103,945</u>

FORM 990, PART IV, LINE 58 - OTHER ASSETS

DESCRIPTION

RENT DEPOSIT	<u>\$660</u>
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REAGT INTERNATIONAL, INC.

FYE: 12/31/06

EIN: 51-0168558

FORM 990

SCHEDULE A PART IV-A, LINE 22 - OTHER INCOME

DESCRIPTION	2005	2004	2003	2002
REACTer ADVERTISING	\$696	\$983	\$438	\$8
LATE FEES	635	1206	729	681
	<u>\$1,331</u>	<u>\$2,189</u>	<u>\$1,167</u>	<u>\$689</u>



REACT International, Inc.
5210 Auth Road - Suite 403
Suitland, MD 20746

(301)316-2900 Office
(301)316-2903 Fax

e-mail: <react@reactintl.org>
<[http://www/reactintl.org](http://www.reactintl.org)>

Contact Directory

OFFICERS & BOARD OF DIRECTORS – 2005-2006

Officers

Dick Cooper
24 Thropp Ave.
Hamilton, NJ 08610

Ed Greany
P.O. Box 720790
Pinon Hills, CA 92372

Lee W. Besing
8607 Timber Ash
San Antonio, TX 78250

Norman L. Kaplan
2605 Loma Street
Silver Spring, MD 20902

Contact

HP (609)888-3506
Fax (609)888-3509
e-mail: <dcooper@reactintl.org>

HP (951)735-4153
Fax (775)218-0732
e-mail: <membership@reactintl.org>

Cell (210)771-7075
Fax (210)680-2680
e-mail: <lbesing@reactintl.org>

HP (301)649-6389
e-mail: <nkaplan@erols.com>

Title

President

Executive Vice President

Secretary

Treasurer

Board of Directors

Laurence "Larry" Fry
833 Cornelia Street
Janesville, WI 53545-1609

Fred Lanshe
630 Washington Street
Allentown, PA 18102

Contact

HP (608)752-4547
Fax (608)757-2379
e-mail: <lfryr@reactintl.org>

HP (610)434-3235
e-mail: <f.lanshe@reactintl.org>

Title/Region Assigned

Chairman of the Board
Region 5
ND, SD, NE, MN, IA, WI, IL

Region 1
ME, VT, NH, MA, CT, RI, NY, PA

(Continued on next page)

NOTE: If both home phone and fax are listed as the same number in this directory, please call first by voice during normal hours to have them activate their fax on the next call.

OFFICERS & BOARD OF DIRECTORS – 2005-2006 (*Continues*)

Board of Directors

Dan Manlove
4019 West Dogwood Ave.
Chester, VA 23831-7311

John T. Knott
833 Grenadier Drive
Orlando, FL 32807

Paul Jackson
505 Bridgeford Drive
Westerville, OH 43081

Laurence O. "Larry" Fry
833 Cornelia Street
Janesville, WI 53545-1609

Rob Roberts
19933 Nilsen Lane NW
Poulsbo, WA 98370

Robert Kaster, Jr.
2401 SW 76
Oklahoma City, OK 73159

Vacant

Kenny Jagdeo Singh
P.O. Box 3062
St. James Post Office
Trinidad & Tobago, West Indies

Contact

HP (804)283-2210
e-mail: <done804@yahoo.com>

HP/Fax (321)438-5952
e-mail: <jknott@orlandoreact.org>

HP (614)781-9036
e-mail: <PaulJacksonII@yahoo.com>

HP (608)752-4547
Fax (608)757-2379
e-mail: <lfry@reactintl.org>

HP (808)524-5171
e-mail <crobres@aol.com>

HP (405)685-9745(evenings)
e-mail: <bobk1011@cox.net>

HP (868)628-2886
Fax (868)622-2557
e-mail: <kennyr631@tsst.net.tt>

Title/Region Assigned

Region 2
DE, NJ, MD, VA, KY, WV

Region 3
TN, NC, SC, MS, AL, GA, FL

Region 4
MI, IN, OH

Region 5
ND, SD, NE, MN, IA, WI, IL

Region 6
AK, HI, WA, OR, ID, MT, WY

Region 7
AR, LA, NM, CO, KS, MO, OK, TX

Region 8
CA, NV, UT, AZ

Region 9
Canada, W. Indies, PR, UK, Germany
The Philippines, Scotland

Regional Directors

Region 1 - Fred Lanshe (ME-VT-MA-CT-NH-RI-NY-PA)

630 Washington Street
Allentown, PA 18102
610-434-3235
<fredjlanshe@yahoo.com>

Region 2 - Don Manlove (DE-NJ-MD-VA-VW-KY)

4019 West Dogwood Ave.
Chester, VA 23831-7311
804-439-3017
<done804@yahoo.com>

Region 3 - John Knott (TN-MS-NC-SC-AL-GA-FL, Puerto Rico)

833 Grenadier Drive
Orlando, FL 32807
321-438-5952
<jknott@orlandoreact.org>

Region 4 - Paul Jackson (MI-IN-OH)

505 Bridgeford Drive
Westerville, OH 43081
614-781-9036
<reactintlreg4@hotmail.com>

Region 5 - Larry Fry (ND-SD-NE-MN-IA-WI-IL)

833 Cornelia Street
Janesville, WI 53545-1609
608-752-4547
<lofry@aol.com>

Region 6 - Rob Roberts (AK-HI-WA-OR-ID-MT-WY)

410 Magellan Ave. - Apt. 1003
Honolulu, HI 96813-1857
808-524-5171
<crobres@aol.com>

Region 7 - Bob Kaster (AR-LA-NM-OK-CO-KS-MO-TX)

2401 SW 76
Oklahoma City, OK 73159
405-685-9745 (evenings)
<bobk1011@cox.net>

Region 8 - (VACANT) (AZ-NV-UT-CA)

Region 9 - Kenny Jagdeosingh (Canada, West Indies, United Kingdom, Philippines)

P.O. Box 3062
St. James Post Office
Trinidad & Tobago, West Indies
868-628-2886
<kennyr636@tstt.net.tt>