Form **990**

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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public Inspection

A F	or the	2006 ca	alendar yea	r, or tax year beginning	01-01-2006 and endi	ng 12-31-200	6		
ВС	heck ıf a	pplicable	Please	C Name of organization	tion			D Employe	er identification number
_	ddress ch	• •	use IRS	The Prem Rawat Foundat	HOH			91-216	6236
Γ_{N}	ame cha	nge	label or print or		O box if mail is not delivered	l to street addre	ss) Room/suite	E Telephoi	ne number
_	nitial retu		type. See Specific	PO Box 24-1498				(310)3	92-5700
	ınal retur		Instruc-	City or town, state or cou	ıntry, and ZIP + 4		'	F Accounting	g method Cash 🔽 Accrual
			tions.	Los Angeles, CA 90024				☐ Other	(specify)
_	mended						•		
Į A	pplicatior	n pending					H and Tare I	not annlicable	to section 527 organizations
					and 4947(a)(1) nonexem Schedule A (Form 990 or 9				n for affiliates? Yes V No
6 V	N ob sit		w torf ora				H(b) If "Yes	s" enter numb	er of affiliates 🟲
	ved sit	e: F ww	w tprf org				H(c) Are all	affiliates inclu	uded?
J C	Organiza	ation typ	e (check only	one) 🕨 🔽 🕏 501(c) (3)	◀ (insert no)	(1) or $\ \ \ \ \ \ \ \ $ 527	1	•	st See instructions)
K (Check he	re 🕨 🗀 ıf	f the organizat	tion is not a 509(a)(3) suppo	orting organization and its gre	oss receipts are		a separate re ed by a group	turn filed by an organization
n	omally i	not more			if the organization chooses to			, , ,	
	e suie to	Tille a coi	inpiete return						n Number ►
L	Gross re	eceipts	Add lines 6	5b, 8b, 9b, and 10b to l	ine 12 🕨 1,953,417		M Check attach	Sch B (Form	organization is not required to 990, 990-EZ, or 990-PF)
P	art I	Reve	nue, Exp	enses, and Chang	jes in Net Assets o	r Fund Bal	lances <i>(See</i>	the inst	tructions.)
	1	Contrib	outions, gift	s, grants, and sımılar aı	mounts received				
	а	Contrib	outions to d	onor advised funds .		1a			
	ь	Direct	public supp	ort (not included on line	e 1a)	1b	1,56	4,634	
	С	Indirec	t public sup	pport (not included on li	ne 1a)	1c			
	d	Govern	ıment contr	ıbutıons (grants) (not ır	ncluded on line 1a)	1d			
	e	Total (a	add lines 1a	a through 1d) (cash \$ $\frac{1}{}$,540,804 noncash	\$ 23,830)	16	1,564,634
	2	Prograi	m service re	evenue including gover	nment fees and contract	ts (from Part \	VII, line 93)	. 2	356,610
	3	Membe	rship dues	and assessments .				. 3	
	4	Interes	t on saving	s and temporary cash i	nvestments			. 4	
	5	Divider	nds and inte	erest from securities .				. 5	
	6a	Gross	rents			6a			
	b	Less r	ental exper	ises		6b			
	С	Net rer	ntal income	or (loss) subtract line 6	5b from line 6a			60	:
	7	Otherı	nvestment	ıncome (describe 🕨 📆)			. 7	32,173
Revenue	8a	Gross	amount fron	n sales of assets	(A) Securities		(B) O ther		
α		other th	han invento	ry		8a			
	b	Less cos	st or other bas	sis and sales expenses		8b			
	С	Gain or	(loss) (atta	ach schedule)		8c			
	d				nns (A) and (B)			. 80	1
	9	Specia	l events and	d activities (attach sch	edule) If any amount is	from gaming ,	, check here 🕨	·	
	а			t including \$	of				
	_			rted on line 1b)		9a			
	b			ses other than fundrais		9 b			
	C 105		•		Subtract line 9b from lir	1 1		. 90	:
	10a b			entory, less returns and Is sold		10a 10b			
	C		_		ch schedule) Subtract line 10t			10	<u>.</u>
	11	•	, ,	, ,				. 11	
	12				, 7, 8d, 9c, 10c, and 11				
	13				B))				
es (ii)	14				olumn (C))				
Expenses	15								
Ε×Ρ	16							16	· ·
	17				ımn (A)			17	
<u></u>	18				ine 17 from line 12 .				<u> </u>
A SSELS	19				of year (from line 73, co				
13 13	20			-	nces (attach explanation	, ,,		20	
Rel	21		_		ir Combine lines 18, 19	•		. 21	1,405,673
									_

Part II Statement of Functional Expenses

If "Yes," enter (i) the aggregate amount of these joint costs \$____

(iii) the amount allocated to Management and general \$

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 \$noncash \$) If this amount includes foreign grants, check here					
	· · · · · · · · · · · · · · · · · · ·	22a				
22b	Other grants and allocations (attach schedule)					
	(cash \$420,500 noncash \$) If this amount includes foreign grants, check here	22b	420,500	420,500		
23	Specific assistance to individuals (attach schedule)	23	420,300	420,300		
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 icluded 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				
27	Pension plan contributions not included on lines 25a, b and c	27				
28	Employee benefits not included on lines 25a - 27	28				
29	Payroll taxes	29				
30	Professional fundraising fees	30				
31	Accounting fees	31	31,233		31,233	
32	Legal fees	32	37,636		37,636	
33	Supplies	33	23,431		5,680	17,75
34	Telephone	34	2,102		2,102	
35	Postage and shipping	35	9,793		6,897	2,89
36	Occupancy	36				
37	Equipment rental and maintenance	37				
38	Printing and publications	38	3,277	3,277		
39	Travel	39				
40	Conferences, conventions, and meetings	40				
41	Interest	41				
42	Depreciation, depletion, etc (attach schedule)	42	45,793	45,793		
43	Other expenses not covered above (itemize)					
а	See Additional Data Table	43a				
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	2,108,126	1,823,652	250,546	33,92

, (ii) the amount allocated to Program services \$_

Form 990 (2006)

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 particula
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? The Prem Rawat Foundation is dedicated to promoting and disseminating the lectures, speeches, art, music, humanitarian efforts, and public forums of Prem Rawat, also known as Maharaji. The Foundation creates and publishes print, audio, video, and internet-based communications to present his message to a broad spectrum of audiences across cultures An important part of the Foundations mission is to help improve the quality of life for people most in need. The Foundation sponsors food support programs in India, provides relief to victims of disasters around the world, and assists other organizations that support charitable, social, or philanthropic programs and services consistent with Prem Rawat's message of peace

Program Service Expenses

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

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.)

a TPRF Humanitarian InitiativesIn 2006, TPRF opened Food for People, a food-aid facility in a tribal area in northeastern India, where 100,000 free hot meals are distributed each year to people in desperate need. The results have already been life changing many adults have been able to go back to work and more children are in school TPRF is considering opening three improved facilities before 2012 in other areas. Other projects include clean water programs in Ghana in sponsorship with the UNDP and the National Council of Women (TPRF was acknowledged for these grants at a UN presentation in New York), free eye clinics in India, and a 3 year grant to Oxfam Australia for a breakfast program to benefit children at schools in the poverty stricken area of Mornington Island Some of TPRF's recent efforts have helped provide millions of nutritious hot meals after natural disasters in Indonesia, Pakistan, Ivory Coast, Niger, Guatemala, the Philippines, Peru, and the U.S. Recently, the Foundation has also sponsored 10,000 free medical consultations and, in partnership with Oxfam, provided clean water to war victims in the Middle East TPRF Educational and Informational ProgramsThe creation, production and distribution of multi media products around the world have enable further dissemenation of the message of Prem Rawat In 2006, TPRF expanded its production of audio-visual, print, and web-based materials presenting the message of peace and the humanitarian initiatives of the Foundation. These included six DVDs of addresses at special events such as the UN in New York, the Australian Parliament House, the Herbst Theater in San Francisco for the UN's 60th anniversary TPRF also produced six audio CDs as well as a booklet and a video called Giving from the Heart presenting TPRF's humanitarian activies A new magazine called ADI was developed in 2006 which contains excerpts from Prem Rawat's addresses and a series of six bookets was produced to introduce his message, these materials will be released in 2007. The bi-weekly electronic newsletter INSPIRE was read by more thatn 100,000 people worldwide. Also in 2006 a one-hour interview for television was taped in Spain and edited into a DVD for distribution in 2007, that conveys a question and answer format with Prem Rawat on his work and message The activities of TPRF are funded by the generosity of individuals who are appreciative of Prem Rawats message and the Foundations humanitarian initiatives and by the sale of related materials All contributions, large or small, make a significant difference in peoples lives. More information on the Foundation's Programs are available at www.tprf.org

(Grants and allocations \$ 420,500)		If this amount includes foreign grants, check here 🕨 🄽	1,823,652
(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦳	
(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
Other program services (attach schedule) (Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
Total of Program Service Expenses (should ed	qual lii	ne 44, column (B), Program services) 🕨	1,823,652

Pa	art IV	Balance Sheets (See the instru	ctions	:.)			
Not	:e:	Where required, attached schedules and amo- column should be for end-of-year amounts or		thin the description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing			1,344,475	45	1,305,625
	46	Savings and temporary cash investments			25,267	46	
	47a	Accounts receivable 47a					
	b	Less allowance for doubtful accounts	47b			47c	
		Less anomalice for adaptial accounts	175			7,0	
	48a	Pledges receivable	48a				
	ь	Less allowance for doubtful accounts	48b			48c	
	49	Grants receivable	<u> </u>	·		49	
	50a	Receivables from current and former office key employees (attach schedule)				50a	
	ь	Receivables from other disqualified person 4958(c)(3)(B) (attach schedule)	•			50b	
	51a	Other notes and loans receivable (attach schedule)	51a	1			
B	ь	Less allowance for doubtful accounts	51b			51c	
Assets	52	Inventories for sale or use			153,648	52	73,828
ব	53	Prepaid expenses and deferred charges .				53	
	54a	Investments—publicly-traded securities		Cost FMV		54a	
	ь	Investments—other securities (attach sch	edule)	► Cost FMV		54b	
	55a	Investments—land, buildings, and equipment basis	55a	, ,			
	ь	Less accumulated depreciation (attach schedule)	55b			55c	
	56	Investments—other (attach schedule) .	<u> </u>			56	
	57a	Land, buildings, and equipment basis	57a	155,267			
	ь	Less accumulated depreciation (attach schedule)	57b	97,425	84,875	57c	57,842
	58	Other assets, including program-related in		ents	· · · ·		
		(describe ►		58			
	59	Total assets (must equal line 74) Add line	1,608,265	59	1,437,295		
	60	Accounts payable and accrued expenses		_	47,883	60	31,622
	61	Grants payable				61	
	62	Deferred revenue		ŀ		62	
	63	Loans from officers, directors, trustees, an	d key e	mployees (attach			
Ŷ		schedule)				63	
<u>;;</u>	64a	Tax-exempt bond liabilities (attach schedu	ule) .	[64a	
~'	b	Mortgages and other notes payable (attack	nsched	ule)		64b	
	65	Other liablilities (describe 🕨)				65	
	66	Total liabilities Add lines 60 through 65	47,883	66	31,622		
	Orga	nnizations that follow SFAS 117, check here					
		67 through 69 and lines 73 and 74					
8	67	Unrestricted			1,560,382	67	1,405,673
Balances	68	Temporarily restricted				68	
ö	69	Permanently restricted				69	
Fund	Orga	inizations that do not follow SFAS 117, chec complete lines 70 through 74	k here	► Tand			
5	70	Capital stock, trust principal, or current fu	nds .			70	
v)	71	Paid-in or capital surplus, or land, building	, and ed	ıμıpment fund		71	
Asset	72	Retained earnings, endowment, accumulate	ed inco	me, or other funds .		72	
Net A	73	Total net assets or fund balances Add line through 72 (Column (A) must equal line 19		<u> </u>	4 500 000		4 405 070
	74	Ine 21)		(C and 72	1,560,382		1,405,673

Part	IV-A	Reconciliation of Rev	venue per Audited Finar	icial Sta	tements V	Vith Reven	ue per	Return (See
<u></u>	Total		upport per audited financial stat	ements			а	1,953,417
b	A mou	nts included on line a but no	ot on Part I, line 12					
1	Netu	nrealized gains on investmei	nts	b1	1			
2	Donat	ed services and use of facili	ities	b2				
3	Recov	eries of prior year grants .		b3				
4	Other	(specify)						
		(//		b4				
	A dd Iı	nes b1 through b4					ь	
c	Subtra	act line b from line a					с	1,953,417
d	A mou	nts included on Part I, line 1	12, but not on line a					
1	Inves	tment expenses not include	d on Part I, line					
	6b .			d1				
2	Other	(specify)		١.,				
				d2				
							d	
е		revenue (Part I, line 12) Ac					e	1,953,417
Part			penses per Audited Fina	ncial St	atements '	With Expe		r Return
а			idited financial statements				a	2,138,126
ь		nts included on line a but no						· · · · · · · · · · · · · · · · · · ·
1			ıtıes	b1	1			
2		/ear adjustments reported o						
_				b2				
3	Losse	s reported on Part I, line						
				Ь3				
4	Other	(specify) 🕏						
				b4		30,000	_	
							ь	30,000
С							С	2,108,126
d		nts included on Part I, line 1	,					
1		tment expenses not include	d on Part I, line	d1				
-		(uı uı				
2	Other	(specify)		d2				
		nes d1 and d2		· <u>"-</u>			a	
e		expenses (Part I, line 17) A						2,108,126
•							e	2,100,120
Part		Current Officers, Dire	ectors, Trustees, and Ke employee at any time dur					
		,	(D) Tule and account to	(6) 6		(D) Contribi		(E) Expense
	(A)	Name and address	(B) Title and average hours per week devoted to position		mpensation id, enter -0)	employee bene deferred com		account and other allowances
						plan	5	allowalices
Brad (enue Suite 101	Director		0			
	er, CO		0		· ·			
	en Sord		Director/ V P					
	elchest	er Rd are, PA 19073	0		0			
	Pearse	19073						
	1otor Pa	rkway	Director/Secr		0			
Haupp	oauge, N	Y 11788	0					
Scott		.t M 1 1 4	Director/ Treas		0			
	Chestni Ielphia, F	IT M 1 1 4 PA 19134	0		0			
	H Pasco		5					
	ox 1968		Director/ Pres		0			
Zephy	r Cove,	NV 89448	-					
				<u>L</u>				

Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings		V A Comment Officers Diverter	- Turretone and Va	F	(nund)			T
Meatings Are any officers, directors, trustees, or key employees listed in Form 990, Part V -A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part I, a ro 11-5, related to each other through family or business Trives, "Tess," attach a statement that identifies the individuals and explains the relationship(s). Do any officers, directors, trustees, or key employees listed in Form 990, Part V -A, or highest compensated employees listed in Schedule A, Part II, or highest compensated professional and other independent contractors listed in Schedule A, Part II, or highest compensated professional and other independent contractors listed in Schedule A, Part II, or highest compensated of professional and other independent contractors listed in Schedule A, Part II, or highest compensated of the individual sand explains the relationship of the schedule A, Part II, or highest compensated of the individual sand explains the relationship of the schedule A, Part II, or highest compensated of the individual sand explains the relationship of the schedule A, Part II, or highest compensated of the individual sand explains the relationship of the schedule A, Part II, or highest compensated of the individual sand explains the relationship of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the schedule A, Part II, or highest compensated of the instructions of the schedule A, Part II, or highest compensated of the schedul				· · · · · · · · · · · · · · · · · · ·		Т	Yes	No
Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part 1, or highest compensated professional and other independent contractors listed in Schedule A, Part 11, or highest compensated professional and other independent contractors listed in Schedule A, Part 11, or highest compensated professional and explains the relationships? If "eas," attach a statement that identifies the individuals and explains the relationships of the semantic contractors listed in Schedule A, Part 11, or highest compensated professional and other independent contractors listed in Schedule A, Part 11, or highest compensated professional and other independent contractors listed in Schedule A, Part 11, or highest compensated professional and other independent contractors listed in Schedule A, Part 11, or highest compensated professional and other independent contractors listed in Schedule A, Part 11, or highest compensation from any other organizations, whether are exerved to related to the organization. **Total ** **Total **Total ** **Total *	1	Enter the total number of officers, director	rs, and trustees permitte	_	n business at board			
employees listed in Schedule A, Part I, or highest compensated professional and other imdependent contractors listed in Schedule A, Part II A or III-B, related to each other through family or business relationships (2). Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part II A or III-B, receive compensation from any other organizations, whether sax exempt or taxable, that are related to the organization 5-see the instructions for the definition of "related to the IT-Yes," attach a statement that includes the information described in the instructions between the statement that includes the information described in the instructions. If Yes, * attach a statement that includes the information described in the instructions. Formar Officers, Directors, Trustees, and Key Employees That Received Compensation or other benefits (If any former officer, director, trustee, and Key Employees That Received Compensation or other benefits (If any former officer, director, trustee, or key employee received compensation or other benefits in the appropriate column. See the instructions.) (A) Hame and address (B) Loans and Advances (C) Compensation (D) Contractions to what deference is plant to the compensation of each charge of the charges of each charge of each charge of each charge of each charge of the charges of each charge of the charges of each charge of each charge of the charges of each charge of each charge of each charge of each charge of the charges of each charge of the charges of each charge of each each each each each each each each		-		· —				
relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s). Do any officers, directors, trustees, or key employees listed in 799.0, Part V-A, or highest compensated employees listed in Schedule A, Part II-A or II-B, receive compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempts or taxable, that are related to the organization? See the instructions for the definition of "related organization". 1756 No organization have a written conflict of interest policy? 1758 Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits in the appropriate column. See the instructions.) (A) Name and address (B) Loans and Advances (C) Compensation (C) Compensation (D) Contributions to employee benefit plans in desired compensation or other benefits in the appropriate column. See the instructions.) (B) Loans and Advances (C) Compensation (D) Contributions to employee benefit plans in desired compensation or other benefits of the degranization of the instructions.) (C) Compensation (D) Contributions to employee benefit plans in desired compensation or other benefits of the degranization of the instructions.) (E) Expense accounts a detailed statement of each change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change (E) Expense accounts a detailed statement of each change (E) Expense accounts a detailed statement of each change (E) Expense accounts a detailed statement of each change (E) Expense accounts a detailed statement of each change (E) Expense accounts a detailed statement of each change (E) Expense accounts a detailed statement of each change (E) Expense accounts a detailed statement of each change (E) Expense accounts a detaile	•	Are any officers, directors, trustees, or ke	y employees listed in Fo	rm 990, Part V - A, or hi	ghest compensated			
relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) Do any officers, directors, trustees, or key employees listed in form 990, Part Y-A, or inghest compensated employees listed in Schedule A, Part I, or Injustic compensation and other independent contractors listed in Schedule A, Part II, or III-A or III-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related to the programation" The past the organization have a written conflict of interest policy? Total Vest Senetific (II any former officer, director, trustees, and Key Employees That Received Compensation or other benefits in the appropriate column. See the instructions: (A) Name and address (B) Loans and Advances (C) Compensation (See the Instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) (D) Contributions to employee benefits in the appropriate column. See the instructions.) Ves		employees listed in Schedule A, Part I, or	highest compensated pr	ofessional and other inc	lependent			
Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part II-A or II-B, receive compensation may other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization". 16 "Yes," attach a statement that includes the information described in the instructions. Does the organization have a written conflict of interest policy? 75d Yes 18 Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustees, and Key Employees received compensation or other benefits in the appropriate column. See the instructions.) (A) Name and address (B) Loans and Advances (B) Loans and Advances (C) Compensation (If not paid enter -0-) and detered compensation or other benefits in the appropriate column. See the instructions.) (b) Continuous binding and detered compensation or other benefits of the paid enter	contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business							
employees listed in Schedule A, Part II, or highest compensated professional and other independent contractors listed in Schedule A, Part III - A or II - B, receive compensation from any other organizations, whether tax exempt or trackable, that are related to the organization of the definition of "related organization" in the related of the organization of the definition of related organization. The prome officer related to the organization described in the instructions. Does the organization have a written conflict of interest policy? The promer officers, Directors, Trustees, and Key Employees That Received Compensation or other benefits (If any former officer, director, trustees, and Key Employee received compensation or other benefits in the appropriate column. See the instructions. (A) Name and address (B) Loans and Advances (C) Compensation (C) Compen		relationships? If "Yes," attach a statemer	it that identifies the indiv	iduals and explains the	relationship(s) .	75b		No
contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related programization". If "yes," attach a statement that includes the information described in the instructions. The Benefits (If any former officer, director, trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustees, or key employee received compensation or other benefits in the appropriate column. See the instructions.) (A) Name and address (B) Loans and Advances (C) Compensation (Do any officers, directors, trustees, or key	y employees listed in For	m 990, Part V-A, or hig	hest compensated			
tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization". 75d 75d		employees listed in Schedule A, Part I, or	highest compensated pr	ofessional and other inc	lependent			
tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization". 75d 75d		contractors listed in Schedule A, Part II-	A or II-B, receive compe	nsation from any other	organizations, whether			
organization						75c		l No
Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (acscribed below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.) (A) Name and address (B) Laans and Advances (C) Compensation (If not paid enter-0-) and deferred compensation or other plans and deferred compensation or other plans. (B) Laans and Advances (C) Compensation (If not paid enter-0-) and deferred compensation or other plans. (B) Laans and Advances (C) Compensation (If not paid enter-0-) and deferred compensation or other allowances of the plans. (B) Laans and Advances (C) Compensation (If not paid enter-0-) and deferred compensation or other allowances of the plans. (B) Laans and Advances (C) Compensation (If not paid enter-0-) and deferred compensation or other allowances of the plans. (B) Laans and Advances (C) Compensation (If not paid enter-0-) and deferred compensation or other allowances in the plans of the pla			=					
Benefits (If any former officer, director, trustee, or key employee screwed compensation or Other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions. (A) Name and address (B) Loans and Advances (B) Loans and Advances (B) Loans and Advances (C) Compensation (If not pad enter -0 -) (D) Compensation (D) Comp		If "Yes," attach a statement that includes	the information describe	d in the instructions				
Benefits (If any former officer, director, trustee, or key employee screwed compensation or Other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions. (A) Name and address (B) Loans and Advances (B) Loans and Advances (B) Loans and Advances (C) Compensation (If not pad enter -0 -) (D) Compensation (D) Comp	i	Does the organization have a written conf	lict of interest policy? .			75d	Yes	
Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.) (A) Name and address (B) Loans and Advances (B) Loans and Advances (C) Compensation (I'm tip ad enter -0-) employee benefit plans and defended compensation plans (C) Compensation (I'm tip ad enter -0-) employee benefit plans and defended compensation plans (B) Expense account a continuation of the reliable of th						satio	n or (Other
(If not paid enter -0-) and deferred compensation other allowances plans VI		(described below) during the	year, list that person	below and enter the ctions.)	(D) Contributions to	sation	or oth	er
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change		(A) Name and address	(B) Loans and Advances		and deferred compensation			
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change								
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change								
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Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change								
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	_							
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	_							
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change								
detailed statement of each change	ï	VI Other Information (See the	instructions.)	l			Yes	No
Were any changes made in the organizing or governing documents but not reported to the IRS?		Did the organization make a change in its activities	or methods of conducting acti	vities? If "Yes," attach a				
If "Yes," attach a conformed copy of the changes Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		detailed statement of each change				76		No
Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		Were any changes made in the organizing	or governing documents	but not reported to the	IRS?	77		Νο
Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?								
If "Yes," has it filed a tax return on Form 990-T for this year?				and the year covered by this	return?	782		N _O
Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement								-
a statement						700		1110
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?			ourotantial Contraction during	uic year ii Tes, allacii				
governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?						79		No
If "Yes," enter the name of the organization and check whether it is exempt or nonexempt Enter direct or indirect political expenditures (See line 81 instructions) 81a	3							
and check whether it is exempt or nonexempt Enter direct or indirect political expenditures (See line 81 instructions) 81a		governing bodies, trustees, officers, etc , to any ot	her exempt or nonexempt orga	anization?		80a		Νo
and check whether it is exempt or nonexempt Enter direct or indirect political expenditures (See line 81 instructions) 81a	b	If "Yes," enter the name of the organization	on 🕨					
Enter direct or indirect political expenditures (See line 81 instructions) 81a				IS Fexempt or Fno	onexempt			
		Enter direct or indirect political expenditu			· · · · · · · · · · · · · · · · · · ·			
Did the organization file Form 1120-POI for this year?		Did the organization file Form 1120-POL for				81b		l No

	AVI Other Information (continued)	I		T age 7
	t 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?	82a		No
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue			
	ın Part I or as an expense ın Part II(See ınstructions ın Part III) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Yes	
Ь	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Yes	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	84b		l No
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		No
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		No
Ī	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 the prior year			
_	Dues assessments, and similar amounts from members			
	Section 162(e) lobbying and political expenditures 85d			
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
		95.4		No.
_	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		No
h	If section $6033(e)(1)(A)$ dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?			
		85h		No
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 86a 0			
b	Gross receipts, included on line 12, for public use of club facilities 86b 0			
87	501(c)(12) orgs. Enter a Gross income from members or shareholders 87a 0			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88a		No
Ь	At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI	88b		No
202	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under	000		
034				
h	section 4911 ► , section 4912 ► , section 4955 ► 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during			
J	the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		No
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization			İ
	All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter			İ
	transaction?	89e		l No
£	All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?	69E		IN O
•	An organizations. Did the organization acquire direct of munect interest in any applicable insurance contract.			
		89f		No
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time			
	during the year?			
		89g		No
	List the states with which a copy of this return is filed F			
	Number of employees employed in the pay period that includes March 12, 2006 (See instructions)			0
91a	The books are in care of F Hebeler Accountancy Corporation Telephone no F (310)	820-0	100	
	1223 Wilshire Blvd 914			_
	Located at ► Santa Monica, CA ZIP + 4 ► 90403			
ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority	ı		
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	91b		No
	If "Yes," enter the name of the foreign country 🛌			İ
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts			

: At any time during the calendar yea	ir, did the organizati	on manicam a	an onice outside	or the officed	States. 3	1c	No
If "Yes," enter the name of the fore	· —						
Section 4947(a)(1) nonexempt charite	able trusts filing Forn	n 990 in lieu d	of Form 1041— C	heck here .			-
and enter the amount of tax-exemp					. 🕨 92		
TEVII Analysis of Income-P	_	•			. 512 512 514		
e: Enter gross amounts unless otherwi	se indicated.	(A)	business income	(C)	section 512, 513, or 514	(E Relate	
		Business code	(B) Amount	Exclusion code	(D) Amount	exempt inco	
Program service revenue							
a Special Events - Regist							258,5
b Sales Media Materials							98,1
c							
d							
e							
f Medicare/Medicaid payments .							
g Fees and contracts from governme	ent agencies						
Membership dues and assessmen	ts						
Interest on savings and temporary cash in	ivestments						
Dividends and interest from secur	ities						
Net rental income or (loss) from re	al estate						
a debt-financed property							
\boldsymbol{b} non debt-financed property							
Net rental income or (loss) from personal	property						
Other investment income							32,
Gain or (loss) from sales of assets other t	han inventory						
Net income or (loss) from special	events						
2 Gross profit or (loss) from sales of	finventory						
Other revenue a							
b							
c							
d							
e	_						
Subtotal (add columns (B), (D), an	d (E))						388,7
Total (add line 104, columns (B), (I	D), and (E))				•	3	388,7
e: Line 105 plus line 1e, Part I, should e	equal the amount on li	ne 12, Part I.					
Relationship of Acti							
of the organization's exempt pu	rposes (other than b	y providing f	unds for such pu	rposes)	·		
Speaking Events of Prem Rawat for various humanitarian initativ	· ·	olic who cont	rıbuted registrat	ion fees in su	pport of the event a	nd to raise	: fund
The sales of printed materials,a		a contribute	d importantly to	the accomplis	shment of the organ	ızatıon's e	
B a purpose by making available the	e speeches and writi	ngs of Prem	Rawat The book	s, magazine a			
and Audio CDs were sold to the	general public in fur	therance of t	he organization'	s purpose			
rt IX Information Regardir	a Tavabla Subs	idiarios a	nd Disrogar	dad Entitio	s (Soo the inst	ructions	,
(A)	(B)	ulailes a		ieu Entitie		(E	
Name, address, and EIN of corporation,	Percentage of		(C) Nature of activities	6	(D) Total income	End-of	-year
partnership, or disregarded entity	ownership interest)				asse	=15
	%						
	%						
	%						
Information Regardin instructions.)	ng Transfers As	sociated v	vith Persona	Benefit C	ontracts <i>(See ti</i>	ne	
Did the organization, during the year, recei	ue any funda directivi	unduractly to	ov promiume on a -	arconal basefut -	ontract?	Vec	₹ No
		manecuy, to Da	iy piciillullis Oli d D	cisonal belletil C	unitact		,

Part		nformation Regarding Trans controlling organization as defi			Entities Comp	lete only if the org	ganizati	on is	
							Yes	No	
106		e reporting organization make any t ode? if "Yes," complete the schedul			ed in section 512	2(b)(13) of		Νo	
		(A) Name and address of each controlled entity	Employer I	B) dentification mber	(C) Description of transfer		D) of transf	er	
		Totals							
							Yes	No	
107		e reporting organization receive any ode? if "Yes," complete the schedul			defined in sectior	512(b)(13) of		Νο	
	(A) Name and address of each controlled entity		Employer I	(B) Employer Identification Number			(D) Amount of transfe		
		Totals							
108	Dıd th	e organization have a binding writte	en contract in effe	ct on August 17, 200	6 covering the in	terests, rents,	Yes	No No	
	royalt	ies and annuities described in ques	tion 107 above?					140	
Pleas	an	der penalties of perjury, I declare that I had belief, it is true, correct, and complete De				of which preparer has ar			
Sign Here		Signature of officer			Date				
iicic	Linda Pascotto President Type or print name and title								
Paid	Preparer's			Date	Check if self-empolyed	Preparer's SSN or PTIN (See		Inst W)	
Prep Use Only	arer's	Firm's name (or yours if self-employed), address, and ZIP + 4	ncy Corporation		· ·	EIN ▶			
		1223 Wilshire Blvd Santa Monica, CA				Phone no 🕨 (310) 820	0-0100		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93490323002237

OMB No 1545-0047

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ 2006

Department of the Treasury Internal Revenue Service

990EZ)

SCHEDULE A (Form 990 or

Name of the organization

Employer identification number

The Prem Rawat Foundation			01 2166226		
Part I Compensation of the Five	Highest Daid Employees	Other Than Offi	91-2166236 er Than Officers, Directors, and Trustees		
	ns. List each one. If there ar			ilia irustees	
(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	
None					
	7				
	4				
	-				
Total number of other employees paid over					
\$50,000					
Part II-A Compensation of the	Five Highest Paid Indepe	ndent Contractor	rs for Profession	al Services	
	ictions. List each one (wheth	er ındıvıduals or fıı	rms). If there are n	ione, enter	
"None.")		20 427		(1)	
(a) Name and address of each independent of None	contractor paid more than \$50,00	JU (B) 1 y p	e of service	(c) Compensation	
Notice					
T. I. C. II.	20.6				
Total number of others receiving over \$50,00 professional services	JU for				
•	Five Highest Paid Indepe	ndent Contracto	rs for Other Serv	ices	
(List each contractor who	performed services other the	han professional se	ervices, whether in	dıvıduals or	
	enter "None". See page 2 fo				
(a) Name and address of each independent	contractor paid more than \$50,00	00 (b) Typ	e of service	(c) Compensation	
Elan Vital Inc					
PO Box 2220		Research & Dev	elop	443,000	
Agoura Hills, CA 91376					
Elena Trevino					
PO Box 1176		Graphic Design	Svcs	55,194	
Ventura, CA 93002					
A Cagen Skyline Drive		Writer		65,000	
Los Angeles, CA 90046		1			
Dunnite Productions Inc					
		Media Productio	n Svc	231,425	
41-B N Duesenberg Drive					
Thousand Oaks, CA 91362					
		1			

Total number of other contractors receiving over

\$50,000 for other services

Par	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, include 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			
	ı of Part VI-B)	1		Νo
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other			
	organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the			
	lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
	substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with			
	any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or			
	principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
а	Sale, exchange, or leasing property?	2a		Νo
Ь	Lending of money or other extension of credit?	2b		Νo
С	Furnishing of goods, services, or facilities?	2c		Νo
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		Νo
е	Transfer of any part of its income or assets?	2e		Νo
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)	3a		Νo
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		Νo
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement	3с		Νo
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		Νo
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a		No
Ь	Did the organization make any taxable distributions under section 4966?	4b		Νo
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		Νo
d	Enter the total number of donor advised funds owned at the end of the tax year			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
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			
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	art I	V	Reason fo	or Non-Pri	vate F	oundation Status	(See pages 4 th	rough 7 of the	instructions.)
cer	ify th	at the o	organization	ıs not a prıv	ate foun	dation because it is (P	lease check only C	NE applicable b	ox)	
5	Г	A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)								
6		Asch	ool Section	170(b)(1)(A	(II) (A	lso complete Part V)				
7	Γ	A hos	pital or a co	operative ho	spital se	ervice organization. Sec	tion 170(b)(1)(A)	(111)		
8	Γ	A fed	eral, state, d	or local gover	nment c	r governmental unit Se	ection 170(b)(1)(A)(v)		
9	Γ	A med	dical resear	ch organizati	on opera	ited in conjunction with	a hospital Section	170(b)(1)(A)(ı	п) Enter the ho	spital's name, city
		and st	tate 🕨							
10	\sqcap	Anor	ganızatıon o	perated for t	he benet	it of a college or univer	sity owned or opera	ated by a gover	nmental unit	
		Section	on 170(b)(1)(A)(ıv) (Als	o compl	ete the Support Schedu	le ın Part IV-A)			
11a	Γ	Anor	ganızatıon t	hat normally	receives	a substantial part of it	s support from a g	overnmental un	t or from the ge	neral public
		Section	on 170(b)(1)(A)(vı) (Als	o compl	ete the Support Schedu	le ın Part IV-A)			
11b	Γ	A con	nmunity trus	st Section 17	70(b)(1)	(A)(vı) (Also complete	the Support Sched	lule in Part IV - A	()	
12	~	Anor	ganızatıon t	hat normally	receives	(1) more than 33 _{1/3}	% of its support fro	m contributions	, membership fe	es, and gross
		receip	ts from act	ıvıtıes relate	d to its o	harıtable, etc , functıor	ns—subject to certa	aın exceptions,	and (2) no more	: than 331/3% of
		ıts su	pport from g	ıross ınvestn	nent inc	ome and unrelated busi	ness taxable ıncom	ne (less section	511 tax) from b	ousinesses
		acqui	red by the o	rganızatıon a	fter June	e 30, 1975 See sectio	n 509(a)(2) (Also	complete the S i	upport Schedule	ın Part IV-A)
13	Γ		-			by any disqualified pers eck the box that descr	•		•	se meets the
		Гту	pe I 📙	Type II	<mark>⊤</mark> Туре	III - Functionally Inte	grated \Box	ype III - Other	•	
			Provide t l	ne following i	informa	ion about the supporte	ed organizations. (s	ee page 7 of th	e instructions.)	
(a) Name(s) of supported organization(s)			(b) Employer identification number (c) Type of organization (described in lines 5 through 12 above or (d) Is the support organization supporting organi		oported isted in the ganization's	(e) A mount of support?				
				IRC section)	Yes	No				
Tota									<u> </u>	,
14	Г	Anor	ganızatıon o	rganızed and	operate	d to test for public safe	ty Section 509(a)	(4) (See page 7	7 of the instruct	ions)

Schedule A (Form 990 or 990-EZ) 2006	Page 4
Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.	method of accounting.
Total Total may use the Worksheet in the instructions for converting from the decreate to the cash method of decounting.	

Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 200)2	(e) Total
15	Gifts, grants, and contributions received (Do not	1,896,994	914,904	703,338	g	906,358	4,421,594
46	include unusual grants See line 28)	, ,	,	,			
16	Membership fees received					\longrightarrow	0
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of						
	facilities in any activity that is related to the	383,733	310,783	328,263	1	129,509	1,152,288
	organization's charitable, etc , purpose						
18							
	received from payments on securities loans						
	(section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section						0
	511 taxes) from businesses acquired by the						
	organization after June 30, 1975						
19	Net income from unrelated business activities						0
	not included in line 18						
20	Tax revenues levied for the organization's benefit						0
	and either paid to it or expended on its behalf						U
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						0
	facilities generally furnished to the public without						
	charge					\longrightarrow	
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	2,280,727	1,225,687	1,031,601	1.0	035,867	5,573,882
24	Line 23 minus line 17	1,896,994	914,904	703,338	•	906,358	4,421,594
25	Enter 1% of line 23	22,807	12,257	10,316		10,359	7,721,337
26		nter 2% of amount	,		26a	10,555	
	Prepare a list for your records to show the name of				200		
E							
	than a governmental unit or publicly supported org	•	-	-			
	2005 exceeded the amount shown in line 26a Do	not file this list w	ith your return. E	nter the total			
	of all these excess amounts			•	26b		
c	Total support for section 509(a)(1) test Enter line	e 24, column (e)		•	26c		0
d	Add Amounts from column (e) for lines 18		19				
	22		26b	— ▶	26d		
e	Public support (line 26c minus line 26d total)			—	26e		
f	Public support percentage (line 26e (numerator) d	livided by line 26c	(denominator))	▶	26f		
27	Organizations described on line 12: a For amou	ınts ıncluded ın lır	nes 15, 16, and 1	7 that were receiv	ed from a '	"dıs qua	alıfıed person,"
	prepare a list for your records to show the name of						
	Do not file this list with your return. Enter the sur	•		•	•	•	
	(2005) 713,288(2004)	305,712		200,900	(2002)		569,166
L	For any amount included in line 17 that was receiv		· · · ·	·	·	e a list	· · · · · · · · · · · · · · · · · · ·
	records to show the name of, and amount received						
	·						•
	or (2) \$5,000 (Include in the list organizations de		- ,		•		-
	return. After computing the difference between the		and the larger am	nount described in	1 (1) or (2)	, enter	tne sum or
	these differences (the excess amounts) for each y						
	(2005)(2004)		(2003)		(2002)		
c	Add Amounts from column (e) for lines 15	4,421,	594 16	0	_	_	
	171,152,288 20		<u> </u>	0	▶ 2	27c	5,573,882
d	Add Line 27a total 1,789,066	and line 27b tot	al		▶ 2	7d	1,789,066
e	Public support (line 27c total minus line 27d total)			▶ 2	7e	3,784,816
f	Total support for section 509(a)(2) test Enter am	ount from line 23,	column (e) 🕨	27f	5,573,882	i	
_	Public support percentage (line 27e (numerator) d			<u> </u>	27g	1	6790 00 %
_	Investment income percentage (line 18, column (e			denominator)) 🕨	27h		
28	Unusual Grants: For an organization described in li					throug	h 2005
20	onusual orants. For an organization described in it	116 10, 11, 01 12 1	nat received ally	unusuai yraiits üt	111119 Z U U Z	inoug	11 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 $\textbf{description of the nature of the grant} \ \ \textbf{\textbf{Do not file this list with your return.}} \ \ \textbf{Do not include these grants in line 15}$

Pa	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	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		
ŀ	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory			
	basis?	32b	i	İ
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
`	with student admissions, programs, and scholarships?	 32c		ĺ
	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
•	Gooples of an inaterial assa by the organization of on its behalf to some continuations	324	l	
	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	-		
ā	Students' rights or privileges?	33a		
ŀ	Admissions policies?	33b		
(Employment of faculty or administrative staff?	33c		
	Scholarships or other financial assistance?	33d		
•	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
ŀ	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		
ŀ	Has the organization's right to such aid ever been revoked or suspended?	34b		1
	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		l

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

Pa	rt VI-A	Lobbying Expenditu (To be completed ONL						structio	ns.)	
Che	ck ⊫ a 「	if the organization belong						"limited o	ontrol	" provisions apply
		Limits on Lo	bbying Expend	litures				(a) ed group	-	(b) To be completed
		(The term "expenditures	<u> </u>		<u> </u>		to	tals		for all electing organizations
		bying expenditures to influe	· ·		,	36			0	
37	Total lobi	bying expenditures to influe	nce a legislative bo	dy (direct lobby	ring)	37				
38	Total lobl	bying expenditures (add line	s 36 and 37)			38				
39	Otherex	empt purpose expenditures				39				
40	Total exe	mpt purpose expenditures (add lines 38 and 3	9)		40				
41	Lobbying	nontaxable amount Enter t	he amount from the	following table						
	If the am	nount on line 40 is—	The lobbying nont	axable amount	is—					
	Not over \$5	500,000	20% of the amount o	n line 40						
	Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of	f the excess over \$	500,000					
	Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of	f the excess over \$	1,000,000	41				
	Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1	,500,000					
	Over \$17,0	00,000	\$1,000,000							
42	Grassroo	ts nontaxable amount (ente	r 25% of line 41)			42				
43	Subtract	line 42 from line 36 Enter -	0- ıf lıne 42 ıs mor	e than line 36		43				
44	Subtract	line 41 from line 38 Enter -	·0- ıflıne 41 ıs mor	e than line 38		44				
	Caution:	If there is an amount on eithe	er line 43 or line 44,	you must file Fo	rm 4720.					
		4	I-Year Averagi	ng Period U	nder Section	501(h)			
		(Some organizations that	made a section 501	L(h) election do	not have to con	nplete a	ll of the fi		nns bel	ow
		See the	ınstructıons for lıne I	s 45 through 5	0 on page 13 of	the ins	tructions)		
				Lo	bbying Expendit	tures Di	ıring 4-Ye	ear Avera	iging P	eriod
		year (or		(a)	(b)		(c)		(d)	(e)
	fiscal ye	ar beginning in) 🕨		2006	2005		2004	21	003	Total
45	Lobbying	nontaxable amount								
46	Lobbying	ceiling amount (150% of l	ne 45(e))							
47	Total lob	bying expenditures								
48	Grassroo	ots nontaxable amount								
49	Grassroo	ots ceiling amount (150% o	fline 48(e))							
50	Grassro	ots lobbying expenditures								
Pa	rt VI-B	Lobbying Activity by	Nonelecting P	ublic Charit	ies	•		•		
		(For reporting only by						13 of th	<u>e ınstr</u>	ructions.)
		ır, dıd the organızatıon atter uence public opınıon on a le					ng any	Yes	No	A mount
	Volunte		g.S.acire matter of	. s. s. s. i a a i i , tili	Lag., the ase of			-		
Ь		ff or management (Include o	compensation in ex	nenses renorte	d on lines c thro	uah h .)				
c		dvertisements	.c.mpensation in ex	ponded reported	_ on mes cino	~g:: III)				
d		to members, legislators, or	the public						- 	
e										
 Publications, or published or broadcast statements Grants to other organizations for lobbying purposes 								-		
T	Giants t		obying purposes						,	
r g		ontact with legislators, their		t officials, or a l	egislative body				\dashv	

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

	e reporting organization	on directly or indirect	ly engage in any of the following w			sectio	n
) organizations) or in section 527		ons?		
		j organization to a noi	ncharitable exempt organization o	of		Yes	No
	Cash				51a(i)		Νo
	O ther assets				a(ii)		N o
-	transactions				!		
			arıtable exempt organızatıon		b(i)		Νo
	Purchases of assets		•		b(ii)		Νo
	Rental of facilities, ed		sets		b(iii)		Νο
	Reimbursement arran				b(iv)		Νο
	Loans or loan guarant				b(v)		Νo
			fundraising solicitations		b(vi)		Νo
			er assets, or paid employees		С		Νo
d If the	answer to any of the a	bove is "Yes," compl	ete the following schedule Colum	nn (b) should always show the fa	ıır marke	t valu	e of th
			orting organization If the organiz			ue in a	ny
		gement, snow in colu	mn (d) the value of the goods, oth	(d)			
(a) ine no	(b) A mount involved	Name of noncha	(c) iritable exempt organization	Description of transfers, tran arrangeme		s, and	sharır
descri		of the Code (other th	with, or related to, one or more to an section 501(c)(3)) or in secti	· · · · ·	Г	Yes	<u> </u>
	(a) Name of organiza	ation	(b) Type of organization	(c) Description of rela	ations hip)	

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TY 2006 Cash Grants Paid Schedule

Name: The Prem Rawat Foundation

EIN: 91-2166236

Software ID: 06000146

Class of Activity	Recipient's name	Address	Amount	Relationship
Humanıtarıan Aıd	Philippine National Red Cross	Bonifacio Drive Manila, Manila 2803 RP	25,000	
Humanıtarıan Aıd	Yayasan IDEP	J1 Hanoman 42 UBud Balı, Balı 80571 ID	30,000	
Humanitarian Intiative	Premsagar Foundation	6 East 3rd Cross Street Kilpauk, Chennai, Chennai 600010 IN	150,000	
Humanitarian Aid	OXFAM America	226 Causeway Street 5th Fl Boston, MA 02114	25,000	
Humanıtarıan Aıd	Friends of the World Food Prog	1819 L Street NW Washington, DC 20036	39,500	
Humanitarian Intiative	Oxfam Australia	156 George Street Fitzroy, Syd 3065 AS	15,000	
Hurricane Relief	IAP	Punta Yoguen 30 Cancun, Cancun 77509 MX	16,000	
Humanitarian Intiative	United Nations Development Pr	UN New York, NY 10017	100,000	

Class of Activity	Recipient's name	Address	Amount	Relationship
Humanitarian Intiative	National Council of Women USA	777 UN Plaza New York, Rome 00148 IT	20,000	

TY 2006 Land etc. Schedule

Name: The Prem Rawat Foundation

EIN: 91-2166236

Software ID: 06000146

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Machinery and Equipment	155,267	97,425	57,842

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TY 2006 Other Expenses Included Schedule

Name: The Prem Rawat Foundation

EIN: 91-2166236

Software ID: 06000146

Description	Amount
Deferred Contribution to Oxfam Australia	30,000

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TY 2006 Other Investment Income Schedule

Name: The Prem Rawat Foundation

EIN: 91-2166236

Software ID: 06000146

Description	Amount
Interest	32,173

TY 2006 Contractor Compensation Explanation

Name: The Prem Rawat Foundation

EIN: 91-2166236

Software ID: 06000146

Contractor	Explanation				
Elan Vıtal Inc	Research and Development services in cost share agreement for staffing				
Dunrite Productions Inc	Primary provider for event coverage, documentation, and post production work among multiple production companies in the world.				
Elena Trevino	Graphic design services for media publications				
A Cagen	Writer and creative development services				

Additional Data

Software ID: 06000146

Software Version: 2006v3.1

EIN: 91-2166236

Name: The Prem Rawat Foundation

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

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
a Venue fees and related expense	43a	59,514	59,514		
b Travel Reimburs Production	43b	1,530	1,530		
c Travel and Lodging	43c	525		525	
d Storage Rent	43d	2,299	2,299		
e Public Relations & Advertising	43e	43,187	43,187		
f Outside Consulting Services	43f	3,520		3,520	
g Outside Admin Services	43g	23,790		23,790	
h Merchant Acct (CCs) Bank Fees	43h	48,859		44,584	4,275
i Meals & Entertainment	43i	442		442	
j Materials Production	43j	474,677	474,677		
k Materials Marketing	43k	1,724	1,724		
I Materials Development	431	646,236	646,236		
m Marketing Consulting and Mgmt	43m	30,655		30,655	
n License & Permits	43n	179		179	
o Internet Hosting Services	43o	52,211	46,099		6,112
p Insurance	43p	6,056		6,056	
q Independent Audit Fees	43q	28,567		28,567	
r Freight & Shipping	43r	6,357	6,357		
s Dues & Subscriptions	43s	280		280	
t Distribution and Duplication	43t	77,369	72,459	4,910	
u Conferences and Training	43u	1,390		1,390	
v Computer Supplies	43v	2,894			2,894
w Charity Administration	43w	22,100		22,100	