

Return of Organization Exempt From Income Tax

2004

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2004 calendar year, or tax year beginning July 1, 2004, and ending June 30, 2005

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Franklin Land Trust, Inc.		D Employer identification number 22-2744488
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. Box 450 36 State Street		E Telephone number (413) 625-9151
		City or town, state or country, and ZIP + 4 Shelburne Falls, MA 01370		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

G Website: ▶ **www.franklinlandtrust.org**

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶ **n/a**
H(c) Are all affiliates included? 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

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

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **\$ 627,591**

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 page 18 of the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a		333,643	
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total from lines 1a through 1c (cash \$ 330,184 noncash \$ 3,459)	1d			333,643
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			250,514
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			3,096
	5 Dividends and interest from securities	5			925
	6a Gross rental income	6a			
	6b Less: rental expenses	6b			
	6c 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			
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
Revenue	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a		39,413	
	b Less: direct expenses other than fundraising expenses	9b		22,820	
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9c			16,593
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			
Revenue	11 Other revenue (from Part VII, line 103)	11			
	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			604,771
Expenses	13 Program services (from line 44, column (B))	13			181,599
	14 Management and general (from line 44, column (C))	14			81,405
	15 Fundraising (from line 44, column (D))	15			33,886
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17			296,890
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18			307,881
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			693,122
	20 Other changes in net assets or fund balances (attach explanation)	20			(191)
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			1,000,812

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of 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
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	86,125	51,310	28,309	6,506
26	Other salaries and wages	12,000	12,000		
27	Pension plan contributions	840	840		
28	Other employee benefits	6,962	5,536	1,088	338
29	Payroll taxes	7,950	5,167	2,306	477
30	Professional fundraising fees	10,969		2,194	8,775
31	Accounting fees	5,465		5,465	
32	Legal fees	31,262	894	30,368	
33	Supplies	8,830	5,759	2,253	818
34	Telephone	3,528	2,646	529	353
35	Postage and shipping	3,623	668	135	2,820
36	Occupancy	4,700	3,525	705	470
37	Equipment rental and maintenance				
38	Printing and publications	569		114	455
39	Travel	3,795	3,035	570	190
40	Conferences, conventions, and meetings				
41	Interest	11,825	11,825		
42	Depreciation, depletion, etc. (attach schedule)	2,672	2,004	400	268
43	Other expenses not covered above (itemize): a misc.	2,091	991	754	346
	b property taxes	6,501	6,501		
	c appraisals	3,601	3,601		
	d insurance	1,049	775	274	
	e see attached	82,533	64,522	5,941	12,070
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	296,890	181,599	81,405	33,886

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 \$ _____ n/a

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? land preservation	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)
a See attached	
(Grants and allocations \$ 0)	181,599
b	
(Grants and allocations \$)	
c	
(Grants and allocations \$)	
d	
(Grants and allocations \$)	
e Other program services (attach schedule) (Grants and allocations \$)	
f Total of Program Service Expenses (should equal line 44 column (B) Program services)	181,599

Part IV Balance Sheets (See page 25 of the instructions.)

				(A)		(B)	
				Beginning of year		End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.							
Assets	45	Cash—non-interest-bearing			45		
	46	Savings and temporary cash investments		313,552	46	400,364	
	47a	Accounts receivable	47a	115,677			
	b	Less: allowance for doubtful accounts	47b		28,358	47c	115,677
	48a	Pledges receivable	48a	125,850			
	b	Less: allowance for doubtful accounts	48b	6,925	47,829	48c	118,925
	49	Grants receivable			49		
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50		
	51a	Other notes and loans receivable (attach schedule)	51a	111,615			
	b	Less: allowance for doubtful accounts	51b		115,847	51c	111,615
	52	Inventories for sale or use			13,443	52	
	53	Prepaid expenses and deferred charges			212,212	53	26,103
	54	Investments—securities (attach schedule)				54	77,809
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	389,225				
b	Less: accumulated depreciation (attach schedule)	57b	3,965	426,809	57c	385,260	
58	Other assets (describe ► <u>see attached</u>)			864,868	58	620,763	
59	Total assets (add lines 45 through 58) (must equal line 74)			2,022,918	59	1,856,516	
Liabilities	60	Accounts payable and accrued expenses		31,976	60	35,669	
	61	Grants payable			61		
	62	Deferred revenue		126,912	62	112,035	
	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)			1,170,908	64b	708,000
	65	Other liabilities (describe ► _____)				65	
66	Total liabilities (add lines 60 through 65)			1,329,796	66	855,704	
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		341,867	67	647,241	
	68	Temporarily restricted		351,255	68	353,571	
	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; column (B) must equal line 21)			693,122	73	1,000,812
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)			2,022,918	74	1,856,516

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.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
<p>a Total revenue, gains, and other support per audited financial statements ▶ a 639,665</p> <p>b Amounts included on line a but not on line 12, Form 990:</p> <p>(1) Net unrealized gains on investments \$ (191)</p> <p>(2) Donated services and use of facilities \$ 12,265</p> <p>(3) Recoveries of prior year grants \$</p> <p>(4) Other (specify): <u>fundraising event expenses</u> \$ 22,820</p> <p>Add amounts on lines (1) through (4) ▶ b 34,894</p> <p>c Line a minus line b ▶ c 604,771</p> <p>d Amounts included on line 12, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$</p> <p>(2) Other (specify):</p> <p>..... \$</p> <p>Add amounts on lines (1) and (2) ▶ d</p> <p>e Total revenue per line 12, Form 990 (line c plus line d) ▶ e 604,771</p>	<p>a Total expenses and losses per audited financial statements ▶ a 331,975</p> <p>b Amounts included on line a but not on line 17, Form 990:</p> <p>(1) Donated services and use of facilities \$ 12,265</p> <p>(2) Prior year adjustments reported on line 20, Form 990 \$</p> <p>(3) Losses reported on line 20, Form 990 \$</p> <p>(4) Other (specify): <u>fundraising expenses</u> \$ 22,820</p> <p>Add amounts on lines (1) through (4) ▶ b 35,085</p> <p>c Line a minus line b ▶ c 296,890</p> <p>d Amounts included on line 17, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$</p> <p>(2) Other (specify):</p> <p>..... \$</p> <p>Add amounts on lines (1) and (2) ▶ d</p> <p>e Total expenses per line 17, Form 990 (line c plus line d) ▶ e 296,890</p>

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Harry Dodson, 56 South Street Ashfield, MA 01330	President 1.5 hr/month	-0-	-0-	-0-
Charles Cohn, 226 Cooper Lane Shelburne, MA 01370	Treasurer 3.0 hr/month	-0-	-0-	-0-
Mary Sabourin, 8 East Street, PO Box 32 Plainfield, MA 01070	Clerk 20 hr/week	\$21,987	-0-	-0-
See Attached List of Board Members	Directors	-0-	-0-	-0-
Richard Hubbard, 167 Moosehorn Road New Salem, MA	Executive Director	\$ 64,138	-0-	Travel \$ 3,795

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶ Yes No
If "Yes," attach schedule—see page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.		<input checked="" type="checkbox"/>
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		<input checked="" type="checkbox"/>
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		<input checked="" type="checkbox"/>
78b	If "Yes," has it filed a tax return on Form 990-T for this year?		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		<input checked="" type="checkbox"/>
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		<input checked="" type="checkbox"/>
80b	If "Yes," enter the name of the organization n/a and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a	Enter direct and indirect political expenditures. See line 81 instructions 81a <u>-0-</u>		
81b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
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?	<input checked="" type="checkbox"/>	
82b	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 <u>12,265</u>		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	<input checked="" type="checkbox"/>	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		<input checked="" type="checkbox"/>
84b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
85b	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.		
85c	c Dues, assessments, and similar amounts from members.		
85d	d Section 162(e) lobbying and political expenditures.		
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.		
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)		
85g	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
85h	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?		
86a	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12.		
86b	b Gross receipts, included on line 12, for public use of club facilities		
87a	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
87b	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.		<input checked="" type="checkbox"/>
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>-0-</u> ; section 4912 <u>-0-</u> ; section 4955 <u>-0-</u>		
89b	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		<input checked="" type="checkbox"/>
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>-0-</u>		
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>n/a</u>		
90a	List the states with which a copy of this return is filed <u>Massachusetts</u>		
90b	b Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) <u>3</u>		
91	The books are in care of <u>Richard Hubbard</u> Telephone no. <u>(413) 625-9151</u> Located at <u>36 State Street, Shelburne Falls, MA</u> ZIP + 4 <u>01370</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here. <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <u>92</u> <u>n/a</u>		

Part VII Analysis of Income-Producing Activities (See page 33 of 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 preservation consulting					78,887
b gain on land preservation projects					165,977
c lease land					5,650
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	3,096	
96 Dividends and interest from securities			14	925	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					16,593
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				4,021	267,107
105 Total (add line 104, columns (B), (D), and (E))					271,128

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of 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	provide management and preservation advisory services to other land trusts
93b	preserve land through limited development and preservation restrictions
93c	restrict development rights and lease land until resale is finalized
101	fundraising events raised the awareness and involvement of the community in the preservation projects

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of 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).

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: Charles M. Cohn Date: 1/5/18/06

Type or print name and title: Charles M. Cohn treas.

Paid Preparer's Use Only

Preparer's signature: Carole Zambito Date: 5-16-06 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: Carole Zambito, CPA EIN: _____

Preparer's SSN or PTIN (See Gen Inst W): 133-38-9906 Phone no.: (413) 625-9538

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 Section 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2004

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Franklin Land Trust, Inc.

Employer identification number

22 : 2744488

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Richard Hubbard, 167 Moosehorne Road New Salem, MA 01355	Executive Director 40 hr/week	\$ 64,138	-0-	Travel \$ 3,795
Total number of other employees paid over \$50,000 ▶	-0-			

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶	-0-	

Part 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> <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>		
a Sale, exchange, or leasing of property?	✓	
b Lending of money or other extension of credit?		✓
c Furnishing of goods, services, or facilities?		✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	✓	
e Transfer of any part of its income or assets?		✓
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		✓
b Do you have a section 403(b) annuity plan for your employees?	✓	
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		✓
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		✓

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

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

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(ii).
- 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)(ii). 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 supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	181,485	292,696	316,132	205,815	996,128
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	188,776	111,656	39,195	(24,401)	315,226
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	3,901	7,090	7,183	12,646	30,820
19 Net income from unrelated business activities not included in line 18				(3,070)	(3,070)
20 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					
23 Total of lines 15 through 22	374,162	411,442	362,510	190,990	1,339,104
24 Line 23 minus line 17	185,386	299,786	323,315	15,391	1,023,878
25 Enter 1% of line 23	3,742	4,114	3,625	1,910	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a	20,478
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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	26b	432,357
c Total support for section 509(a)(1) test: Enter line 24, column (e)	26c	1,023,878
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____	26d	460,107
e Public support (line 26c minus line 26d total)	26e	563,771
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	55.1 %

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:

(2003) _____ (2002) _____ (2001) _____ (2000) _____

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 11, 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.

(2003) _____ (2002) _____ (2001) _____ (2000) _____

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	1,271
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 2000 through 2003, 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 7 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?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 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 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(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 11 of the instructions.)

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

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

Yes	No	Amount
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	-0-

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

Part I Line 9 Special Events -Fundraising

	<u>Revenue</u>	<u>Expenses</u>	<u>Net Revenue</u>
Farm & Garden Tour	\$ 6,782	\$ 2,003	\$ 4,779
Art Sale	\$ 28,528	20,280	8,248
Misc. other	717	133	584
Fall Festival	3,386	404	2,982
Total	<u>\$ 39,413</u>	<u>\$ 22,820</u>	<u>\$ 16,593</u>

Part I Line 20 Other Changes in Net Assets:

Decrease in market value of investments \$ (191)

Part II Line 42 Depreciation:

	<u>Depreciation Expense</u>	<u>Depreciable Life</u>
Equipment	\$ 2,672	3 yrs.

Part II Line 43(e) Other Expenses:

	<u>Total</u>	<u>Program</u>	<u>Management</u>	<u>Fundraising</u>
Project costs	\$ 12,630	\$ 12,630		
Newsletter	2,887			\$ 2,887
Advertising	1,538		\$ 659	879
Dues	1,185		1,185	
Consultants	60,849	50,501	3,367	6,981
Special events	2,384	1,391	730	263
Fundraising	1,060			1,060
Total	<u>\$82,533</u>	<u>\$ 64,522</u>	<u>\$ 5,941</u>	<u>\$ 12,070</u>

Part III Statement of Program Accomplishments:

In the fiscal year ended June 30, 2005 the Franklin Land Trust, Inc. (the Land Trust) closed six projects in five towns in Franklin County in Western Massachusetts resulting in the protection of 393 acres of land. In addition, the Land Trust Board voted to move forward on negotiating the protection of another six properties in six towns in Franklin County.

Part III Statement of Program Accomplishments:, continued

The Land Trust entered into a consulting agreement with the Conservation Fund of Arlington, VA to act as its land protection agent in Massachusetts, Connecticut and southern Vermont when requested. The Land Trust also has entered into agreements with two other local land conservation organizations to assist with conservation projects in their local areas.

Part IV Lines 51(c) and 62: Mortgage Receivable and Deferred Revenue

The Franklin Land Trust coordinated the sale of agricultural preservation restrictions on farmland to the Commonwealth of Massachusetts Department of Food and Agriculture. The sale was structured as installment sale with the Franklin Land Trust holding the portion of the sales proceeds which were to be paid out over time. The proceeds were used to acquire the mortgage on the farmland on which the restrictions were sold. The mortgage will be forgiven as installment payments are made over the term of the mortgage.

The sales proceeds and mortgage being held by Franklin Land Trust and the corresponding obligations to make the installment payments are reflected on Balance Sheet as follows:

Line 51(c) Mortgages Receivable:

Mortgage Receivable: interest of 9.5%	\$ 111,615
monthly principal and interest payments of \$ 1,255; due 2013	

Line 62 Deferred Revenue:

Deferred payment interest 9.5%	\$ 111,615
on installment sale paid \$ 1,255 monthly due 2013	

Unexpended grant funds	420
Total Deferred Revenue	<u>\$ 112,035</u>

Part IV Line 54 Investments:

Short Term Treasury Fund	33,586
Certificates of Deposit	44,223
Total Investments	<u>\$77,809</u>

Part IV Line 57 Land, Buildings & Equipment:

<u>Asset</u>	<u>Cost</u>	<u>Accumulated Depr.</u>
Equipment	\$ 11,061	\$ 3,965
Land & Buildings	<u>378,164</u>	
Total	<u>\$ 389,225</u>	

Part IV Line 58 Other Assets:

Development restrictions	\$ 578,296
Lease receivable, on sale of 70 acres of farmland, payable in \$ 500 installments per year over 99 years, with a \$ 1,000 purchase option at the end of the lease.	15,780
Deferred project expenses	<u>26,687</u>
Total	<u>\$ 620,763</u>

<u>Part IV Line 64(b)</u>		<u>Notes Payable:</u>		
<u>Payments Due</u>	<u>Interest</u>	<u>Collateral</u>		<u>Total</u>
\$25,000 due in August 2006 or at sale of dev.rights	Interest free to August '06 thereafter 10%	unsecured		\$ 25,000
\$ 20,480 per year; matures 10/18/06	-	mortgage on development rights		40,960
\$42,760 plus interest payable October 2005 & 2006	2.02% to 2.27%	certificates of deposit		88,281
\$ 120,000 due July 2006 \$ 70,000 due July 2008	-	-		190,000
lump sum due at sale of restricted land	5-6%	-		86,409
\$ 11,653 per year on August 1	-	-		23,305
lump sum due the earliest of 11/11/05 or sale of dev. rights	3.5%	mortgage on development rights		254,045
Total				<u>\$ 708,000</u>

Part V List of Directors:

<u>Name</u>	<u>Addresses</u>	<u>Hours</u>
Directors:		
Tom Luck	115 George Lamb Road, Leyden, Ma.	4 per month
Norma Coli	2 Warner Hill Rd, Charlemont, Ma.	4 per month
Stuart Harris	1392 Cape Street, Ashfield, Ma.	4 per month
Jay Healey	136 Burnt Hill Rd, Shelburne, Ma.	1 per month
Larry Shearer	201 Thompson Road, Colrain, Ma.	1 per month
Mary Torras	264 Bardswell Ferry Rd, Shelburne, Ma	1 per month
Richard Todd	354 John Ford Road, Ashfield, Ma.	4 per month
Bob Dane	1 Rowe Road, Heath, Ma.	1 per month
Faith Williams	Frank Williams Rd., Shelburne, MA	1 per month
Cris Coffin	Christian Lane, Whately, MA	1 per month
Elizabeth Sillin	34 S. Main Street, Sunderland, MA	1 per month

Part III Statements About Activities:

Line 2(a) Leasing of Property From Principal Officer:

The Franklin Land Trust rents office space from a company owned by the President of the Franklin Land Trust's Board of Directors. The Trust pays \$400 per month for the office space.

Line 2(d) Payment of Compensation to Principal Officers:

Mary Sabourin, Clerk of the Franklin Land Trust's Board of Directors, was also the Office Manager of the Franklin Land Trust. In the fiscal year ended June 30, 2005 she was paid \$ 21,987 for her 20 hour a week position as officer manager.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1700

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ▶
- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Automatic 3-Month Extension of Time—Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension—check this box and complete Part I only ▶
 All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8738 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print	Name of Exempt Organization Franklin Land Trust, Inc.	Employer identification number 22-2744688
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 36 State Street	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Shelburne Falls, MA 01370	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 9870 |

• The books are in the care of ▶ **Richard Hubbard**

Telephone No. ▶ (**413**) **625-6151** FAX No. ▶ (**413**) **625-6153**

- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) NA. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until February 15, 2006, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year 20... or
 ▶ tax year beginning July 1, 2006, and ending June 30, 2006.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ NA
 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ NA
 c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ NA

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time—Must File Original and One Copy.

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization Franklin Land Trust, Inc.	Employer identification number 22 : 2744488
	Number, street, and room or suite no. If a P.O. box, see instructions. 36 State Street P. O. Box 450	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Shelburne Falls, MA 01370	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 4720 | |

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **Richard Hubbard**
 Telephone No. ▶ (413) 625 - 9151 FAX No. ▶ (413) 625 - 9153
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) N/A If this is for the **whole group**, check this box . If it is for **part of the group**, check this box and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until May 15, 2006
- 5 For calendar year _____, or other tax year beginning July 1, 2004 and ending June 30, 2005
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7 State in detail why you need the extension The Corporation moved to a new office site after twenty years in its original site. The move and reorganization of the office has delayed the completion of the Corporation's audit which is required by the Commonwealth of Massachusetts.
- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ N/A
- b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ N/A
- c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ [Signature] Title ▶ PRESIDENT Date ▶ 2/9/06

Notice to Applicant—To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested
- Other _____

EXTENSION APPROVED
MAR 03 2006

Director _____ By _____ FIELD DIRECTOR, SUBMISSIONS PROCESSING, OGDEN

Alternate Mailing Address — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name
	Number and street (include suite, room, or apt. no.) or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)