Form 990

Department of the Treasury

Internal Revenue Service

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.

2007
Open to Public Inspection

A	For the 21	007 calendar year, or tax year beginning		and er	iding		
В	Check if applicable:	Please C Name of organization				D Employer id	entification number
	Address	use IRS label or SPIRIT OF AMERICA WOR	LDMIDE			20 16	87786
F	change Name				D / it.		
-	lchange	ype. See Specific 12021 WILSHIRE BLVD #			Room/suite	E Telephone n	81-9123
E	return Termin-	Instruc-	330				
-	—lation □Amende	tions. City or town, state or country, and ZIP + 4 LOS ANGELES, CA 9002	5			F Accounting method Other (specify)	
F	⊥return Applicat pending			te	U / I		ion 527 organizations.
-	lpending	must attach a completed Schedule A (Form 990	or 990-EZ).		H(a) Is this a group		
C	Woheito:	►WWW.SPIRITOFAMERICA.NET			H(b) If "Yes," enter no		
_		ion type (check only one) ► X 501(c) (3) (insert no	o.) 4947(a)(1) or	7 527	H(c) Are all affiliates		/A Yes No
		re if the organization is not a 509(a)(3) supporting			(If "No," attach a	a list.)	
		re normally not more than \$25,000. A return is not require		.5	H(d) Is this a separat ganization cove	te return filed by red by a group i	an or- ruling? Yes X No
		o file a return, be sure to file a complete return.	a, but if the organization		I Group Exemption		N/A
							on is not required to attach
L	Gross rec	eipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶	1,507,05	3.	Sch. B (Form 9		
200,000		Revenue, Expenses, and Changes in N			nces		
E.C.	1	Contributions, gifts, grants, and similar amounts received					
	a	Contributions to donor advised funds	하이나 그 집에 가는 사람이 그리고 하는데 하다니?	1a			
	b	Direct public support (not included on line 1a)	many and a second secon	1b	1,473,3	84.	
	C	Indirect public support (not included on line 1a)		10			
	d	Government contributions (grants) (not included on line		1d			
	е	Total (add lines 1a through 1d) (cash \$89			575,492.) 1e	1,473,384.
	2	Program service revenue including government fees and				2	
	3	Membership dues and assessments				3	
	4	Interest on savings and temporary cash investments					33,669.
	5	Dividends and interest from securities					
	6 a	Gross rents		6a			
	b	Less: rental expenses		6b			
O	C	Net rental income or (loss). Subtract line 6b from line 6a				6c	
eun	7	Other investment income (describe) 7	
Revenue	8 a	Gross amount from sales of assets other	(A) Securities		(B) Other		
		than inventory		8a			
				8b			
		Gain or (loss) (attach schedule)		8c			
		Net gain or (loss). Combine line 8c, columns (A) and (B)				8d	
	9	Special events and activities (attach schedule). If any amo					
		Gross revenue (not including \$ of col		9a			
		Less: direct expenses other than fundraising expenses				0-	
		Net income or (loss) from special events. Subtract line 9b Gross sales of inventory, less returns and allowances				9c	
		Less: cost of goods sold					
	1	Gross profit or (loss) from sales of inventory (attach sche			102	10c	
		Other revenue (from Part VII, line 103)				ACTIVITY OF THE PROPERTY OF TH	
		Total revenue . Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c,					1,507,053.
		Program services (from line 44, column (B))					1,017,292.
Ses	14	Management and general (from line 44, column (C))					183,746.
Expenses	15	Fundraising (from line 44, column (D))					10,811.
Exp	16	Payments to affiliates (attach schedule)					•
	7.00	Total expenses. Add lines 16 and 44, column (A)					1,211,849.
	18	Excess or (deficit) for the year. Subtract line 17 from line					295,204.
et	19	Net assets or fund balances at beginning of year (from lin	e 73, column (A))			19	774,350.
Net Assets	20	Other changes in net assets or fund balances (attach expl	anation)			20	0.
	21	Net assets or fund balances at end of year. Combine lines					1,069,554.
7230	001 7-07 L	HA For Privacy Act and Paperwork Reduction Act No	tice, see the separate inst	ruction	S.		Form 990 (2007)

	1) orgar	nizations and section 4947(a			
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 \$ 0 • noncash \$ 0	4				
If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedule (cash \$ 0 • noncash \$ 0					
If this amount includes foreign grants, check here	22b				
23 Specific assistance to individuals (attach	220				
schedule)	23				
24 Benefits paid to or for members (attach					
schedule)	24				
25a Compensation of current officers, directors, key					
employees, etc. listed in Part V-A	25a	80,111.	15,171.	64,940.	0.
b Compensation of former officers, directors, key					
employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included					
above, to disqualified persons (as defined under		k			
section 4958(f)(1)) and persons described in					
section 4958(c)(3)(B)	25c		1		
26 Salaries and wages of employees not		72 222	EO 161	12 760	
included on lines 25a, b, and c	26	72,233.	59,464.	12,769.	
27 Pension plan contributions not included on					
lines 25a, b, and c	27				
28 Employee benefits not included on lines	28				
25a - 27	29	12,720.	5,629.	7,091.	
29 Payroll taxes30 Professional fundraising fees	30	12/120.	3,023.	7,051.	
31 Accounting fees	31	4,900.		4,900.	•
32 Legal fees	32	418.		418.	
33 Supplies	33	2,917.	292.	2,625.	
34 Telephone	34	5,562.	556.	5,006.	
35 Postage and shipping	35	2,080.		945.	1,135.
36 Occupancy	36	18,263.	1,826.	16,437.	
37 Equipment rental and maintenance	37	525.		525.	
38 Printing and publications	38	1,976.		1,306.	670.
39 Travel	39	5,638.	5,638.		
40 Conferences, conventions, and meetings	40	136.		136.	
41 Interest	41	2 614		2 (14	
42 Depreciation, depletion, etc. (attach schedule)	42	3,614.		3,614.	
43 Other expenses not covered above (itemize):					
a	43a				
b	43b				
C	43c 43d				
0	43e				
e	43f				
SEE STATEMENT 1	43g	1,000,756.	928,716.	63,034.	9,006.
44 Total functional expenses. Add lines 22a through		•			
43g. (Organizations completing columns (B)-(D),					
carry these totals to lines 13-15)	44	1,211,849.	1,017,292.	183,746.	10,811.
Joint Costs. Check ▶ ☐ if you are following					
Are any joint costs from a combined educational campa			orted in (B) Program servi	pes?▶[Yes X No
If "Yes," enter (i) the aggregate amount of these joint co	sts \$ _		i) the amount allocated to		N/A ;
(iii) the amount allocated to Management and general		N/A ; and (i	v) the amount allocated to	Fundraising \$	N/A
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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? TO ASSIST THOSE ADVANCING F	REEDOM, DEMOCRACY & PEACE ABROAD.	Program Service Expenses
All organizations must describe their exempt purpose a clients served, publications issued, etc. Discuss achiev	achievements in a clear and concise manner. State the number of vements that are not measurable. (Section 501(c)(3) and (4) sts 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 SEE STATEMENT A		
(Grants and allocations \$) If this amount includes foreign grants, check here	1,017,292.
b		
(Grants and allocations \$) If this amount includes foreign grants, check here	
(Grants and allocations \$) If this amount includes foreign grants, check here	
(Grants and allocations \$ • Other program services (attach schedule)) If this amount includes foreign grants, check here	
(Grants and allocations \$) If this amount includes foreign grants, check here	1 017 000
Total of Program Service Expenses (should equa	al line 44, column (B), Program services)	1,017,292.

723021 12-27-07

08281103 758461 4347

	: Whe	re required, attached schedules and amounts valid be for end-of-year amounts only.	within the	e descri _l	otion co	olumn)	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing						299,213	. 45	371,238.
	46	Savings and temporary cash investments						452,366		735,916.
	40	Savings and temporary cash investments						102/000	70	
	47 a	Accounts receivable	47a							
		Less: allowance for doubtful accounts							47c	
	48 a	Pledges receivable	48a							
		Less: allowance for doubtful accounts							48c	
	49	Grants receivable							49	
		Receivables from current and former officers,								
		key employees							50a	
	h	Receivables from other disqualified persons (
S		4958(f)(1)) and persons described in section 4							50b	
Assets	51 a	Other notes and loans receivable		1''						
As	1 2 2 200	Less: allowance for doubtful accounts							51c	
	52	Inventories for sale or use							52	
	53	Prepaid expenses and deferred charges						47,330	- 53	5,510.
		Investments - publicly-traded securities			Cost		FMV		54a	
	h	Investments - other securities	1-2		Cost		FMV		54b	
		Investments - land, buildings, and								
	00 0	equipment: basis	55a							
		equipment. basis	552							
	h	Less: accumulated depreciation	55b						55c	
	56	Investments - other							56	
		Land, buildings, and equipment: basis					50.			
		Less: accumulated depreciation STMT 2					242.	10,523	• 57c	6,908.
	58	Other assets, including program-related investment								
	00	(describe							58	
	59	Total assets (must equal line 74). Add lines 4	15 throug	ıh 58				809,432		1,119,572.
	60	Accounts payable and accrued expenses		C TO THE STATE OF	KI RET LITT			3,189	- 60	12,563.
	61	Grants payable							61	
	62	Deferred revenue							62	
es	63	Loans from officers, directors, trustees, and k							63	
≣ .		Tax-exempt bond liabilities	to, omp	.,					64a	
Liabilities		Mortgages and other notes payable							64b	
_	65	Other liabilities (describe	SEE S	TAT	EMEN	т 3	3)	31,893		37,455.
	00									
	66	Total liabilities. Add lines 60 through 65						35,082	- 66	50,018.
		anizations that follow SFAS 117, check here								
	0.90	67 through 69 and lines 73 and 74.								
es	67	Unrestricted						774,350	- 67	1,069,554.
and	68	Temporarily restricted					5		68	
Bal	69	Permanently restricted					Kee Talk and the		69	
pu		anizations that do not follow SFAS 117, chec			0.000.000.000					
교	"	complete lines 70 through 74.								
0	70	Capital stock, trust principal, or current funds	3						70	
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, ar							71	
Ass	72								72	
+			rnings, endowment, accumulated income, or other funds							
0	73	Total net assets or fund halances. Add lines 67 th	Add lines 67 through 69 or lines 70 through 72.						0.0000000000000000000000000000000000000	
Š	73	Total net assets or fund balances. Add lines 67 th (Column (A) must equal line 19 and column (B) mu						774,350	- 73	1,069,554.

_	instructions.) Total revenue, gains, and other support per audited financial stateme	nte				a 1,	507,053.
a		nis				a + /	30770300
b	Amounts included on line a but not on Part I, line 12: Net unrealized gains on investments		b1	1			
1							
2							
3	•						
4	Other (specify):					b	0.
	Add lines b1 through b4						507,053.
C	Subtract line b from line a					· - /	30,,0331
d	Amounts included on Part I, line 12, but not on line a:		_ d1				
1	Investment expenses not included on Part I, line 6b		100				
2	Other (specify):					d	0.
	Add lines d1 and d2				-		507,053.
e D-	Total revenue (Part I, line 12). Add lines c and d	ancial Statemen	ts W	ith Expenses	per	Return	3017033.
						a 1,	211,849.
a	Total expenses and losses per audited financial statements					a - 7	211/0120
b	Amounts included on line a but not on Part I, line 17:		hi				
1	Donated services and use of facilities		b				
2	,		4 3535				
3							
4						b	0.
	Add lines b1 through b4						211,849.
C	Subtract line b from line a					<u> </u>	211/0151
d	Amounts included on Part I, line 17, but not on line a:			d			
1	Investment expenses not included on Part I, line 6b						
2	Other (specify):					d	0.
	Add lines d1 and d2						211,849.
e D	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke	y Employees (Lie	st eac	h nerson who was	and the same		
****	or key employee at any time during the year even if they we	ere not compensated.	.) (See	the instructions.)			
		(B) Title and average h	nurs	(C) Compensation	/D)		
	(A) Name and address	(B) Title and average he per week devoted to position	to	(If not paid, enter	(D) Co empl plans compe	ntributions to oyee benefit s & deferred ensation plans	(E) Expense account and other allowances
AT,		position		(If not paid, enter -0)	(D)Co employ plans compe	ntributions to oyee benefit s & deferred ensation plans	(E) Expense account and other allowances
	MES D. HAKE	per week devoted to position CEO/CHAIRM		(If not paid, enter -0)	(D) Co empl plans compe	ntributions to oyee benefit s & deferred ensation plans	(E) Expense account and other allowances
$\bar{1}\bar{2}$	MES D. HAKE 021 WILSHIRE BLVD, #558	CEO/CHAIRM		(If not paid, enter -0)	(D) Co employers plans compe	ntributions to oyee benefit s & deferred insation plans	other anowances
$\bar{1}\bar{2}$	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025	CEO/CHAIRMA	AN	-u) O .	compe	0 •	(E) Expense account and other allowances
Ī2 LO PE	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY	CEO/CHAIRM	AN	-u) O .	compe	0 •	other anowances
12 LO PE 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558	CEO/CHAIRMA 14.00 CONTROLLER	AN	0. ECUTIVE D	IRE	0.	O.
12 LO PE 12 LO	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025	14.00 CONTROLLER	AN /EX	-u) O .	IRE	0 •	other anowances
12 LO PE 12 LO DO	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL	CEO/CHAIRMA 14.00 CONTROLLER	AN /EX	0. ECUTIVE D	IRE	0.	O.
12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL 021 WILSHIRE BLVD, #558	14.00 CONTROLLER 45.00 BOARD MEMBI	AN /EX	0. ECUTIVE D	IRE	0. CCTOR	0.
12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL	14.00 CONTROLLER	AN /EX	0. ECUTIVE D	IRE	0.	0.
12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL 021 WILSHIRE BLVD, #558	14.00 CONTROLLER 45.00 BOARD MEMBI	AN /EX	0. ECUTIVE D	IRE	0. CCTOR	O.
12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL 021 WILSHIRE BLVD, #558	14.00 CONTROLLER 45.00 BOARD MEMBI	AN /EX	0. ECUTIVE D	IRE	0. CCTOR	0.
12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL 021 WILSHIRE BLVD, #558	14.00 CONTROLLER 45.00 BOARD MEMBI	AN /EX	0. ECUTIVE D	IRE	0. CCTOR	0.
12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL 021 WILSHIRE BLVD, #558	14.00 CONTROLLER 45.00 BOARD MEMBI	AN /EX	0. ECUTIVE D	IRE	0. CCTOR	0.
12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL 021 WILSHIRE BLVD, #558	14.00 CONTROLLER 45.00 BOARD MEMBI	AN /EX	0. ECUTIVE D	IRE	0. CCTOR	0.
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12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL 021 WILSHIRE BLVD, #558	14.00 CONTROLLER 45.00 BOARD MEMBI	AN /EX	0. ECUTIVE D	IRE	0. CCTOR	0.
12 LO PE 12 LO DO 12	MES D. HAKE 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 GGY J. FINDLEY 021 WILSHIRE BLVD, #558 S ANGELES, CA 90025 NALD KARL 021 WILSHIRE BLVD, #558	14.00 CONTROLLER 45.00 BOARD MEMBI	AN /EX	0. ECUTIVE D	IRE	0. CCTOR	0.
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Form **990** (2007)

	MY Other Information (continued)				Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilit			00-		х
	less than fair rental value?			82a		Λ
D	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.	82b	N/A			
02 .	(See instructions in Part III.) Did the organization comply with the public inspection requirements for returns and exem			83a	Х	
_				83b		
b 84 a				84a		X
	If "Yes," did the organization include with every solicitation an express statement that suc			074		
D	tax deductible?			84b		********
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	•••••	N/A	85a		
h	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless	ss the organizati	on received a			
	waiver for proxy tax owed for the prior year.					
C	Dues, assessments, and similar amounts from members	85c	N/A			
d	Section 162(e) lobbying and political expenditures		N/A			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		N/A			
q	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A	85g		
h						
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expen	ditures for the				
	following tax year?		N/A	85h		
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	4		
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	le corporation or	partnership,			
	or an entity disregarded as separate from the organization under Regulations sections 30	1.7701-2 and 30	1.7701-3?			
	If "Yes," complete Part IX			88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled en	ntity within the m	neaning 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		0			
	section 4911 ► 0 • ; section 4912 ► ; section		0.			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 exc					
	transaction during the year or did it become aware of an excess benefit transaction from a			•••		v
	If "Yes," attach a statement explaining each transaction			89b		X
C	Enter: Amount of tax imposed on the organization managers or disqualified persons durin		0.			
	sections 4912, 4955, and 4958		0.			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			89e		Х
	All organizations. At any time during the tax year, was the organization a party to a prohibit			89f		X
1	All organizations. Did the organization acquire a direct or indirect interest in any applicable For supporting organizations and sponsoring organizations maintaining donor advised fund			091		
y	or a fund maintained by a sponsoring organization, have excess business holdings at any			89g	**********	Х
90 a	- C7	time during the	year	USY		1
-2.50	Number of employees employed in the pay period that includes March 12, 2007		90b			
b 91 a	DEGGY BINDIEN	Telenhon	e no. ► (310)	481	-91	
JIA	Located at ► 12021 WILSHIRE BLVD, #558, LOS ANGELES		$ZIP + 4 \triangleright 9$			
h	At any time during the calendar year, did the organization have an interest in or a signature		and the second s		Yes	No
n	a financial account in a foreign country (such as a bank account, securities account, or ot			91b		X
	If "Yes," enter the name of the foreign country \(\bigsim \)	anor imanolal acc				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report	t of Foreign Ran	k			
	and Financial Accounts	. S. i Sisigii Daii				

Form **990** (2007)

X No

X No

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

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

2122			3. Complete only if the organiz	auon is a
				Yes No
106		as defined in section 5	12(b)(13) of the Code? If "Yes,	11
	(A) Name, address, of each controlled entity	(B) Employer Identification	(C) Description of transfer	(D) Amount of transfer
а		Number		
b				
С				
	Tabela			
	Totals			Yes No
107		ntity as defined in sect	ion 512(b)(13) of the Code? If "	
		(B)	(0)	(D)
	(A) Name, address, of each controlled entity	Employer Identification Number	(C) Description of transfer	Amount of transfer
а				
b				
С				
	Totals			
108		17 2006 covering the	interest rents royalties and	Yes No
	annuities described in question 107 above?			
	Totals Totals			
	se Vegantmilles		11/10/08	
Sign Here	Signature of officer / Findley Execu	ulve Din	ector	
Paid	Preparer's signature	0 9 2009	Check if Preparer's SSN self-	or PTIN (See Gen. Inst.)
Prepa	rer's Firm's name (or GREEN HASSON & JANKS LIP	100	EIN >	
Use (self-employed), 10990 WILSHIRE BLVD., 161			
	ZIP+4 LOS ANGELES, CA 90024-39	29	Phone no. ► (310	
				Form 990 (200

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2007

Marile of the org	SPIRIT OF AMERICA WORLDWI	DE		20: 16877	
Part I	Compensation of the Five Highest Paid Em (See page 1 of the instructions. List each one. If there are none, e	ployees Other Than	Officers, Direc		
(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
MICHELE	REDMOND	PROGRAM DIREC	TOR		
C70 SPI	RIT OF AMERICA WORLDWIDE	50.00	57,232.	6,062.	
Total number of over \$50,000	other employees paid	0			
Part II-A	Compensation of the Five Highest Paid Inde (See page 2 of the instructions. List each one (whether individual			onal Service	es
	(a) Name and address of each independent contractor paid more the	an \$50,000	(b) Type of s	service	(c) Compensation
NONE					
				4	
\$50,000 for pro	others receiving over fessional services	0			
Part II-B	Compensation of the Five Highest Paid Inde (List each contractor who performed services other than professi firms. If there are none, enter "None." See page 2 of the instruction	onal services, whether individu		ervices	
	(a) Name and address of each independent contractor paid more the		(b) Type of s	service	(c) Compensation
NONE					
	other contractors receiving over	0		·	

F	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 i of Part VI-B.)	1		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?	2a		X
	b Lending of money or other extension of credit?	2b		Х
	c Furnishing of goods, services, or facilities?	2c		X
	d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	2d	X	
	e Transfer of any part of its income or assets?	2e		X
3	a 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.)	3a		X
	b Did the organization have a section 403(b) annuity plan for its employees?	3b		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	3c		X
	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		Х
	b Did the organization make any taxable distributions under section 4966? N/A	4b		
	c Did the organization make a distribution to a donor, donor advisor, or related person?	4c		
	d Enter the total number of donor advised funds owned at the end of the tax year		N/	A
	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		N/	A
	f Enter the total number of separate funds or accounts owned at the end of the 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 in all funds or accounts included on line 4f at the end of the tax year		7	0.

Schedule A (Form 990 or 990-EZ) 2007

	Reason for Non-Private Foundation					
rtify that	the organization is not a private foundation because it is:					
	A church, convention of churches, or association of c		(1)(A)(i).			
	A school. Section 170(b)(1)(A)(ii). (Also complete Par					
	A hospital or a cooperative hospital service organization					
	A federal, state, or local government or governmental					
	A medical research organization operated in conjuncti	on with a hospital. Secti	on 170(b)(1)(A)(iii). Enter	the hospital's	s name, city,	
	and state					
	An organization operated for the benefit of a college of	r university owned or op	erated by a governmental	unit. Section	170(b)(1)(A)(iv)	
[77]	(Also complete the Support Schedule in Part IV-A.)					
a X	An organization that normally receives a substantial p			the general _l	public.	
	Section 170(b)(1)(A)(vi). (Also complete the Support	and the second s				
·	A community trust. Section 170(b)(1)(A)(vi). (Also co					
	An organization that normally receives: (1) more than					
	receipts from activities related to its charitable, etc., fu its support from gross investment income and unrelat					
	by the organization after June 30, 1975. See section 5				ises acquired	
	An organization that is not controlled by any disqualific		oundation managers) and	otherwise me	ets the requiren	nents of section
	509(a)(3). Check the box that describes the type of su				<u> </u>	
	Type I Type II	Type III-F	unctionally Integrated		Type III-O	ther
	Provide the following information a	hout the ounnerted ore	anizations (Cas assa 9 of	the instruction	nns \	
		nour me supported orga	anizations. (See page o or	the motiuetic	,,,,	
	(a)	(b)	(c)	(d)		(e)
		(b) Employer	(c) Type of organization	(d) Is the su	pported	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines	(d) Is the su organization	pported in	
	(a)	(b) Employer	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organization the sup	ipported on listed in porting	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines	(d) Is the su organizatio the sup organiz	pported in	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz	apported on listed in porting ration's	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of
I	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	(d) Is the su organizatio the sup organiz governing (ipported on listed in porting ration's documents?	Amount of

	Support Schedule (Control Note: You may use the	e worksheet in the insti	uctions for converting	from the accrual to the	e cash method	of acco	unting.
	ndar year (or fiscal year Ining in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003		(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	587,771.	993,994.	412,212.			1,993,977.
16	Membership fees received						
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						
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	30,215.	34,441.	2,725.			67,381.
19	Net income from unrelated business						
20	activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
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			,			
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	599.		SEE STATEME 1,500.	NT 4		2,099
23	Total of lines 15 through 22	618,585.	1,028,435.	416,437.		0.	2,099 2,063,457 2,063,457
24	Line 23 minus line 17	618,585.	1,028,435.	416,437.			2,063,457
25	Enter 1% of line 23	6,186.	10,284.	4,164.			
26	Organizations described on lines 10	or 11: a Enter 2% of	amount in column (e), lin	e 24	>	26a	41,269
b	Prepare a list for your records to sho	w the name of and amou	nt contributed by each pe	erson (other than a govern	nmental		
	unit or publicly supported organization						040 510
	Do not file this list with your return.						248,512
C	Total support for section 509(a)(1) to	est: Enter line 24, column	(e)		>	26c	2,063,457
d	Add: Amounts from column (e) for li	nes: 18	67,381.	248,51			217 002
		22	2,099. 26b	248,51	<u> </u>	26d	317,992
9	Public support (line 26c minus line 2						84.5894
f 27	Public support percentage (line 26e Organizations described on line 12:			the state of the s	The state of the s	and the same of the	
-1	records to show the name of, and tot such amounts for each year:	tal amounts received in ean N/A	ich year from, each "disq	ualified person." Do not fi	le this list with y	our retui	rn. Enter the sum of
	(2006)						
b	For any amount included in line 17 th						
	and amount received for each year, to described in lines 5 through 11b, as						
	the larger amount described in (1) or					veen the	amount received and
	(2006)					U3/	
C	Add: Amounts from column (e) for lin					00)	
	17	20		21		27c	N/A
d	17 Add: Line 27a total	an	d line 27b total				N/A
е	Public support (line 27c total minus I					27e	N/A
f	Total support for section 509(a)(2) to						
						27g	N/A 9
g	Public support percentage (line 27e	e (numerator) utvided by	ille 271 (uellullillatur))			279	N/A %

NONE

723131 12-27-07

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)

N/A

	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?	29		
	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?	30		
	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?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
		_		
		_		
		_		
		_		
	Does the organization maintain the following:			
3	Records indicating the racial composition of the student body, faculty, and administrative staff?			
)	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
;	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	32c		
1	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		_		
	Does the organization discriminate by race in any way with respect to:	-		
	Students' rights or privileges?	33a		·
)	Admissions policies?	33b		
	Employment of faculty or administrative staff?	33c		
	Scholarships or other financial assistance?			
	Educational policies?	33e		
	Use of facilities?	33f		T
	Athletic programs?	33q		
	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	0011		
	7. Same and the same and the product of product of the same and the sa			
		-		
		-		
	Does the organization receive any financial aid or assistance from a governmental agency?	34a	************	
	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.	340		
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			***

	art VI-A Lobbying	Expenditures by Ele ed ONLY by an eligible organi	cting Public Char	ities (See page	11 of t	he instruction	s.)	20	N/A
Che	ck a if the organiz	ation belongs to an affiliated g	group. Check	▶ b if you	check	ced "a" and "lir	mited c	ontrol"	provisions apply.
		imits on Lobbying E				(a) Affiliated	group		(b) To be completed for all
_	(The ter	m "expenditures" means amoi	unts paid or incurred.)			total			electing organizations
00	T-1-11-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					N/A			
36	Total lobbying expenditures t	o influence public opinion (gr o influence a legislative body			36 37				
37 38		(add lines 36 and 37)			88				
39		ditures			39				
40	Total exempt purpose expend				10				
41	Lobbying nontaxable amount								
	If the amount on line 40 is -		nontaxable amount is -						
	Not over \$500,000	20% of the amo	ount on line 40						
	Over \$500,000 but not over \$1,000	0,000 \$100,000 plus	15% of the excess over \$500,0	00					
	Over \$1,000,000 but not over \$1,5			10000	l1				
	Over \$1,500,000 but not over \$17,			10000					
	Over \$17,000,000								
42	Grassroots nontaxable amou				2				
43	Subtract line 42 from line 36.			and an experience of the same	13				
44	Subtract line 41 from line 38.	Enter -U- IT line 41 is more th	an line 38		14				
	Caution: If there is an amo	ount on either line 43 or line	e 44, you must file Forn	n 4720.					
			Lobbying Exp	enditures During 4	-Year	Averaging Pe	eriod		N/A
	endar year (or al year beginning in)	(a) 2007	(b) 2006	(c) 2005		:	(d) 2004		(e) Total
45	Lobbying nontaxable amount								0.
46	Lobbying ceiling amount (150% of line 45(e))								0.
47	Total lobbying				·····		*********	·····	
	expenditures								0.
48	Grassroots nontaxable								
	amount								0.
49	Grassroots ceiling amount								
	(150% of line 48(e))								0.
50	Grassroots lobbying								0.
P		Activity by Nonelect							
Dur	For reporting o ing the year, did the organizati	only by organizations that did							N/A
	ience public opinion on a legis			ii, molading any att	ompet		Yes	No	Amount
	Volunteers								
b	Paid staff or management (In								
C	Media advertisements								
d	Mailings to members, legislat	tors, or the public							
е	Publications, or published or	broadcast statements							
f	Grants to other organizations								
g	Direct contact with legislators								
h	Rallies, demonstrations, sem								0.
1	Total lobbying expenditures (If "Yes" to any of the above, a	Add lines c through n.)							0.

Pa	Information Re	garding Transfers To an izations (See page 14 of the ins	nd Transactions a	nd Relationships With Noncha	ritable	6	Page
51	Did the reporting organization of	directly or indirectly appears in any	structions.)				
ŭ,	501(c) of the Code (other than	section 501(a)(2) arganizations) or	of the following with any oth	ner organization described in section			
а	Transfers from the reporting or	section 501(c)(3) organizations) or ganization to a noncharitable exem	of organization of	political organizations?			Ι
	(i) Cash	gamzation to a nonchantable exem	pt organization of:		<u> </u>	Yes	No
	(ii) Other assets				51a(i)		X
b	Other transactions:				a(ii)		X
		ats with a pancharitable assessed					
	(ii) Purchases of assets from a	a noncharitable exempt org	anization		b(i)		X
	(iii) Rental of facilities equipme	a nonchantable exempt organization	l		b(ii)		X
	(iv) Reimburgement arrangement	ent, or other assets			b(iii)		X
	(v) I cans or loan quarantoes	ints			b(iv)		X
	(vi) Performance of carvious or	mambarahin ar fundraising a disit			b(v)		X
C	Sharing of facilities equipment	mailing lists, other exects as acid	itions		b(vi)		X
d	If the answer to any of the above	o is "Yee " complete the fell and a	employees		C		X
	annds other assets or services	e is res, complete the following so	chedule. Column (b) should	l always show the fair market value of the			
	transaction or sharing arrangem	s given by the reporting organization	1. If the organization receive	ed less than fair market value in any			
(a)		nent, show in column (d) the value (of the goods, other assets,	or services received:		N/A	
Line n	(b) o. Amount involved	(c) Name of noncharitable ex	vemnt organization	Description of transfers transaction			
		Turno or nononantable of	compt organization	Description of transfers, transactions, and	snaring ari	angen	ients
			3				
							7
-						4.40	
-							
						7.	
	1						
52 a	s the organization directly or ind	irectly affiliated with, or related to, or	one or more tax-exempt or	ganizations described in section 501(c) of the			
(code (other than section 501(c)(3)) or in section 527?			Yes	Y	No
bl	f "Yes," complete the following so	chedule: N/A			res		INO
	(a)		(b)	(c)			
	Name of orga	anization	Type of organization	Description of relations	hip		
				•	-	in simple	-
8							
							-
23152 2-27-07							
<u>2-27-07</u>				Schedule A (Forr	n 990 or 99	0-EZ) 2	2007

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of organization

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

Employer identification number

2007

	SPIRIT OF AMERICA WORLDWIDE	20-1687786
Organization type (chec	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule . (Note: <i>Only a section 501(c)(7), (8),</i> e and a Special Rule-see instructions.)	or (10) organization can check boxes
General Rule-		
	ns filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in momplete Parts I and II.)	oney or property) from any one
Special Rules-		
sections 509(a)	01(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test (1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution on line 1 of these forms. (Complete Parts I and II.)	
aggregate cont	01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any or ributions or bequests of more than \$1,000 for use exclusively for religious, charitable, so e prevention of cruelty to children or animals. (Complete Parts I, II, and III.)	
some contribut \$1,000. (If this I charitable, etc.,	01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any clions for use exclusively for religious, charitable, etc., purposes, but these contributions doox is checked, enter here the total contributions that were received during the year for a purpose. Do not complete any of the Parts unless the General Rule applies to this organizations, charitable, etc., contributions of \$5,000 or more during the year.)	did not aggregate to more than an exclusively religious, unization because it received
they must check the bo, requirements of Schedu	that are not covered by the General Rule and/or the Special Rules do not file Schedule B x in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to cer le B (Form 990, 990-EZ, or 990-PF).	
LHA For Paperwork Re	eduction Act Notice, see the Instructions Schedul	e R (Form 990 990-F7 or 990-PF) (2007)

for Form 990, Form 990-EZ, and Form 990-PF.

Name of organization

Employer identification number

CDTDTM	OT	AMEDICA	TIODI DITTO
SPIRIT	UF	AMERICA	WORLDWIDE

20-1687786

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$\$.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$\$ <u>481,793.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

SPIRIT OF AMERICA WORLDWIDE

20-1687786

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	3000 SHARES OF SUN MICRO STOCK	\$\$.	12/31/07
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	MEDICAL EQUIPMENT AND SUPPLIES.	\$\$ <u>481,793.</u>	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	•
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
a) lo. om rt I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_	07		

FORM 990	OT	HER EXPENSES		STATEMENT 1
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
MERCHANT DISCOUNT				
FEES	12,311	. 12,311.		
PROGRAM GOODS	409,878			
OTHER PROFESSIONAL				
FEES	1,275		1,275.	
TEMPORARY HELP	1,011		1,011.	
BANK FEES	632		632.	
INSURANCE	26,159		20,927.	1 600
PUBLIC RELATIONS FILING FEES	1,600 394		204	1,600.
WEBSITE/INTERNET	49,370		394.	7 406
BOOKS/SUBSCRIPTIONS	2,495		34,558. 2,495.	7,406.
STAFF DEVELOPMENT	204		2,493.	
PROCESSING FEES	1,538		1,538.	
IN-KIND	1,330		1,550.	
CONTRIBUTIONS	493,889	493,889.		
				0.006
TOTAL TO FM 990, LN 43	1,000,756		63,034.	9,006.
		NOT HELD FOR	INVESTMENT	STATEMENT 2
	TION OF ASSETS	OST OR		
FORM 990 DEPRECIAT	TION OF ASSETS	OST OR	INVESTMENT ACCUMULATED	STATEMENT 2
FORM 990 DEPRECIAT DESCRIPTION COMPUTERS	TION OF ASSETS	COST OR DTHER BASIS	INVESTMENT ACCUMULATED DEPRECIATION	STATEMENT 2 BOOK VALUE
FORM 990 DEPRECIAT DESCRIPTION	CION OF ASSETS	COST OR DTHER BASIS 17,868.	INVESTMENT ACCUMULATED DEPRECIATION 0.	BOOK VALUE
FORM 990 DEPRECIAT DESCRIPTION COMPUTERS FURNITURE	CION OF ASSETS	COST OR DTHER BASIS 17,868.	INVESTMENT ACCUMULATED DEPRECIATION 0. 0.	BOOK VALUE 17,868. 282.
FORM 990 DEPRECIAT DESCRIPTION COMPUTERS FURNITURE ACCUMULATED DEPRECIATIO	PION OF ASSETS	COST OR DTHER BASIS 17,868. 282. 0.	INVESTMENT ACCUMULATED DEPRECIATION 0. 0. 11,242.	BOOK VALUE 17,868. 282. <11,242.
FORM 990 DEPRECIAT DESCRIPTION COMPUTERS FURNITURE ACCUMULATED DEPRECIATIO TOTAL TO FORM 990, PART	PION OF ASSETS	COST OR DTHER BASIS 17,868. 282. 0. 18,150.	INVESTMENT ACCUMULATED DEPRECIATION 0. 0. 11,242.	BOOK VALUE 17,868. 282. <11,242. 6,908.
FORM 990 DEPRECIAT DESCRIPTION COMPUTERS FURNITURE ACCUMULATED DEPRECIATIO TOTAL TO FORM 990, PART	PION OF ASSETS	COST OR DTHER BASIS 17,868. 282. 0. 18,150.	INVESTMENT ACCUMULATED DEPRECIATION 0. 0. 11,242.	BOOK VALUE 17,868. 282. <11,242. 6,908.
FORM 990 DEPRECIAT DESCRIPTION COMPUTERS FURNITURE ACCUMULATED DEPRECIATIO TOTAL TO FORM 990, PART FORM 990 DESCRIPTION	PION OF ASSETS	COST OR DTHER BASIS 17,868. 282. 0. 18,150.	INVESTMENT ACCUMULATED DEPRECIATION 0. 0. 11,242. 11,242. BEGINNING OF YEAR	BOOK VALUE 17,868. 282. <11,242. 6,908. STATEMENT 3 END OF YEAR
FORM 990 DEPRECIAT DESCRIPTION COMPUTERS FURNITURE ACCUMULATED DEPRECIATIO TOTAL TO FORM 990, PART FORM 990 DESCRIPTION ACCRUED EXPENSES	PION OF ASSETS	COST OR DTHER BASIS 17,868. 282. 0. 18,150.	INVESTMENT ACCUMULATED DEPRECIATION 0. 0. 11,242. 11,242. BEGINNING OF YEAR 27,474.	BOOK VALUE 17,868. 282. <11,242. 6,908. STATEMENT 3 END OF YEAR 31,842.
FORM 990 DEPRECIAT DESCRIPTION COMPUTERS FURNITURE ACCUMULATED DEPRECIATIO TOTAL TO FORM 990, PART FORM 990 DESCRIPTION	PION OF ASSETS	COST OR DTHER BASIS 17,868. 282. 0. 18,150.	INVESTMENT ACCUMULATED DEPRECIATION 0. 0. 11,242. 11,242. BEGINNING OF YEAR	BOOK VALUE 17,868. 282. <11,242. 6,908. STATEMENT 3 END OF YEAR

SCHEDULE A	OTHER INC	OME	\$	STATEMENT 4
DESCRIPTION	2006 AMOUNT	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT
REBATES ON SUPPLIES	599.	0.	1,500	0.
TOTAL TO SCHEDULE A, LINE 22	599.	0.	1,500	. 0.

Mission and Objectives

Spirit of America's mission is to extend the goodwill of the American people to assist those advancing freedom, democracy and peace abroad. We provide support to those on the front lines: American military and civilian personnel and people who call to Americans for help in their struggle for freedom and democracy.

Our objectives include:

- Increase the reach, scale and impact of the informal humanitarian activities that take place on the front lines in troubled regions.
- Contribute charitable goods that can have a positive, practical and timely impact in the local communities where American personnel are involved.
- Establish connections and strengthen bonds between the American people and those in countries struggling for freedom and democracy.

Some of our supporters see Spirit of America as a way to help people who have suffered from repression, terrorism and war. Others see us as a way to support our troops by helping them succeed with their mission. And others see Spirit of America as a way to help win the war on terror and advance freedom, democracy and peace. We are all of those things.

Program Accomplishment

Spirit of America helps American military and civilian personnel serving in Iraq and Afghanistan as well as people who call to Americans for help in their struggle for freedom and democracy. We fulfill requests from American personnel for goods that improve the lives of local people and thus help advance freedom and peace for others we provide the resources to successfully attain the dream of democracy.

We have provided school and medical supplies, sewing machines, hand tools, watches, water barrels, clothing, soccer gear and toys in response to needs identified by American personnel. We contributed equipment to Iraqiowned television stations to establish a better alternative to Al Jazeera. We helped Iraqi men whose arms were amputated by Saddam Hussein get a new start on life. We provided support to the pro-democracy protestors in Beruit, Lebanon in their march toward democracy and are working through a school partner program to put American and Iraqi children in communications. The project undertaken by Spirit of America are many and diverse, yet, ultimately, are all designed to have a direct and positive impact on the lives of the people working towards peace and freedom.

"Timex is proud to support Spirit of America," said Lou Galie, Senior Vice President of Research & Development for Timex. "We believe that their efforts demonstrate to the world the best attributes of the American People. The entire Timex organization is pleased that America's best watches can play a part in this noble endeavor."

We provide timely and effective assistance where it is needed most on the front lines. The Wall Street Journal says, "Spirit of America's organizational insight is to deploy the best practices of the modern U.S. economy - efficiency and speed - around the margins of the Iraq war effort." The Journal adds, "Spirit of America and the Marines are a coalition of the can-do."

American soldiers tell us our work "literally saves lives." LtCol David Couvillon says, "They say there aren't any 'silver bullets' for improving things in Iraq. I don't know. Spirit of America just might be a silver bullet." And, Major General James Mattis of the Marines says, "The initiative and focused support provided by Spirit of America is beyond anything we have experienced."

Spirit of America was founded in the wake of the 9/11 terrorist attacks. Like many Americans, we wanted to do something to help. Since we started more than 10,000 people have contributed to our projects. 100% of their donations go to the specific projects they choose.

Through Spirit of America every American can make a difference in the world's most troubled regions.