

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)

Department of the Treasury
Internal Revenue Service

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

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

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization CITIZENS COMMITTEE FOR THE RIGHT TO KEEP	D Employer identification number 91-0904621
		Number and street (or P O box if mail is not delivered to street address) Room/suite 12500 NE 10TH PLACE	E Telephone number (425) 454-4911

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

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates N/A

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

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

I Group Exemption Number N/A

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

G Website: WWW.CCRKBA.ORG

J Organization type (check only one) 501(c) (4) (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 **2,565,050.**

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

Revenue	1	Contributions, gifts, grants, and similar amounts received			
	a	Contributions to donor advised funds	1a		
	b	Direct public support (not included on line 1a)	1b	2,462,227.	
	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 \$ 2,462,227. noncash \$)	1e	2,462,227.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	62,390.	
	5	Dividends and interest from securities	5		
Expenses	6 a	Gross rents	6a		
	b	Less rental expenses	6b		
	c	Net rental income or (loss) Subtract line 6b from line 6a	6c		
	7	Other investment income (describe)	7		
	8 a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	b	Less cost or other basis and sales expenses	8a		
	c	Gain or (loss) (attach schedule)	8b		
	d	Net gain or (loss) Combine line 8c, columns (A) and (B)	8c		
	8d				
	9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>			
Net Assets	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		
	10 a	Gross sales of inventory, less returns and allowances	10a		
	b	Less cost of goods sold	10b		
	c	Net profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c		
	11	Other revenue (from Part VII, line 103)	11	40,433.	
	12	Total revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	2,565,050.	
	13	Program services (from line 44, column (B))	13	1,661,764.	
	14	Management and general (from line 44, column (C))	14	120,437.	
15	Fundraising (from line 44, column (D))	15	617,073.		
16	Payments to affiliates (attach schedule)	16			
17	Total expenses Add lines 16 and 44, column (A)	17	2,399,274.		
18	Excess or (deficit) for the year Subtract line 17 from line 12	18	165,776.		
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	2,399,020.		
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 1	20	<10,000.>		
21	Net assets or fund balances at end of year Combine lines 18, 19, and 20	21	2,554,796.		

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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

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 \$ <u>0</u> • noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>0</u> • noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc listed in Part V-A STMT 3	100,800.	84,571.	13,406.	2,823.
b Compensation of former officers, directors, key employees, etc listed in Part V-B	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	82,708.	70,074.	10,256.	2,378.
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27				
29 Payroll taxes	15,379.	12,269.	2,712.	398.
30 Professional fundraising fees				
31 Accounting fees				
32 Legal fees				
33 Supplies	15,562.	10,164.	1,624.	3,774.
34 Telephone	38,471.	25,127.	4,014.	9,330.
35 Postage and shipping	650,604.	458,997.		191,607.
36 Occupancy	90,993.	59,430.	9,494.	22,069.
37 Equipment rental and maintenance				
38 Printing and publications	392,701.	291,397.		101,304.
39 Travel				
40 Conferences, conventions, and meetings	17,582.	17,582.		
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)	1,983.		1,983.	
43 Other expenses not covered above (itemize):				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g SEE STATEMENT 2	992,491.	632,153.	76,948.	283,390.
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	2,399,274.	1,661,764.	120,437.	617,073.

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 \$ 2,200,387., (ii) the amount allocated to Program services \$ 1,494,850.,
 (iii) the amount allocated to Management and general \$ 94,063., and (iv) the amount allocated to Fundraising \$ 611,474.

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 4

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.)

Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)

a EDUCATION OF THE PUBLIC REGARDING PRESENT AND PROPOSED GUN CONTROL LEGISLATION.

(Grants and allocations \$) If this amount includes foreign grants, check here

931,594.

b GRASS-ROOTS LOBBYING AGAINST GUN CONTROL

(Grants and allocations \$) If this amount includes foreign grants, check here

688,587.

c DIRECT LOBBYING AGAINST GUN CONTROL

(Grants and allocations \$) If this amount includes foreign grants, check here

41,583.

d

(Grants and allocations \$) If this amount includes foreign grants, check here

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

1,661,764.

Form 990 (2006)

Part IV Balance Sheets (See the instructions)

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

		(A) Beginning of year		(B) End of year	
Assets	45 Cash - non-interest-bearing	639,266.	45	688,643.	
	46 Savings and temporary cash investments	874,529.	46	899,310.	
	47 a Accounts receivable	47a 23,529.			
	b Less: allowance for doubtful accounts	47b	10,530.	47c 23,529.	
	48 a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b		48c	
	49 Grants receivable			49	
	50 a Receivables from current and former officers, directors, trustees, and key employees			50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			50b	
	51 a Other notes and loans receivable STMT 5	51a 38,149.			
	b Less allowance for doubtful accounts	51b	38,149.	51c 38,149.	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges		17,002.	53 19,073.	
	54 a Investments - publicly-traded securities STMT 9 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		10,226.	54a 40.	
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54b	
55 a Investments - land, buildings, and equipment basis	55a				
b Less accumulated depreciation	55b		55c		
56 Investments - other	SEE STATEMENT 6	1,167,664.	56	1,167,664.	
57 a Land, buildings, and equipment: basis	57a 107,623.				
b Less accumulated depreciation STMT 7	57b 105,157.	3,175.	57c	2,466.	
58 Other assets, including program-related investments (describe ► <u>DEPOSITS</u>)		6,815.	58	6,408.	
59 Total assets (must equal line 74). Add lines 45 through 58		2,767,356.	59	2,845,282.	
Liabilities	60 Accounts payable and accrued expenses	249,440.	60	240,486.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities		64a		
	b Mortgages and other notes payable	STMT 8	118,896.	64b	50,000.
	65 Other liabilities (describe ►)			65	
66 Total liabilities. Add lines 60 through 65		368,336.	66	290,486.	
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	2,399,020.	67	2,554,796.	
	68 Temporarily restricted		68		
	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)		2,399,020.	73	2,554,796.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		2,767,356.	74	2,845,282.

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

a	Total revenue, gains, and other support per audited financial statements		a	2,565,050.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify): _____	b4		
	Add lines b1 through b4		b	0.
c	Subtract line b from line a		c	2,565,050.
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) _____	d2		
	Add lines d1 and d2		d	0.
e	Total revenue (Part I, line 12). Add lines c and d		e	2,565,050.

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

a	Total expenses and losses per audited financial statements		a	2,399,274.
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify) _____	b4		
	Add lines b1 through b4		b	0.
c	Subtract line b from line a		c	2,399,274.
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) _____	d2		
	Add lines d1 and d2		d	0.
e	Total expenses (Part I, line 17). Add lines c and d		e	2,399,274.

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
ALAN M. GOTTLIEB 12500 N.E. 10TH PL. BELLEVUE, WA	CHAIRMAN 30.00	36,000.	6,767.	0.
JOHN M. SNYDER 1090 VERMONT AVE NW WASHINGTON D.C.	VICE CHAIRMAN 30.00	36,000.	4,329.	0.
MERRILL JACOBS 5505 SPRING CREEK WAY ELK GROVE, CA	SECRETARY 0.00	0.	0.	0.
PEGGY TARTARO 267 LINWOOD BUFFALO, NY	TREASURER 0.00	0.	0.	0.
HERB STUPP 3724 222ND ST. BAYSIDE, NY 11361	MEMBR AT LARG 0.00	0.	0.	0.
ROBERT KUKLA P. O. BOX 398 PARK RIDGE, IL 60068	MEMBR AT LARG 0.00	0.	0.	0.
TOM GRESHAM P.O. BOX 665 NATCHITOCHE, LA	MEMBR AT LARG 0.00	0.	0.	0.
JOE WALDRON 12131 S.E. 13TH ST. BELLEVUE, WA 98005	EXEC. DIR. 40.00	28,800.	600.	0.

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

		Yes	No
75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings	7		
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"	75c		X
If "Yes," attach a statement that includes the information described in the instructions			
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
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	X	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	
b If "Yes," enter the name of the organization SEE STATEMENT 10			
and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
81 a Enter direct or indirect political expenditures (See line 81 instructions)	81a		0.
b Did the organization file Form 1120-POL for this year?	81b		X

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	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	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	X
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	X
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	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
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 <u>N/A</u> , section 4912 <u>N/A</u> , section 4955 <u>N/A</u>		
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	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>		
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
90 a	List the states with which a copy of this return is filed <u>WA, PA</u>		
b	Number of employees employed in the pay period that includes March 12, 2006	90b	7
91 a	The books are in care of <u>ALAN M. GOTTLIEB</u> Telephone no <u>425-454-4911</u> Located at <u>12500 N.E. 10TH PLACE, BELLEVUE, WA</u> ZIP + 4 <u>98005</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 <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

Part VI Other Information (continued) Yes No

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

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

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

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	62,390.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a MAILING LIST RENTAL	541900	18,529.			
b POSTAGE CONTRIBUTIONS					10,470.
c OTHER INCOME					11,434.
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		18,529.		62,390.	21,904.
105 Total (add line 104, columns (B), (D), and (E))					102,823.

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)
103B	POSTAGE REFUNDS REDUCE THE COSTS OF EDUCATING THE PUBLIC REGARDING GUN CONTROL LEGISLATION AND THE LOBBYING EFFORTS ON BEHALF OF SUCH LEGISLATION.
103C	ALL MONIES AID IN THE EDUCATION OF THE PUBLIC REGARDING GUN CONTROL

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
SEE STATEMENT 11	%			
	%			
	%			
	%			

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) N/A

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

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
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.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
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?

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

Please Sign Here: *Alan M. Gottlieb* Signature of officer, Date: 7/17/2007
 ALAN M. GOTTLIEB, CHAIRMAN, EXECUTIVE VICE PRESIDENT Type or print name and title

Paid Preparer's Use Only: Preparer's signature: *[Signature]*, Date: 7/17/07, Check if self-employed:
 Firm's name (or yours if self-employed), address, and ZIP + 4: GUNNING, STENSON & PRICE, P.S., 10655 N.E. 4TH STREET, SUITE 611, BELLEVUE, WA 98004
 Phone no: 206-462-1151

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	MANAGEMENT AND GENERAL FURNITURE AND EQUIPMENT		VARIESVAR	5.00	16	98,169.			98,169.	98,169.		0.
	FURNITURE AND EQUIPMENT	070102SL		5.00	16	5,719.			5,719.	3,911.		1,162.
	NETWORK EQUIPMENT	081304SL		3.00	16	2,462.			2,462.	1,095.		821.
	NETWORK EQUIPMENT	010107SL		5.00	16	1,273.			1,273.			0.
	* 990 PAGE 2 TOTAL					107,623.		0.	107,623.	103,175.	0.	1,983.
	MANAGEMENT AND GENERAL					107,623.		0.	107,623.	103,175.	0.	1,983.
	* GRAND TOTAL 990 PAGE 2 DEPR											

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT 1
DESCRIPTION		AMOUNT
UNREALIZED LOSS ON STOCK		<10,000.>
TOTAL TO FORM 990, PART I, LINE 20		<10,000.>

FORM 990

OTHER EXPENSES

STATEMENT 2

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
TELEPHONE MARKETING	501,677.	333,479.		168,198.
PROFESSIONAL SERVICES	265,193.	149,802.	49,529.	65,862.
PUBLICITY & ADVERTISING	49,549.	49,549.		
MISCELLANEOUS	14,644.		14,644.	
TAXES	1,092.		1,092.	
RESEARCH	1,213.	1,213.		
MAILING LIST	147,440.	98,110.		49,330.
REPAIRS AND MAINTENANCE	133.		133.	
BANK CHARGES	11,550.		11,550.	
TOTAL TO FM 990, LN 43	992,491.	632,153.	76,948.	283,390.

FORM 990

OFFICER COMPENSATION ALLOCATION
PART II, LINE 25A

STATEMENT 3

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
ALAN M. GOTTLIEB	36,000.	6,767.		42,767.
A. PROGRAM SERVICES	30,204.	5,678.		35,882.
B. MANAGEMENT AND GENERAL	4,788.	900.		5,688.
C. FUNDRAISING	1,008.	189.		1,197.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JOHN M. SNYDER	36,000.	4,329.		40,329.
A. PROGRAM SERVICES	30,204.	3,632.		33,836.
B. MANAGEMENT AND GENERAL	4,788.	576.		5,364.
C. FUNDRAISING	1,008.	121.		1,129.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JOE WALDRON	28,800.	600.		29,400.
A. PROGRAM SERVICES	24,164.	503.		24,667.
B. MANAGEMENT AND GENERAL	3,830.	80.		3,910.
C. FUNDRAISING	806.	17.		823.

TOTAL PROGRAM SERVICES				94,385.
TOTAL MANAGEMENT AND GENERAL				14,962.
TOTAL FUNDRAISING				3,149.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PART II, LINE 25A				<u>112,496.</u>

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 4
PART III

EXPLANATION

DEFEND THE 2ND AMENDMENT OF THE CONSTITUTION AND THE RIGHT TO KEEP AND BEAR ARMS.

FORM 990 OTHER NOTES AND LOANS REPORTED SEPARATELY STATEMENT 5

BORROWER'S NAME TERMS OF REPAYMENT
 KSBN RADIO, INC. IN FULL BY DUE DATE

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>	<u>FMV OF CONSIDERATION</u>
08/15/95	VARIOUS	10,000.	6.00%	0.

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN
 NONE OPERATING LOAN

<u>RELATIONSHIP OF BORROWER</u>	<u>DESCRIPTION OF CONSIDERATION</u>	<u>DOUBTFUL ACCT ALLOWANCE</u>	<u>BALANCE DUE</u>
INVESTEE		0.	20,000.

BORROWER'S NAME TERMS OF REPAYMENT
 KITZ RADIO, INC. IN FULL BY DUE DATE

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>	<u>FMV OF CONSIDERATION</u>
02/20/01	VARIOUS	13,500.	6.00%	0.

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN
 NONE OPERATING LOAN

<u>RELATIONSHIP OF BORROWER</u>	<u>DESCRIPTION OF CONSIDERATION</u>	<u>DOUBTFUL ACCT ALLOWANCE</u>	<u>BALANCE DUE</u>
INVESTEE		0.	18,149.

TOTALS INCLUDED ON FORM 990, PART IV, LINE 51		0.	38,149.
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FORM 990

OTHER INVESTMENTS

STATEMENT 6

<u>DESCRIPTION</u>	<u>VALUATION METHOD</u>	<u>AMOUNT</u>
INVESTMENT IN RADIO AND TV STATIONS	COST	1,021,969.
GOLD COINS	MARKET VALUE	2,880.
INVESTMENT IN INTERNET MEDIA WEB SITE	COST	142,815.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		<u>1,167,664.</u>

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 7

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE AND EQUIPMENT	98,169.	98,169.	0.
FURNITURE AND EQUIPMENT	5,719.	5,073.	646.
NETWORK EQUIPMENT	2,462.	1,916.	546.
NETWORK EQUIPMENT	1,273.	0.	1,273.
TOTAL TO FORM 990, PART IV, LN 57	<u>107,623.</u>	<u>105,158.</u>	<u>2,465.</u>

FORM 990 OTHER NOTES AND LOANS PAYABLE STATEMENT 8

LENDER'S NAME TERMS OF REPAYMENT

KITZ

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
04/ /04		100,000.	.00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN
 ASSETS, EQUIPMENT, MATERIAL & PURCHASE RADIO STATION
 DEPOSITS OF KGTK

RELATIONSHIP OF LENDER

INVESTEE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	50,000.

LENDER'S NAME TERMS OF REPAYMENT

KEEP AND BEAR ARMS.COM MONTHLY PMTS

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
09/ /04		112,815.	.00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN
 STOCK PURCHASE

RELATIONSHIP OF LENDER

INVESTEE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	0.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B 50,000.

FORM 990

NON-GOVERNMENT SECURITIES

STATEMENT 9

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
STOCKS	FMV	40.			40.
TO FORM 990, LINE 54A, COL B		40.			40.

FORM 990

IDENTIFICATION OF RELATED ORGANIZATIONS
PART VI, LINE 80B

STATEMENT 10

NAME OF ORGANIZATION

EXEMPT

NONEXEMPT

RIGHT TO KEEP AND BEAR ARMS POLITICAL VICTORY FUND

X

FORM 990

PART IX - INFORMATION REGARDING TAXABLE
SUBSIDIARIES AND DISREGARDED ENTITIES

STATEMENT 11

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

KSBN RADIO, INC.

ADDRESS

12500 NE 10TH PL, BELLEVUE, WA 98005-2532

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
91-1669197	50.00%	BROADCAST RADIO STATION	<2,976.>	288,730.

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

KITZ RADIO, INC.

ADDRESS

12500 NE 10TH PL, BELLEVUE, WA 98005-2532

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
91-2019576	50.00%	BROADCAST RADIO STATION	5,993.	731,314.

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

KEEPANDBEARARMS.COM, INC

ADDRESS

12500 NE 10TH PL, BELLEVUE, WA 98005-2532

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
20-1551728	50.00%	INTERNET WEBSITE	1,746.	8,203.