

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

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

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

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

C Name of organization
NPOWER MICHIGAN TECHNOLOGY CENTER
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1048 PIERPONT STE 3
 City or town, state or country, and ZIP + 4
LANSING MI 48911

D Employer identification number
38-3616199

E Telephone number
517-492-2400

F Accounting method: Cash
 Accrual Other (specify)

G Website: **N/A**

J Organization type
 (check only one) 501(c) (**3**) t (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 **554,404**

H and are not applicable to section 527 organizations. **I**
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 **▶**
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

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			
	b	Direct public support (not included on line 1a)	1b	393,518		
	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 \$ 393,518 noncash \$)	1e	393,518		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	139,048		
	3	Membership dues and assessments	3	16,984		
	4	Interest on savings and temporary cash investments	4			
	5	Dividends and interest from securities	5			
	6a	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				
Revenue	8a	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	2,844		
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8c	-2,844		
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		See Stmt 2			
Revenue	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			
Revenue	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			
Expenses	11	Other revenue (from Part VII, line 103)	11	4,854		
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	551,560		
	13	Program services (from line 44, column (B))	13	405,853		
	14	Management and general (from line 44, column (C))	14	145,508		
	15	Fundraising (from line 44, column (D))	15	25,874		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses. Add lines 16 and 44, column (A)	17	577,235		
	Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	-25,675	
		19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	166,349	
		20	Other changes in net assets or fund balances (attach explanation)	20	-140,674	
		21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	0	

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 \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a			
22b Other grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b			
23 Specific assistance to individuals (attach 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 (attach schedule)	25a			
b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b			
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)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	26 292,285	198,754	78,917	14,614
27 Pension plan contributions not included on lines 25a, b, and c	27			
28 Employee benefits not included on lines 25a - 27	28 12,993	8,835	3,508	650
29 Payroll taxes	29 24,863	16,907	6,713	1,243
30 Professional fundraising fees	30			
31 Accounting fees	31 36,552	24,855	9,869	1,828
32 Legal fees	32			
33 Supplies	33 3,641	2,476	983	182
34 Telephone	34 3,767	2,562	1,017	188
35 Postage and shipping	35 874	594	236	44
36 Occupancy	36 37,731	25,657	10,187	1,887
37 Equipment rental and maintenance	37 5,828	3,963	1,574	291
38 Printing and publications	38 2,034	1,383	549	102
39 Travel	39 10,990	7,473	2,967	550
40 Conferences, conventions, and meetings	40 5,179		4,695	484
41 Interest	41 1,148		1,148	
42 Depreciation, depletion, etc. (attach schedule)	42 60,567	60,567		
43 Other expenses not covered above (itemize):				
a See Statement 4	43a 78,783	51,827	23,145	3,811
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g	43g			
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 577,235	405,853	145,508	25,874

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?

▶ **See Statement 5**

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 PROVIDE NO-COST TO LOW-COST TECHNOLOGY SUPPORT AND EDUCATION TO OTHER NONPROFITS ACROSS THE STATE OF MICHIGAN ON A MEMBERSHIP BASIS

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

577,235

b

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

c

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

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) ▶

577,235

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	23,680	45		
	46 Savings and temporary cash investments		46		
	47a Accounts receivable	47a			
	b Less: allowance for doubtful accounts	47b	35,905	47c	
	48a Pledges receivable	48a			
	b Less: allowance for doubtful accounts	48b		48c	
	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) (att. schedule)			50b	
	51a Other notes and loans receivable (attach schedule)	51a			
	b Less: allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges		7,876	53	
	54a Investments—publicly-traded securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments—other securities (attach schedule)	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
	55a Investments-land, buildings, and equipment: basis	55a			
	b Less: accumulated depreciation (attach schedule)	55b		55c	
	56 Investments-other (attach schedule)			56	
	57a Land, buildings, and equipment: basis	57a			
	b Less: accumulated depreciation (attach schedule)	57b	174,735	57c	
58 Other assets, including program-related investments (describe ▶)			58		
59 Total assets (must equal line 74). Add lines 45 through 58		242,196	59	0	
Liabilities	60 Accounts payable and accrued expenses	5,005	60		
	61 Grants payable		61		
	62 Deferred revenue		62		
	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 ▶ See Statement 7)		70,842	65	
66 Total liabilities. Add lines 60 through 65		75,847	66	0	
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	166,349	67		
	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)		166,349	73	0
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		242,196	74	0

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 quid pro quo contributions?		N/A
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?		N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		N/A
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.		N/A
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
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A
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?		N/A
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		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0 ; section 4912 0 ; section 4955 0		
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		X
89b			
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
89e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
89f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
89g	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?		X
90a	List the states with which a copy of this return is filed MI		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)		90b
91a	The books are in care of LISA KEEFER Telephone no. 517-492-2400 1048 PIERPONT STE 3		
	Located at LANSING, MI ZIP + 4 48911		
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)?		X
	If "Yes," enter the name of the foreign country		91b
	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)

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 ▶

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 CONSULTING/TRAINING					139,048
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					16,984
95 Interest on savings and temporary cash investments					
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					-2,844
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b MISCELLANEOUS					4,854
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		0	158,042
105 Total (add line 104, columns (B), (D), and (E))					158,042

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).
93a	PROVIDING LOT-COST, HIGH QUALITY TECHNOLOGY ASSISTANCE & TRAINING TO NONPROFIT ORGANIZATIONS
94	MEMBERSHIP DUES TO OFFSET THE COST OF SERVICES
103b	MISCELLANEOUS INCOME USED TO OFFSET THE COST OF SERVICES

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
N/A	%			
	%			
	%			
	%			

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
		<input checked="" type="checkbox"/>

(A) Name, address, of each controlled entity	(B) Employer ID 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
		<input checked="" type="checkbox"/>

(A) Name, address, of each controlled entity	(B) Employer ID 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

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	Signature of officer KYLE CALDWELL Type or print name and title	Date PRESIDENT
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Paid Preparer's Use Only	Preparer's signature DAVID J AMBROSE	Date 2/12/09	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Instr. X)
	Firm's name (or yours if self-employed), address, and ZIP + 4 DAVID J. AMBROSE, CPA 836 CENTENNIAL WAY, SUITE 110 LANSING, MI 48917	EIN	Phone no. 517-319-1040	

**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

NPOWER MICHIGAN TECHNOLOGY CENTER

Employer identification number

38-3616199

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) Comp.	(d) Contrib. to empl. ben. plans & deferred comp.	(e) Expense account & other allowances
ANDY WOLBER 1048 PIERPONT STE 3 LANSING MI 48911	DIR CONSULT 40	101,250	0	0
KRISTINE MUCHER 1048 PIERPONT STE 3 LANSING MI 48911	PROGRAM DIR 40	59,363	0	0
MARK SHAW 1048 PIERPONT STE 3 LANSING MI 48911	TECH CONSULT 40	57,115	0	0
Total number of other employees paid over \$50,000	▶ 0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶	

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	▶	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2006

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

Yes No

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

- 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.)	504,702	801,790	175,978	640,027	2,122,497
16 Membership fees received	35,619	35,619	29,832	10,346	111,416
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	196,070	185,501	142,831	33,171	557,573
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			1,166	5,553	6,719
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					0
23 Total of lines 15 through 22	736,391	1,022,910	349,807	689,097	2,798,205
24 Line 23 minus line 17	540,321	837,409	206,976	655,926	2,240,632
25 Enter 1% of line 23	7,364	10,229	3,498	6,891	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 44,813
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 2,240,632
d Add: Amounts from column (e) for lines: 18 6,719 19 _____ 22 _____ 26b _____					26d 6,719
e Public support (line 26c minus line 26d total)					26e 2,233,913
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 99.7001%
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) _____					N/A
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) _____					N/A
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c
d Add: Line 27a total _____ and line 27b total _____					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %

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)

		N/A	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?	29		
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?	30		
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?	31		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)				
.....				
.....				
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	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.)				
.....				
.....				
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)				
.....				
.....				
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	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.				
.....				
.....				
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	35		

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) **N/A**

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		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
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:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h .)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h .)			

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2006

Name of organization

Employer identification number

NPOWER MICHIGAN TECHNOLOGY CENTER

38-3616199

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- 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

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.)

General Rule-

- For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

- For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2006)

Name of organization NPOWER MICHIGAN TECHNOLOGY CENTER	Employer identification number 38-3616199
--	---

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MICROSOFT FOUNDATION ONE MICROSOFT WAY <hr/> REDMOND WA 98052-6399	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	CHARLES STEWART MOTT FOUNDATION 503 S SAGINAW ST STE 1200 <hr/> FLINT MI 48502-1851	\$ 76,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	UNITED WAY OF OAKLAND COUNTY 50 WAYNE ST <hr/> PONTIAC MI 48342	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	KELLOGG FOUNDATION ONE MICHIGAN AVENUE EAST <hr/> BATTLE CREEK MI 48226	\$ 113,290	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	ACCENTURE 151 N CLARK <hr/> CHICAGO IL 60601	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	MICHIGAN NONPROFIT ASSOCIATION 1048 PIERPONT STE 3 <hr/> LANSING MI 48911	\$ 56,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Federal Statements

Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments

<u>Description</u>	<u>Amount</u>
MEMBERSHIP REVENUE	\$ 16,984
Total	<u>\$ 16,984</u>

COPY

38-3616199

Federal Statements

FYE: 12/31/2006

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
COMP USA COMPUTER	Purchase		2/19/02	12/31/06	\$	\$ 3,036	\$ 2,960	\$ -76
EPSON SCANNER & EQUIP	Purchase		2/26/02	12/31/06		625	625	
COMPUTER EQUIP	Purchase		9/26/02	12/31/06		537	537	
DELL PENTIUM 3	Purchase		6/07/02	12/31/06		3,092	2,834	-258
POWER STRIP	Purchase		10/18/02	12/31/06		16	16	
DELL LATITUDE	Purchase		11/14/02	12/31/06		2,201	1,815	-386
COMP USA COMPUTER	Purchase		2/19/02	12/31/06		2,867	2,794	-73
LAB MATERIAL	Purchase		10/04/02	12/31/06		237	199	-38
DELL POWEREDGE	Purchase		9/17/02	12/31/06		3,003	2,578	-425
COMP USA COMPUTER EQUIP	Purchase		12/31/02	12/31/06		243	198	-45
5 POWER STRIPS	Purchase		4/02/02	12/31/06		115	97	-18
CAMERA EQUIP	Purchase		5/28/02	12/31/06		60	50	-10
OFFICE EQUIP	Purchase		3/31/02	12/31/06		4,412	4,228	-184
DELL LATITUDE PENT 4	Purchase		10/17/02	12/31/06		2,561	2,113	-448
COMPUTER PERIPHERALS	Purchase		2/25/02	12/31/06		1,506	1,468	-38
COMPUTER PERIPHERALS	Purchase		9/17/02	12/31/06		25	19	-6
VGA COMPUTER CABLE	Purchase		10/21/02	12/31/06		141	118	-23
15' PRINTER CABLE	Purchase		12/31/02	12/31/06		25	18	-7

38-3616199

Federal Statements

FYE: 12/31/2006

**Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other
(continued)**

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/-Loss
COMP USA COMPUTER CABLES	Purchase		4/26/02	12/31/06	\$	\$ 349	\$ 280	\$ -69
MS SOFTWARE	Purchase		5/23/02	12/31/06		34,063	34,063	
NORTON ANTIVIRUS	Purchase		1/01/02	12/31/06		624	624	
MS SOFTWARE	Purchase		11/07/02	12/31/06		14,594	14,594	
FILEMAKER SOFTWARE	Purchase		11/08/02	12/31/06		1,951	1,951	
CDW SOFTWARE	Purchase		10/21/02	12/31/06		121	121	
MS PSS INCIDENT	Purchase		8/05/02	12/31/06		6,125	6,125	
MS SOFTWARE	Purchase		5/23/02	12/31/06		34,063	34,063	
NORTON ANTIVIRUS	Purchase		6/01/02	12/31/06		624	624	
OFFICE SOFTWARE	Purchase		6/22/02	12/31/06		3,045	3,045	
ADOBE SOFTWARE	Purchase		9/27/02	12/31/06		69	69	
SNAGIT SOFTWARE	Purchase		3/08/02	12/31/06		185	185	
ARTICLE MANAGER SOFTWARE	Purchase		9/19/02	12/31/06		895	895	
MS TRAINING BOOKS	Purchase		6/04/02	12/31/06		4,549	4,549	
OFFICE REMODELING	Purchase		7/01/02	12/31/06		33,550	32,810	-740

Federal Statements

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other
(continued)

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
Total					\$ 0	\$ 159,509	\$ 156,665	\$ -2,844

COPY

38-3616199

Federal Statements

FYE: 12/31/2006

Statement 3 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
2005 AUDIT ADJUSTMENT MADE AFTER 990 FILED	\$ 6,434
TRANSFER OF ASSETS TO MICHIGAN NONPROFIT ASSOCIATION TIN 38-2959692	-147,108
Total	\$ <u>-140,674</u>

Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
Expenses	\$	\$	\$	\$
CONTRACT SERVICES	46,677	31,740	12,603	2,334
STAFF/BOARD DEVELOPMENT	212		212	
MARKETING	6,045	4,111	1,632	302
INSURANCE	11,701	7,957	3,159	585
SUBSCRIPT/LICENSES/USER FEES	10,095	6,864	2,726	505
MISCELLANEOUS	4,053	1,155	2,813	85
Total	\$ <u>78,783</u>	\$ <u>51,827</u>	\$ <u>23,145</u>	\$ <u>3,811</u>

Statement 5 - Form 990, Part III - Organization's Primary Exempt Purpose

NPOWER MICHIGAN WAS ORGANIZED TO PROVIDE COMPREHENSIVE, HIGH-QUALITY AND AFFORDABLE TECHNOLOGY ASSISTANCE TO MICHIGAN NONPROFIT ORGANIZATIONS.

Statement 6 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
EQUIP, FURNITURE & SOFTWARE	\$ 291,998	\$ 117,263	\$ 0	\$ 0
Total	\$ <u>291,998</u>	\$ <u>117,263</u>	\$ <u>0</u>	\$ <u>0</u>

Statement 7 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
NOTE PAYABLE - KANSAS STATE BANK	\$ 70,842	\$ 0
Total	\$ <u>70,842</u>	\$ <u>0</u>

38-3616199

Federal Statements

FYE: 12/31/2006

Statement 8 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
DAN ATKINS 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0
SCOTT GOEMMEL 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0
WARREN E GOODELL 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0
WAYNE MCLEROY 1048 PIERPONT STE 3 LANSING MI 48911	TREASURER	1-3	0	0	0
PAT MCQUEEN 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0
PHYLLIS MEADOWS 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0
MIKE MINELLI 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0
RICHARD K RAPPEYE 1048 PIERPONT STE 3 LANSING MI 48911	CHAIR	1-3	0	0	0
ELIZABETH SIVER 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0

Federal Statements

Statement 8 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
SANDRO VISELLI 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0
KEN YOUNG 1048 PIERPONT STE 3 LANSING MI 48911	DIRECTOR	1-3	0	0	0

Statement 9 - Form 990, Part VI, Line 79 - Description of Dissolution

<u>Name / Address</u>	<u>Explanation</u>	<u>Amount</u>
MICHIGAN NONPROFIT ASSOCIATION 1048 PIERPONT ST STE 3 LANSING MI 48911	MERGED WITH TIN 38-2959692	\$ 147,108

38-3616199

Federal Asset Report

FYE: 12/31/2006

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:											
1	COMP USA COMPUTER Sold/Scrapped: 12/31/06	2/19/02	3,036				3,036	5	MO S/L	2,353	607
2	EPSON SCANNER & EQUIP Sold/Scrapped: 12/31/06	2/26/02	625				625	5	MO S/L	625	0
3	COMPUTER EQUIP Sold/Scrapped: 12/31/06	9/26/02	537				537	5	MO S/L	537	0
4	DELL PENTIUM 3 Sold/Scrapped: 12/31/06	6/07/02	3,092				3,092	5	MO S/L	2,216	618
5	POWER STRIP Sold/Scrapped: 12/31/06	10/18/02	16				16	5	MO S/L	16	0
6	TOSHIBA LAPTOP	7/07/04	2,618				2,618	5	MO S/L	742	524
7	LAPTOP (ANDY)	3/03/04	2,249				2,249	5	MO S/L	787	450
8	DELL LATITUDE Sold/Scrapped: 12/31/06	11/14/02	2,201				2,201	5	MO S/L	1,375	440
9	COMP USA COMPUTER Sold/Scrapped: 12/31/06	2/19/02	2,867				2,867	5	MO S/L	2,221	573
10	LAB MATERIAL Sold/Scrapped: 12/31/06	10/04/02	237				237	5	MO S/L	152	47
11	DELL POWEREDGE Sold/Scrapped: 12/31/06	9/17/02	3,003				3,003	5	MO S/L	1,977	601
12	COMP USA COMPUTER EQUIP Sold/Scrapped: 12/31/06	12/31/02	243				243	5	MO S/L	149	49
13	5 POWER STRIPS Sold/Scrapped: 12/31/06	4/02/02	115				115	5	MO S/L	85	12
14	CAMERA EQUIP Sold/Scrapped: 12/31/06	5/28/02	60				60	5	MO S/L	44	6
15	OFFICE EQUIP Sold/Scrapped: 12/31/06	3/31/02	4,412				4,412	5	MO S/L	3,346	882
16	DELL LATITUDE PENT 4 Sold/Scrapped: 12/31/06	10/17/02	2,561				2,561	5	MO S/L	1,601	512
17	COMPUTER PERIPHERALS Sold/Scrapped: 12/31/06	2/25/02	1,506				1,506	5	MO S/L	1,167	301
18	COMPUTER PERIPHERALS Sold/Scrapped: 12/31/06	9/17/02	25				25	5	MO S/L	16	3
19	VGA COMPUTER CABLE Sold/Scrapped: 12/31/06	10/21/02	141				141	5	MO S/L	90	28
20	15' PRINTER CABLE Sold/Scrapped: 12/31/06	12/31/02	25				25	5	MO S/L	15	3
21	COMP USA COMPUTER CABLES Sold/Scrapped: 12/31/06	4/26/02	349				349	5	MO S/L	210	70
22	MS SOFTWARE Sold/Scrapped: 12/31/06	5/23/02	34,063				34,063	3	MO S/L	34,063	0
23	NORTON ANTIVIRUS Sold/Scrapped: 12/31/06	1/01/02	624				624	3	MO S/L	624	0
24	MS SOFTWARE Sold/Scrapped: 12/31/06	11/07/02	14,594				14,594	3	MO S/L	14,594	0
25	FILEMAKER SOFTWARE Sold/Scrapped: 12/31/06	11/08/02	1,951				1,951	3	MO S/L	1,951	0
26	CDW SOFTWARE Sold/Scrapped: 12/31/06	10/21/02	121				121	2	MO S/L	121	0
27	MS PSS INCIDENT Sold/Scrapped: 12/31/06	8/05/02	6,125				6,125	3	MO S/L	6,125	0
28	MS SOFTWARE Sold/Scrapped: 12/31/06	5/23/02	34,063				34,063	3	MO S/L	34,063	0
29	NORTON ANTIVIRUS Sold/Scrapped: 12/31/06	6/01/02	624				624	3	MO S/L	624	0
30	OFFICE SOFTWARE Sold/Scrapped: 12/31/06	6/22/02	3,045				3,045	3	MO S/L	3,045	0
31	ADOBE SOFTWARE Sold/Scrapped: 12/31/06	9/27/02	69				69	3	MO S/L	69	0
32	SNAGIT SOFTWARE Sold/Scrapped: 12/31/06	3/08/02	185				185	3	MO S/L	185	0
33	ARTICLE MANAGER SOFTWARE Sold/Scrapped: 12/31/06	9/19/02	895				895	3	MO S/L	895	0
34	MS MSDN WINDOWS	10/10/03	7,185				7,185	3	MO S/L	5,389	1,796
35	COMPUTER SOFTWARE (NETSUITE)	3/31/04	44,990				44,990	5	MO S/L	15,747	8,998
36	COMPUTER SOFTWARE (NETSUITE)	5/27/04	10,012				10,012	5	MO S/L	3,170	2,002
37	COMPUTER SOFTWARE (MS)	12/30/04	43,100				43,100	5	MO S/L	8,620	8,620

Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
38	MS SOFTWARE	6/08/04	91,997			91,997	5 MO S/L	27,599	18,399
39	LAB PROJECTOR	4/04/02	4,640			4,640	7 MO S/L	2,486	663
40	10 DOOR FILE CABINETS	10/11/02	690			690	7 MO S/L	317	99
41	STACKABLE CAFE FILING	10/11/02	347			347	7 MO S/L	160	50
42	CAFE TABLES	10/31/02	323			323	7 MO S/L	148	46
43	FILE CABINETS	10/31/02	1,500			1,500	7 MO S/L	669	214
44	5 ERGON CHAIRS	11/27/02	1,220			1,220	7 MO S/L	573	174
45	7 PNEUMATIC CHAIRS	9/21/02	1,303			1,303	7 MO S/L	790	186
46	OFFICE FURNITURE	3/23/02	1,482			1,482	7 MO S/L	785	212
47	OFFICE FURNITURE	4/15/02	242			242	7 MO S/L	128	35
48	WHITEBOARDS	10/24/02	774			774	7 MO S/L	351	111
49	TELEPHONES	1/22/02	8,741			8,741	7 MO S/L	4,891	1,249
50	DALE OFFICE EQUIP	3/29/02	1,073			1,073	3 MO S/L	1,073	0
51	MS TRAINING BOOKS	6/04/02	4,549			4,549	3 MO S/L	4,549	0
	Sold/Scrapped: 12/31/06								
52	OFFICE REMODELING	7/01/02	33,550			33,550	4 MO S/L	28,616	4,194
	Sold/Scrapped: 12/31/06								
53	COMPUTERS	3/15/06	35,411			35,411	5 MO S/L	0	7,082
54	COMPUTERS	5/01/06	1,176			1,176	5 MO S/L	0	235
55	COMPUTER SOFTWARE - MTI CRUCIA	4/07/06	1,429			1,429	3 MO S/L	0	476
	Total Other Depreciation		<u>422,011</u>			<u>422,011</u>		<u>222,144</u>	<u>60,567</u>
	Total ACRS and Other Depreciation		<u>422,011</u>			<u>422,011</u>		<u>222,144</u>	<u>60,567</u>
	Grand Totals		422,011			422,011		222,144	60,567
	Less: Dispositions		<u>159,509</u>			<u>159,509</u>		<u>147,719</u>	<u>8,946</u>
	Net Grand Totals		<u>262,502</u>			<u>262,502</u>		<u>74,425</u>	<u>51,621</u>

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