

# 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)

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 2005 calendar year, or tax year beginning** 10/01, **2005, and ending** 09/30/2006

<p><b>B</b> Check if applicable:</p> <p><input type="checkbox"/> Address change</p> <p><input type="checkbox"/> Name change</p> <p><input type="checkbox"/> Initial return</p> <p><input type="checkbox"/> Final return</p> <p><input type="checkbox"/> Amended return</p> <p><input type="checkbox"/> Application pending</p>	<p>Please use IRS label or print or type. See Specific Instructions.</p>	<p><b>C Name of organization</b> <b>THE COPYRIGHT SOCIETY OF THE USA</b></p> <p>Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>352 7TH AVENUE, SUITE 739</b></p> <p>City or town, state or country, and ZIP + 4 <b>NEW YORK, NY 10001-5012</b></p>	<p><b>D Employer identification number</b> <b>13-6159787</b></p> <p><b>E Telephone number</b> <b>(212) 354-6401</b></p>
		<p><b>F Accounting method:</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶</p>	

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

H and I are not applicable to section 527 organizations.

**G Website:** ▶ N/A

**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 chooses to file a return, be sure to file a complete return. **Some states require a complete return.**

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates ▶

**H(c)** Are all affiliates included? (If "No," attach a list. See instructions.)  Yes  No

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Group Exemption Number ▶

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **462,678.**

**Part I Revenue, Expenses, and Changes In Net Assets or Fund Balances (See the instructions.)**

	<p><b>1</b> Contributions, gifts, grants, and similar amounts received:</p> <p><b>a</b> Direct public support . . . . . <b>1a</b></p> <p><b>b</b> Indirect public support . . . . . <b>1b</b></p> <p><b>c</b> Government contributions (grants) . . . . . <b>1c</b></p> <p><b>d</b> Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____) <b>1d</b></p> <p><b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93) . . . . . <b>2</b> 3,467.</p> <p><b>3</b> Membership dues and assessments . . . . . <b>3</b> 219,569.</p> <p><b>4</b> Interest on savings and temporary cash investments . . . . . <b>4</b> 3,675.</p> <p><b>5</b> Dividends and interest from securities . . . . . <b>5</b> 1,955.</p> <p><b>6 a</b> Gross rents . . . . . <b>6a</b></p> <p><b>b</b> Less: rental expenses . . . . . <b>6b</b></p> <p><b>c</b> Net rental income or (loss) (subtract line 6b from line 6a) . . . . . <b>6c</b></p> <p><b>7</b> Other investment income (describe ▶ ) <b>7</b></p> <p><b>8 a</b> Gross amount from sales of assets other than inventory . . . . . (A) Securities (B) Other <b>8a</b> 6,820.</p> <p><b>b</b> Less: cost or other basis and sales expenses . . . . . <b>8b</b></p> <p><b>c</b> Gain or (loss) (attach schedule) . . . . . <b>8c</b> 6,820.</p> <p><b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B)) . . . . . <b>8d</b> 6,820.</p> <p><b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/></p> <p><b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a) . . . . . \$TMT. 1. <b>9a</b></p> <p><b>b</b> Less: direct expenses other than fundraising expenses . . . . . <b>9b</b></p> <p><b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a) . . . . . <b>9c</b> 56,360.</p> <p><b>10 a</b> Gross sales of inventory, less returns and allowances . . . . . <b>10a</b></p> <p><b>b</b> Less: cost of goods sold . . . . . <b>10b</b></p> <p><b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) . . . . . <b>10c</b></p> <p><b>11</b> Other revenue (from Part VII, line 103) . . . . . <b>11</b> 170,832.</p> <p><b>12</b> <b>Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) . . . . . <b>12</b> 462,678.</p>	
Revenue		
Expenses	<p><b>13</b> Program services (from line 44, column (B)) . . . . . <b>13</b> 260,300.</p> <p><b>14</b> Management and general (from line 44, column (C)) . . . . . <b>14</b> 147,454.</p> <p><b>15</b> Fundraising (from line 44, column (D)) . . . . . <b>15</b> 38,500.</p> <p><b>16</b> Payments to affiliates (attach schedule) . . . . . <b>16</b></p> <p><b>17</b> <b>Total expenses</b> (add lines 16 and 44, column (A)) . . . . . <b>17</b> 446,254.</p>	
Net Assets	<p><b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12) . . . . . <b>18</b> 16,424.</p> <p><b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A)) . . . . . <b>19</b> 86,308.</p> <p><b>20</b> Other changes in net assets or fund balances (attach explanation) . . . . . \$TMT. 2. <b>20</b> -5,189.</p> <p><b>21</b> <b>Net assets or fund balances at end of year</b> (combine lines 18, 19, and 20) . . . . . <b>21</b> 97,543.</p>	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6a, 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 \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	NONE			
26	Other salaries and wages	76,760.		76,760.	
27	Pension plan contributions	NONE			
28	Other employee benefits	4,205.		4,205.	
29	Payroll taxes	6,180.		6,180.	
30	Professional fundraising fees				
31	Accounting fees	11,578.		11,578.	
32	Legal fees				
33	Supplies	3,040.	1,622.	1,418.	
34	Telephone	1,041.	563.	478.	
35	Postage and shipping	5,098.	2,825.	2,273.	
36	Occupancy	24,777.	12,389.	12,388.	
37	Equipment rental and maintenance	9,134.	8,275.	859.	
38	Printing and publications	3,481.	3,481.		
39	Travel				
40	Conferences, conventions, and meetings	83,261.	83,261.		
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	327.		327.	
43	Other expenses not covered above (itemize):				
a	STMT 3	217,372.	147,884.	30,988.	38,500.
b					
c					
d					
e					
f					
g					
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	446,254.	260,300.	147,454.	38,500.

Joint Costs. Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_;  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

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

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? <b>▶SEE STATEMENT 4</b> 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.)	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
<b>a</b> <u>COST OF MAILING, PRINTING AND EDITING OF THE COPYRIGHT</u> <u>LAW JOURNAL</u> ----- ----- ----- ----- ----- (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/>	8,380.
<b>b</b> <u>THE COST OF MEETINGS WHICH EDUCATES KEY PEOPLE COPYRIGHT</u> <u>LAWS AND RIGHTS IN VARIOUS FORMS OF INTELLECTUAL PROPERTY.</u> ----- ----- ----- ----- ----- (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/>	249,420.
<b>c</b> <u>DESIGN AND MAINTENANCE OF WEBSITE TO FACILITATE MEMBERS</u> <u>ACCESS TO COPYRIGHT, MEETING, AND MEMBERSHIP INFORMATION.</u> ----- ----- ----- ----- ----- (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/>	2,500.
<b>d</b> ----- ----- ----- ----- ----- (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . . ▶	260,300.

**Part IV Balance Sheets (See the instructions.)**

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash - non-interest-bearing . . . . .	85,238.	45	89,606.	
	46 Savings and temporary cash investments . . . . .	31,526.	46	6,092.	
	47a Accounts receivable . . . . .	1,655.			
	b Less: allowance for doubtful accounts . . . . .		47c	1,655.	
	48a Pledges receivable . . . . .				
	b Less: allowance for doubtful accounts . . . . .		48c		
	49 Grants receivable . . . . .		49		
	50 Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .		50		
	51a Other notes and loans receivable (attach schedule) . . . . .				
	b Less: allowance for doubtful accounts . . . . .		51c		
	52 Inventories for sale or use . . . . .		52		
	53 Prepaid expenses and deferred charges . . . . .	NONE	53	NONE	
	54 Investments - securities (attach schedule) . . . . .	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	126,627.	54	85,632.
	55a Investments - land, buildings, and equipment: basis . . . . .				
	b Less: accumulated depreciation (attach schedule) . . . . .				
	56 Investments - other (attach schedule) . . . . .				
	57a Land, buildings, and equipment: basis . . . . .	1,637.			
	b Less: accumulated depreciation (attach schedule) . . . . .	818.			
	58 Other assets (describe ► <u>STMT 5</u> ) . . . . .	17,343.	58	17,610.	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58. . . . .	263,585.	59	201,414.		
Liabilities	60 Accounts payable and accrued expenses . . . . .	13,248.	60	8,616.	
	61 Grants payable . . . . .		61		
	62 Deferred revenue . . . . .	149,886.	62	80,845.	
	63 Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		63		
	64a Tax-exempt bond liabilities (attach schedule) . . . . .		64a		
	b Mortgages and other notes payable (attach schedule) . . . . .		64b		
	65 Other liabilities (describe ► _____) . . . . .	14,143.	65	14,410.	
66 <b>Total liabilities.</b> Add lines 60 through 65 . . . . .	177,277.	66	103,871.		
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>				
	67 Unrestricted . . . . .	86,308.	67	97,543.	
	68 Temporarily restricted . . . . .		68		
	69 Permanently restricted . . . . .		69		
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>				
	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 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) . . . . .	86,308.	73	97,543.		
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73. . . . .	263,585.	74	201,414.		

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)**

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>a</b>	457,489.
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12:			
<b>1</b>	Net unrealized gains on investments . . . . .	<b>b1</b>		
<b>2</b>	Donated services and use of facilities . . . . .	<b>b2</b>		
<b>3</b>	Recoveries of prior year grants . . . . .	<b>b3</b>		
<b>4</b>	Other (specify): <u>SEE STATEMENT 6</u>	<b>b4</b>	-5,189.	
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	-5,189.	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	462,678.	
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b> :			
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>		
<b>2</b>	Other (specify): _____	<b>d2</b>		
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>		
<b>e</b>	<b>Total revenue (Part I, line 12). Add lines <b>c</b> and <b>d</b>.</b> ▶	<b>e</b>	462,678.	

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements . . . . .		<b>a</b>	446,254.
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17:			
<b>1</b>	Donated services and use of facilities . . . . .	<b>b1</b>		
<b>2</b>	Prior year adjustments reported on Part I, line 20 . . . . .	<b>b2</b>		
<b>3</b>	Losses reported on Part I, line 20 . . . . .	<b>b3</b>	5,189.	
<b>4</b>	Other (specify): _____	<b>b4</b>		
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	5,189.	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	441,065.	
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :			
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>		
<b>2</b>	Other (specify): <u>SEE STATEMENT 7</u>	<b>d2</b>	5,189.	
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	5,189.	
<b>e</b>	<b>Total expenses (Part I, line 17). Add lines <b>c</b> and <b>d</b>.</b> ▶	<b>e</b>	446,254.	

**Part V Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See 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 plans	(E) Expense account and other allowances
SEE STATEMENT 8		NONE	NONE	NONE

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 20
75b 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 II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)
75c Do 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 II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations.
75d Does the organization have a written conflict of interest policy?

Part V-B 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 (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.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. The first row shows dashes in column A and -0- in columns B, C, D, and E.

Part VI Other Information (See the instructions.)

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
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.
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
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
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?
80b If "Yes," enter the name of the organization and check whether it is exempt or nonexempt
81a Enter direct and indirect political expenditures. (See line 81 instructions.)
81b Did the organization file Form 1120-POL for this year?

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
82 b			N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83 b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
84 b			N/A
85 a	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		N/A
85 c	Dues, assessments, and similar amounts from members		N/A
85 d	Section 162(e) lobbying and political expenditures		N/A
85 e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		N/A
85 f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		N/A
85 g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A
85 h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		N/A
86 a	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		N/A
86 b	Gross receipts, included on line 12, for public use of club facilities		N/A
87 a	501(c)(12) orgs. Enter: a Gross income from members or shareholders		N/A
87 b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		N/A
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.		X
89 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
89 b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		N/A
90 a	List the states with which a copy of this return is filed		NONE
90 b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)		2
91 a	The books are in care of		THE COPYRIGHT SOCIETY OF USA
	Located at		352 SEVENTH AVE., NEW YORK, NY
	Telephone no.		(212) 354-6401
	ZIP + 4		10001
91 b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
	If "Yes," enter the name of the foreign country		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
91 c	At any time during the calendar year, did the organization maintain an office outside of the United States?		X
	If "Yes," enter the name of the foreign country		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year		92

**Part VII Analysis of Income-Producing Activities (See the instructions.)**

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a ROYALTY INCOME					3,467.
b					
c					
d					
e					
f Medicare/Medicaid payments . . . . .					
g Fees and contracts from government agencies . . . . .					
94 Membership dues and assessments . . . . .					219,569.
95 Interest on savings and temporary cash investments . . . . .			14	1,955.	
96 Dividends and interest from securities . . . . .			14	3,675.	
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 . . . . .			18	6,820.	
101 Net income or (loss) from special events . . . . .					56,360.
102 Gross profit or (loss) from sales of inventory . . . . .					
103 Other revenue: a					
b MEETING INCOME					170,832.
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E)) . . . . .				12,450.	450,228.
105 Total (add line 104, columns (B), (D), and (E)) . . . . .					462,678.

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 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).
1	STMT 14

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)**

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

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**

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

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

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

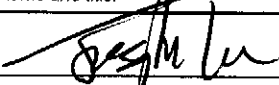
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Please Sign Here**

Signature of officer: \_\_\_\_\_ Date: \_\_\_\_\_

Type or print name and title: \_\_\_\_\_

**Paid Preparer's Use Only**

Preparer's signature:  Date: APR 23 2007 Check if self-employed:  Preparer's SSN or PTIN (See Gen. Inst. W): P00232254

Firm's name (or yours if self-employed), address, and ZIP + 4: PKF CPA'S PC, 29 BROADWAY, NEW YORK, NY 10006-3201 EIN: 13-3643244 Phone no.: 212-867-8000



# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ 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.**

**Part I 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 8736 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](http://www.irs.gov/efile).

<b>Type or print</b>	Name of Exempt Organization <b>THE COPYRIGHT SOCIETY OF THE USA</b>	Employer identification number <b>17-7307017</b>
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. <b>352 7TH AVENUE, SUITE 739</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>NEW YORK, NY 10001-5012</b>	

**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 8870 |

• The books are in the care of ▶ TAXPAYER

Telephone No. ▶ \_\_\_\_\_ FAX No. ▶ \_\_\_\_\_

- 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) \_\_\_\_\_ . 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 05/15, 2007, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning 10/01, 2005, and ending 09/30, 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. \$ \_\_\_\_\_

**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. \$ \_\_\_\_\_

**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. \$ \_\_\_\_\_

**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.

**For Privacy Act and Paperwork Reduction Act Notice, see Instructions.**

Form **8868** (Rev. 12-2004)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

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

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

OMB No. 1545-0047

**2005**

Name of the organization

THE COPYRIGHT SOCIETY OF THE USA

Employer identification number

13-6159787

**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
SEE STATEMENT 15				
Total number of other employees paid over \$50,000 . . . ▶		NONE		

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

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

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

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

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

Schedule A (Form 990 or 990-EZ) 2005

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) . . . . .		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property? . . . . .		X
b Lending of money or other extension of credit? . . . . .		X
c Furnishing of goods, services, or facilities? . . . . .		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . .		X
e Transfer of any part of its income or assets? . . . . .		X
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.) . . . . .		X
b Do you have a section 403(b) annuity plan for your employees? . . . . .		X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? . . . . .		X
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? . . . . .		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services? . . . . .		X

**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)(iii).
- 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 12  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and 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). Check the box that describes the type of supporting organization:  Type 1  Type 2  Type 3

Provide the following information about the supported organizations. (See page 6 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 6 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.

Table with columns for years (a) 2004, (b) 2003, (c) 2002, (d) 2001, and (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions; 18 Gross income from interest, dividends; 19 Net income from unrelated business activities; 20 Tax revenues levied; 21 Value of services or facilities furnished; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12.

**Part V Private School Questionnaire** (See page 7 of the instructions.) NOT APPLICABLE  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		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.)		
34 a	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) NOT APPLICABLE

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

(The term "expenditures" means amounts paid or incurred.)

Table with columns for line numbers (36-44), descriptions of lobbying expenditures, and columns (a) Affiliated group totals and (b) To be completed for ALL electing organizations.

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.)

Lobbying Expenditures During 4-Year Averaging Period

Table with columns for Calendar year (or fiscal year beginning in) and sub-columns (a) 2005, (b) 2004, (c) 2003, (d) 2002, and (e) Total. Rows include Lobbying nontaxable amount, Lobbying ceiling amount, Total lobbying expenditures, Grassroots nontaxable amount, Grassroots ceiling amount, and Grassroots lobbying expenditures.

Part VI-B Lobbying Activity by Nonelecting Public Charities

NOT APPLICABLE

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

Table with columns for Yes, No, and Amount. Rows list various lobbying activities: a Volunteers, b Paid staff or management, c Media advertisements, d Mailings to members, e Publications, f Grants to other organizations, g Direct contact with legislators, h Rallies/demonstrations, and i Total lobbying expenditures.

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



FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	NET INCOME
COPYRIGHT AWARENESS WEEK	56,360.
TOTALS	56,360.



FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED LOSS ON INVESTMENT

5,189.

TOTAL

5,189.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
OFFICE EXPENSE	1,044.	217.	827.	
INSURANCE	6,423.	2,402.	4,021.	
PENALTIES	14,988.		14,988.	
BANK FEES	531.	531.		
WEB DESIGN	2,500.	2,500.		
PAYROLL PROCESSING FEES	2,177.		2,177.	
COPYRIGHT AWARENESS WEEK	38,500.			38,500.
CREDIT CARD FEES	4,217.	4,217.		
SETON AWARD	1,300.	1,300.		
JOURNAL EXPENSE	30,400.	30,400.		
LUNCHEONS	64,513.	64,513.		
JOURNAL EDITORIAL SERVICES	40,000.	40,000.		
INVESTMENT EXPENSES	1,304.	1,304.		
AUDIT FEES	8,975.		8,975.	
GIFTS	500.	500.		
TOTALS	217,372.	147,884.	30,988.	38,500.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE  
=====

THE COPYRIGHT SOCIETY OF THE USA (CSUSA) IS DEDICATED TO ADVANCING THE STUDY OF COPYRIGHT LAW AND RELATED RIGHTS IN LITERATURE, MUSIC, ART, THEATER, MOTION PICTURES, TELEVISION, COMPUTER SOFTWARE, ARCHITECTURE, AND OTHER WORKS OF AUTHORSHIP, DISTRIBUTED VIA BOTH TRADITIONAL AND NEW MEDIA.

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
RENT DEPOSIT	3,200.
DUE FR KAMINSTEIN MEMORIAL FD	156.
DUE FR CHARLES B SETON AWARD	1,232.
DUE FR DONALD C BRACE MEMORIAL	13,022.
	-----
TOTALS	17,610.
	=====

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN

DESCRIPTION

AMOUNT

UNREALIZED LOSS ON INVESTMENT

-5,189.

TOTAL

-5,189.

FORM 990, PART IV-B - OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

DESCRIPTION

AMOUNT

UNREALIZED LOSS INCLUDED ON  
LINE 20, FORM 990

5,189.

TOTAL

5,189.

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
BARRY SLOTNICK LOEB & LOEB 345 PARK AVENUE NEW YORK, NY 10154	PRESIDENT	NONE	NONE	NONE
HELENE BLUE HELENE BLUE MUSIQUE 421 SEVENTH AVENUE, SUITE 907 NEW YORK, NY 10001	VICE PRESIDENT	NONE	NONE	NONE
GLORIA PHARES PATTERSON BELKNAP WEBB & TAYLOR 1133 AVE. OF THE AMERICAS NEW YORK, NY 10036	TREASURER	NONE	NONE	NONE
COREY FIELD BALLARD SPAHR ANDREWS & INGERSOLL, 1735 MARKET ST. 51ST FL PHILADELPHIA, PA 19103	ASSISTANT TREASURER	NONE	NONE	NONE
JAY KOGAN DC COMICS 1700 BROADWAY NEW YORK, NY 10019	SECRETARY	NONE	NONE	NONE
DONNA DEGRANDI TIME WARNER INC. ONE TIME WARNER CENTER, 14TH FLOOR NEW YORK, NY 10019	ASSISTANT SECRETARY	NONE	NONE	NONE
JONATHAN BAND		NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JONATHAN BAND PLLC 21 DUPONT CIRCLE NW, 8TH FLOOR WASHINGTON, DC 20036	TRUSTEE	NONE	NONE	NONE
TERRENCE DIXON DECHERT 4000 BELL ATLANTIC TOWER 1717 ARCH STREET PHILADELPHIA, PA 19103	TRUSTEE	NONE	NONE	NONE
CATHY FRANKEL MOSES & SINGER 1301 AVENUE OF THE AMERICAS NEW YORK, NY 10019	TRUSTEE	NONE	NONE	NONE
BEVERLY A BERNEMAN BENHAMIN, BERNEMAN & BROM, LLC 216 WEST JACKSON SUITE 330 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
JAMIE B. BISCHOFF BALLARD SPAHR ANDREWS & INGERSOLL 1735 MARKET STREET, 51ST FL. PHILADELPHIA, PA 19103	TRUSTEE	NONE	NONE	NONE
MARCI HAMILTON 36 TIMBER KNOLL DR. WASHINGTON CROSSING WASHINGTON CROSSING, PA 18977	TRUSTEE	NONE	NONE	NONE
ANDREW P. BRIDGES		NONE	NONE	NONE



FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
WINSTON & STRAWN LLP 101 CALIFORNIA STREET SUITE 3900 SAN FRANCISCO, CA 94111	TRUSTEE	NONE	NONE	NONE
HUGH HANSEN FORDHAM LAW SCHOOL 140 W. 62ND STREET NEW YORK, NY 10023	TRUSTEE	NONE	NONE	NONE
JOHN DALANEY MORRISON & FOERSTER LLP 1290 AVENUE OF THE AMERICAS NEW YORK, NY 10104	TRUSTEE	NONE	NONE	NONE
JANET A. KOBRIN WARNER BROS. 4000 WARNER BLVD., BLDG. 156 NORTH BURBANK, CA 91522	TRUSTEE	NONE	NONE	NONE
JESSICA D. LITMAN 922 OLIVIA AVENUE ANN ARBOR, MI 48104	TRUSTEE	NONE	NONE	NONE
STEFAN MENTZER WHITE & CASE LLP 1155 AVENUE OF THE AMERICAS NEW YORK, NY 10036	TRUSTEE	NONE	NONE	NONE
PETER JASZI 5402 SURREY STREET CHEVY CHASE, MD 20815	TRUSTEE	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
STANLEY PIERRE-LOUIS 1752 PARK ROAD, NW UNIT A WASHINGTON, DC 20010	TRUSTEE	NONE	NONE	NONE
THOMAS KJELLBERG COWAN LIEBOWITZ & LATMAN 1133 AVENUE OF THE AMERICAS NEW YORK, NY 10036	TRUSTEE	NONE	NONE	NONE
DAVID NIMMER IRELL & MANELLA 1800 AVENUE OF THE STARS SUITE 900 LOS ANGELES, CA 90067	TRUSTEE	NONE	NONE	NONE
DAVID LESTER MECHANICAL-COPYRIGHT PROTECTION SOC & PERFORMING RIGHTS SOCIETY 119 SHEPHERDESS WALK LONDON, UNITED KINGDOM, N1 7QA	TRUSTEE	NONE	NONE	NONE
MARYBETH PETERS U.S. COPYRIGHT OFFICE 101 INDEPENDENCE AVE. WASHINGTON, DC	TRUSTEE	NONE	NONE	NONE
THOMAS LEVY 415 MADISON AVENUE, 22ND FLOOR NEW YORK, NY 10017	TRUSTEE	NONE	NONE	NONE
MARY RASENBERGER		NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
NEW YORK, NY 10010				
CYDNEY TUNE PILLSBURY WINTHROP LLP 50 FREMONT STREET SAN FRANCISCO, CA 94105	TRUSTEE	NONE	NONE	NONE
JONATHAN ZAVIN LOEB & LOEB 345 PARK AVENUE NEW YORK, NY 10154	TRUSTEE	NONE	NONE	NONE
ANGELA WASHHELESKY SACHNOFF & WEAVER, LTD. 30 SOUTH WACKER DRIVE, STE 2900 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
DIANE ZIMMERMAN NEW YORK UNIVERSITY SCHOOL OF LAW 40 WASHINGTON SQUARE SOUTH NEW YORK, NY 10012	TRUSTEE	NONE	NONE	NONE

GRAND TOTALS

NONE

NONE

NONE

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
-------------	--

93E 94E 95D 96D 100D 101E 103E	FUNDS CONTRIBUTED TO PUBLICATION OF LAW JOURNAL USED TO ADVANCE THE STUDY OF COPYRIGHT LAW. EACH MEMBER RECEIVES A COPY OF THE JOURNAL. DEFRAYS COST OF MONTHLY MEETINGS AT WHICH THE SOCIETY PRESENTS EXPERT SPEAKERS AND REVIEWS OF COPYRIGHT LAW.
--	--

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
CAPITAL GAINS (LOSSES) FROM SECURITIES					
REALIZED GAIN ON SECURITIES			6,820.		6,820.
TOTAL CAPITAL GAINS (LOSSES) FROM SECURITIES			6,820.		6,820.
<b>Totals</b>			<b>6,820.</b>		<b>6,820.</b>