

Form **990-EZ**

Short Form
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)

OMB No 1545-1150

2006

Department of the Treasury
Internal Revenue Service

▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

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

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. Please use II label print type. See Spec Instructions.

200612 040030000 29 IC
 ONE NATION UNITED
 PO BOX 3335
 REDMOND WA 98073-3335

D Employer identification number: 91-1360545
E Telephone number: 206-660-3085
F Group Exemption Number: _____

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

G Accounting method: Cash Accrual Other (specify) ▶ _____

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

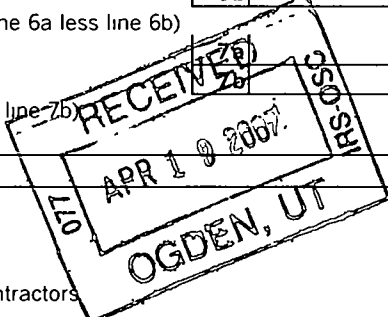
I Website: ▶ N/A

J Organization type (check only one) — 501(c) (4) (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 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 Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 85,235.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)			
1	Contributions, gifts, and similar amounts received	1	85,235.
2	Program service revenue including government fees and contracts	2	
3	Membership dues and assessments	3	
4	Investment income	4	
5a	Gross amount from sale of assets other than inventory	5a	
5b	Less cost or other basis and sales expenses	5b	
5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5c	
6	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>		
6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
6b	Less direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (line 6a less line 6b)	6c	
7a	Gross sales of inventory, less returns and allowances		
7b	Less cost of goods sold		
7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c	
8	Other revenue (describe ▶ _____)	8	
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	85,235.
10	Grants and similar amounts paid (attach schedule)	10	
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	1,638.
14	Occupancy, rent, utilities, and maintenance	14	1,200.
15	Printing, publications, postage, and shipping	15	13,228.
16	Other expenses (describe ▶ _____ See Statement 1)	16	69,164.
17	Total expenses (add lines 10 through 16)	17	85,230.
18	Excess or (deficit) for the year (line 9 less line 17)	18	5.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	8,088.
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year (combine lines 18 through 20)	21	8,093.



Part II Balance Sheets — If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ (See Instructions)		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	6,061.	5,499.
23	Land and buildings		
24	Other assets (describe ▶ See Statement 2)	2,027.	2,594.
25	Total assets	8,088.	8,093.
26	Total liabilities (describe ▶ _____)	0.	0.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	8,088.	8,093.

Part III Statement of Program Service Accomplishments (See the instructions.)		Expenses	
What is the organization's primary exempt purpose? <u>See Statement 3</u>		(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)	
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title			
28	<u>See Statement 4</u>		
	(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	69,779.
29			
	(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30			
	(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31	Other program services (attach schedule)		
	(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a)	32	69,779.

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See 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 and deferred compensation	(E) Expense account and other allowances
<u>See Statement 5</u>		0.	0.	0.

Part V Other Information (Note the statement requirement in the instructions)		See Statement 6	Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35	<i>If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T</i>			
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	35b	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If 'Yes,' attach a statement)	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0.	
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		X
b	If 'Yes,' attach the sch specified in the line 38 instructions and enter the amount involved	38b	N/A	
39	501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9	39a	N/A	
b	Gross receipts, included on line 9, for public use of club facilities	39b	N/A	

Part V Other Information (Note the statement requirement in the instructions) (Continued)

40 a 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 N/A, section 4912 N/A, section 4955 N/A

b 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach an explanation

Table with 3 columns: Question ID, Yes, No. Row 40b: Yes, No. Row 40c: Yes, No. Row 40e: Yes, No.

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.

d Enter amount of tax on line 40c reimbursed by the organization 0.

e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?

41 List the states with which a copy of this return is filed None

42 a The books are in care of Barbara Lindsay Telephone no 206 660-3085 Located at 32104 Beachview Ln, Westlake Village CA ZIP + 4 91361

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country

Table with 3 columns: Question ID, Yes, No. Row 42b: Yes, No. Row 42c: Yes, No.

See the instructions for exceptions and filing requirements for Form TD F 90-22.1.

c At any time during the calendar year, did the organization maintain an office outside of the U S ?

If 'Yes,' enter the name of the foreign country

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/A

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: Barbara M. Jindray, Director of ONU, Date: 04/04/2007. Signature of officer: David Jaques, President, Date: 4/10/07.

Paid Preparer's Use Only

Preparer's signature: Joseph K. Green II, CPA, Date: 3/25/07. Firm's name: Green & Jaspersen CPAs, address: 9600 Blue Larkspur Ln, Ste 101, Monterey, CA 93940. EIN: N/A, Phone no: (831) 649-1506.

One Nation United

91-1360545

Statement 1
Form 990-EZ, Part I, Line 16
Other Expenses

BANK CHARGES	\$ 660.
Conferences, Conventions, And Meetings	8,779.
CONTRACTED SERVICES	17,700.
DATA SERVICES	275.
Depreciation	1,155.
Interest	129.
LICENSES/FILING FEES	80.
LOBBYIST FEES	17,965.
MISCELLANEOUS	3,614.
SUBSCRIPTIONS & Press Clipping	308.
Supplies	4,782.
Telephone	1,572.
Travel	12,030.
Website Development	115.
Total	<u>\$ 69,164.</u>

Statement 2
Form 990-EZ, Part II, Line 24
Other Assets

	<u>Beginning</u>	<u>Ending</u>
Machinery and equipment	\$ 2,027.	\$ 2,594.
Total	<u>\$ 2,027.</u>	<u>\$ 2,594.</u>

Statement 3
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

Natural resource preservation, conservation, and property rights.

Statement 4
Form 990-EZ, Part III, Line 28
Statement of Program Service Accomplishments

<u>Description</u>	<u>Grants and Allocations</u>	<u>Program Service Expenses</u>
One Nation United prints newsletters with information on current Federal Indian policy and litigation, summarizing the impact on Natural resources preservation, conservation and private property rights. Includes Foreign Grants: No		36,983.
Assisting with legal cost of litigating certain court cases relating to the above mentioned issues. Includes Foreign Grants: No		32,796.
	<u>\$ 0.</u>	<u>\$ 69,779.</u>

One Nation United

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Statement 5
Form 990-EZ, Part IV
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
BARBARA LINDSAY 32104 Beachview Ln Westlake Village, CA 91361	Vice President 40	\$ 0.	\$ 0.	\$ 0.
Alan Montgomery 701 5th Ave., Suite 5500 Seattle, WA 98104-7096	Chairman Emerit 1	0.	0.	0.
David Jacques 800 Winston Section Road Winston, OR 97496	President 2	0.	0.	0.
Rich Porter 1404E 100N Road Paxton, IL 60957-4042	Director 1	0.	0.	0.
George Garland 8904 Warren Dr. NW Gig Harbor, WA 98335	Director 1	0.	0.	0.
Kim Halvorson 24 Priest Point Drive NE Marysville, WA 98270	Secretary/Treas 1	0.	0.	0.
Marilyn Sherry 226 SW 178th Street Normandy Park, WA 98166-3744	Director 1	0.	0.	0.
Cynthia "Cindy" Rasmussen P.O. Box 65167 Port Ludlow, WA 98365-0167	Director 1	0.	0.	0.
Marianne D. Pender N918 LaMotte Lake Drive Keshena, WI 54135-9500	Director 1	0.	0.	0.
David Vickers P.O. Box 3 Erieville, NY 13061	Director 1	0.	0.	0.
Former Congrmmn Jack Metcalf 4603 Saratoga Road Langley, WA 98260	Director 1	0.	0.	0.
Daniel M. Johnson P.O. Box 36 Nez Perce, ID 83543-0021	Director 1	0.	0.	0.

One Nation United

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Statement 5 (continued)
Form 990-EZ, Part IV
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
James Johnston, Ed. D 1842 Lolla Beach Lane Oak Harbor, WA 98277	Director 1	\$ 0.	\$ 0.	\$ 0.
Frank Messersmith 18 Gulf Breeze Drive Crawfordville, FL 32327-4650	Director 1	0.	0.	0.
	Total	\$ 0.	\$ 0.	\$ 0.

Statement 6
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts

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

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

One Nation United

91-1360545

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179/ Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductn.	Depr Basis	Prior Depr.	Method	Life	Rate	Current Depr.			
Form 990/990-PF																			
Machinery and Equipment																			
1	Minolta Printer	2/24/04		772							772	401	200DB	HY	5	19200	148		
2	HP Printer	6/25/04		1,054							1,054	548	200DB	HY	5	19200	202		
3	Computer Monitor	11/23/04		524							524	273	200DB	HY	5	19200	101		
4	Dell Printer 5100	3/22/05		878							878	176	200DB	HY	5	32000	281		
5	External Hard Drive	3/22/05		247							247	49	200DB	HY	5	32000	79		
6	Dell Optiplex GX620	4/13/06		727							727		200DB	HY	5	20000	145		
7	Dell Inspiron 1300 laptop	6/13/06		829							829		200DB	HY	5	20000	166		
8	HP Monitor	10/15/06		165							165		200DB	HY	5	20000	33		
Total Machinery and Equipment											5,196	0	0	0	0	5,196	1,447		1,155
Total Depreciation											5,196	0	0	0	0	5,196	1,447		1,155
Grand Total Depreciation											5,196	0	0	0	0	5,196	1,447		1,155