Form 990

Department of the Treasury

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)



Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2006 calendar year, or tax year beginning 10/01 , 2006, and ending 09/30/2007 Please Check if applicable Name of organization D Employer identification number use IRS Address change THE COPYRIGHT SOCIETY OF THE USA label or 13-6159787 print o Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number type. Initial return See 7TH AVENUE. SUITE 739 (212)354-6401Specific Final return Accounting Cash City or town, state or country, and ZIP + 4 X Accrual Amended tions. NEW YORK, NY 10001-5012 Other (specify) Application panding Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable H and I are not applicable to section 527 organizations. trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(a) is this a group return for affiliates? Yes X No Website: ► N/A H(b) If "Yes," enter number of affiliates Organization type (check only one) ► X 501(c) (3) ◄ (insert no.) 4947(a)(1) or H(c) Are all affiliates included? (If "No," attach a list. See instructions. if the organization is not a 509(a)(3) supporting organization and its gross H(d) is this a separate return filed by an receipts are normally not more than \$25,000. A return is not required, but if the organization chooses organization covered by a group ruling? to file a return, be sure to file a complete return. Group Exemption Number Check X if the organization is not required Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 453,456. to attach Sch. B (Form 990, 990-EZ, or 990-PF). Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.) Contributions, gifts, grants, and similar amounts received: c Indirect public support (not included on line 1a) d Government contributions (grants) (not included on line 1a) 1d C Total (add lines 1a through 1d) (cash \$ _ 1 e 2 Program service revenue including government fees and contracts (from Part VII, line 93) . . . 2 4,544, 3 226,845. Interest on savings and temporary cash investments . . . 4 1,195. Dividends and interest from securities 5 3,067. 6 C Other investment income (describe 7 8 a Gross amount from sales of assets other (A) Securities (B) Other than inventory 1,567. 8a b Less: cost or other basis and sales expenses 8 b c Gain or (loss) (attach schedule) | 1,567. 1,567. 8 d Special events and activities (attach schedule). If any amount is from gaming, check here a Gross revenue (not including \$ contributions reported on line 1b)........ b Less: direct expenses other than fundraising expenses 9 b c Net income or (loss) from special events. Subtract line 9b from line 9a 10 a Gross sales of inventory, less returns and allowances hoa c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 100 Other revenue (from Part VII, line 103) 11 11 216,238. 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 453,456. 13 Program services (from line 44, column (B)) 13 298,542. 14 14 190,149. 15 Fundraising (from line 44, column (D)) 15 Payments to affiliates (attach schedule) 16 16 17 Total expenses. Add lines 16 and 44, column (A) . . 17 488,691. Excess or (deficit) for the year. Subtract line 17 from line 12 Net Assets 18 18 -35,235. 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 97,543. Other changes in net assets or fund balances (attach explanation) STMT .2. 20 2,624.

64,932.

Net assets or fund balances at end of year. Combine lines 18, 19, and 20. . .

Form 990 (2006) 13-6159787 Statement of Functional Expenses Part II 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 (C) Management (B) Program (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I. and general 22a Grants paid from donor advised funds (attach schedule) noncash \$ If this amount includes foreign grants, check here 22a 22b Other grants and allocations (attach schedule) noncash \$ If this amount includes foreign grants, check here 22b Specific assistance to individuals (attach schedule) 23 24 Benefits paid to or for members (attach schedule) 24 25a Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule) 25a NONE b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule) 25b C Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described 25c in section 4958(c)(3)(B) (attach schedule) . . . 26 Salaries and wages of employees not included on lines 25a, b, and c 26 84,660 12,699 71,961 27 Pension plan contributions not included on lines 25a, b, and c 27 28 Employee benefits not included on lines 25a - 27 28 4,041 606 <u>3,435</u> 29 Payroll taxes 29 6,312 947 5,365. 30 Professional fundraising fees 30 Accounting fees 31 18,229 2,734 15,495. 32 32 33 33 2,640. 396 2,244 34 2,821 423 2,398 35 Postage and shipping <u>3,954</u> 35 593 3,361 36 26,043 3,906. <u>22,</u>137. Equipment rental and maintenance 37 37 1,068 548 520. Printing and publications 38 31,430 <u>31,430</u> Travel.......... 39 Conferences, conventions, and meetings 40 111,693 111,693 41 42 Depreciation, depletion, etc. (attach schedule) 42 327 49 278 43 Other expenses not covered above (itemize): a STMT_3____ 43a 195,473 132,518 62,955. 43b 43c 43d 43e 43f 43g Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15), 488,691 298,542 <u>190,149.</u>

Joint Costs, Check 🕨	if you are following SOP 98	-2 .		
Are any joint costs from a	combined educational campaign and	d fundraising solicitation reported in (B) Program services?	Yes X	No
	ate amount of these joint costs \$; (ii) the amount allocated to Program services \$		•

; and (iv) the amount allocated to Fundraising \$

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

Form 990 (2006)

Р	Statement of Program Service Accomplishments (Cos the instructions)	
Fo pa on	art III Statement of Program Service Accomplishments (See the instructions.) rm 990 is available for public inspection and, for some people, serves as the primary or sole source or rticular organization. How the public perceives an organization in such cases may be determined by the its return. Therefore, please make sure the return is complete and accurate and fully describes, in Participants and accomplishments.	information areconted
W All of	nat is the organization's primary exempt purpose? SEE STATEMENT 4 organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) panizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	CONTRIBUTIONS TO LOCAL COPYRIGHT SOCIETY CHAPTERS FOR SET UP COST AND EXCESS MEETING EXPENSES	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	4.652.
b	COST OF MAILING, PRINTING AND EDITING OF THE COPYRIGHT LAW JOURNAL	.,
_	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	77,884.
С	THE COST OF MEETINGS WHICH EDUCATES KEY PEOPLE COPYRIGHT LAWS AND RIGHTS IN VARIOUS FORMS OF INTELLECTUAL PROPERTY.	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	206,292.
d	DESIGN AND MAINTENANCE OF WEBSITE TO FACILITATE MEMBERS ACCESS TO COPYRIGHT, MEETING, AND MEMBERSHIP INFORMATION.	2007 472.
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	9,714.
е	Other program services (attach schedule)	

) If this amount includes foreign grants, check here

(Grants and allocations \$

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

298,542. Form **990** (2006)

Pa	rt IV	Balance Sheets (See the instructions.)	3-6159/8/		Page 4
No	ote:	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
•	45	Cash - non-interest-bearing	89,606.	45	111,393.
- 4	46	Savings and temporary cash investments	6,092.		6,039.
'	47a	Accounts receivable			
	b	Less: allowance for doubtful accounts 47b	1,655.	47c	11,525.
ĺ					-
4	48a	Pledges receivable			
		Less: allowance for doubtful accounts		48c	
- 1	49	Grants receivable		49	
- 1	50a	Receivables from current and former officers, directors, trustees, and		!	
	_	key employees (attach schedule)		50a	
	þ	Receivables from other disqualified persons (as defined under section			
1.		4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	50b	
: ا در	51a	Other notes and loans receivable (attach			
Assets		schedule)			
AS.		Less: allowance for doubtful accounts		51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges		53	
;	54a	Investments - publicly-traded securities . STMT .5. ► Cost X FMV	85,632.	54a	72,335.
١.		Investments - other securities (attach schedule) Cost FMV		54b	
'	55a	Investments - land, buildings, and			
		equipment: basis			
	D	Less: accumulated depreciation (attach		1011100	
١,		schedule)		55c	
		Investments - other (attach schedule)		56	
`		Land, buildings, and equipment: basis			
	U	Less: accumulated depreciation (attach			
١.	- ^	schedule) 1,144	819.	57c	493.
	58	Other assets, including program-related investments	_		
١.	59	(describe ► STMT 6) Total assets (must equal line 74). Add lines 45 through 58	17,610.		3,200.
			201,414.		<u>204,985.</u>
	30 31	Accounts payable and accrued expenses	8,616.		7,595.
- 1 '	32	Grants payable		61	
ہ ا		Deferred revenue	80,845.		132,458.
Liabilities	, ,	Loans from officers, directors, trustees, and key employees (attach schedule)			
ا≣	24-	Tax-exempt bond liabilities (attach schedule)		63	
[편				64a	
- 1	35	Mortgages and other notes payable (attach schedule)	7.4.47.0	64b	
- `	, ,	Other liabilities (describe ►)	14,410.	6.5	NONE
	36	Total liabilities. Add lines 60 through 65	100 071		7.40.050
		nizations that follow SFAS 117, check here X and complete lines	103,871.	66	140,053.
`		67 through 69 and lines 73 and 74.			
8 6			07 543	67	C4 000
2 6		Temporarily restricted	97,543.	68	64,932.
를 (e		Permanently restricted		69	
9 6		nizations that do not follow SFAS 117, check here ▶ and			
(اڌِ	J. g.u	complete lines 70 through 74.		018981800 018981800	
or Fund Balances	0	Capital stock, trust principal, or current funds		70	
	1	Paid-in or capital surplus, or land, building, and equipment fund		71	
88 7	2	Retained earnings, endowment, accumulated income, or other funds		72	
** I	- '3	Total net assets or fund balances (add lines 67 through 69 or lines		2000000	
<u>ĕ</u> .		70 through 72. (Column (A) must equal line 19 and column (B) must			•
_		equal line 21)	97,543.	7.3	64,932.
7	4	Total liabilities and net assets/fund balances. Add lines 66 and 73			204 985

Р	Reconciliation of Revenue per Audited F instructions.)	inancial Stateme	13-61597 nts With Reven	87 ue per Return (\$	Page 5 See the
а	Total revenue, gains, and other support per audited finance	cial statements		а	456,080.
b	Amounts included on line a but not on Part I, line 12:				430,000.
1	Net unrealized gains on investments		[ь1]	2,624.	
2	Donated services and use of facilities				
3	Recoveries of prior year grants		b3		
4	Other (specify):				
	Add lines b1 through b4				2,624.
C	Subtract line b from line a		· · · · · · · · · · · ·	<u>c</u>	453,456.
d	Amounts included on Part I, line 12, but not on line a:		1 1		
1	Investment expenses not included on Part I, line 6b				
2	Other (specify):				
	Add lines at and an		d2		
e	Add lines d1 and d2	• • • • • • • • • •	· · · · · · · · · · · · ·	<u>d</u>	
_	rt IV-B Reconciliation of Expenses per Audited F	inancial Stateme	nte With Evnon	·····▶ e	453,456.
а	Total expenses and losses per audited financial statements	• • • • • • • • • • •		<u>a</u>	488,691.
b	Amounts included on line a but not on Part I, line 17:		أميدا		
1	Donated services and use of facilities				
2	Prior year adjustments reported on Part I, line 20				
3	Losses reported on Part I, line 20	• • • • • • • • • • • • • • • • • • • •	b3		
4	Other (specify):				
	Add lines b1 through b4				
С	Subtract line b from line a				488,691.
d	Amounts included on Part I, line 17, but not on line a:			• • • • • • • •	400,001.
1	Investment expenses not included on Part I, line 6b		d1		
2	Other (specify):				
-			1 1		
				d	
е	Add lines d1 and d2			 e	488,691.
Pa	rt V-A Current Officers, Directors, Trustees, and	Key Employees (List each person	who was an offic	er, director, trustee,
	or key employee at any time during the year eve	n if they were not co	mpensated.) (See	the instructions.)	
	(A) Name and address	(B) Fittle and average hours per	(C) Compensation (If not paid, enter	(D) Contributions to employ benefit plans & deferred	
		week devoted to position	-0)	compensation plans	and other allowances
		_			
<u>SE</u>	E STATEMENT 8	<u> </u>	NON	E NOI	<u>ir non</u> e
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Part VI Other Information (continued)		T	Yes N	
82 a Did the organization receive donated services or the use of materials, equipment, or facilities	es at no charge			
or at substantially less than fair rental value?		82a	1	,
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.)	N/A			
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	x	000000
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	x	
84a Did the organization solicit any contributions or gifts that were not tax deductible?		84a	×	
b if "Yes," did the organization include with every solicitation an express statement that such	contributions or			
gifts were not tax deductible?		84Ь	N/A	0000000
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	· · · · · · · · · · · · · · · · · · ·	85a	N/A	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85b	N/A	
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless	s the organization			
received a waiver for proxy tax owed for the prior year.	.			
c Dues, assessments, and similar amounts from members	N/A			
d Section 162(e) lobbying and political expenditures 85d	N/A			
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A			
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f	N/A			
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g	N/A	2011/21200
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amo	ount on line 85f			
to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following ta		85h	N/A	2000000
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a	N/A			
b Gross receipts, included on line 12, for public use of club facilities 86b	N/A			
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders	N/A			
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	000000		
88 b At any time during the year, did the organization own a 50% or greater interest in a taxab				
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	X	22000 (
b At any time during the year, did the organization, directly or indirectly, own a controlled				<u> </u>
meaning of section 512(b)(13)? If "Yes," complete Part XI		886	x	7
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			
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess b				
during the year or did it become aware of an excess benefit transaction from a prior year?				
a statement explaining each transaction	1	89b	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			
e All organizations. At any time during the tax year, was the organization a party to a proh				
transaction?		89e	X	99999 •
f All organizations. Did the organization acquire a direct or indirect interest in any applicable in	nsurance contract?	8 9 f	X	
5	funds. Did the			
supporting organization, or a fund maintained by a sponsoring organization, have excess	198	0.88000		
at any time during the year?		89g	X	seus T
90 a List the states with which a copy of this return is filed ▶ NONE			1.4.	
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	1 !	90ь 2	2	—
91 a The books are in care of THE COPYRIGHT SOCIETY OF USA Telepho				
Located at ► 352 SEVENTH AVE., NEW YORK, NY ZIP+4			10,1	—
				—
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Ī	Yes N	lo
a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Γ,	91b	X	
If "Yes," enter the name of the foreign country	100			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	·			
and Financial Accounts.				65 Mile.

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Part Vi Other Information (contin					Yes No
c At any time during the calendar yea	r, did the org	anization main	tain an office outsi	de of the United States?	91c X
If "Yes," enter the name of the fore	gn country	>			
92 Section 4947(a)(1) nonexempt cha	ritable trusts i	filing Form 990	in lieu of Form 104	1 - Check here	<i></i> ▶ □
and enter the amount of tax-exemp	t interest rece	eived or accrue	ed during the tax ve	ar ▶ 92	N/A
Part VII Analysis of Income-Prod					
Note: Enter gross amounts unless otherwise indicated.	Unre	lated business ir	ncome Excluded	d by section 512, 513, or 514	(E)
	(A) Business code	(B) Amour	nt Exclusion cod	(D) Amount	Related or exempt function
93 Program service revenue:		7111001	A Exclusion coo	Amount	income
a ROYALTY INCOME	-				4,544
b	-				
c	-				
d	-				
f Medicare/Medicaid payments	-				
g Fees and contracts from government agencies					
94 Membership dues and assessments					225.045
95 Interest on savings and temporary cash investments			14	1 105	226,845.
96 Dividends and interest from securities .			14	1,195.	
97 Net rental income or (loss) from real esta	Marie Company of the		1.3	3,067.	
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 inventor			18	1,567.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory .					
103 Other revenue; a					
b MEETING INCOME					209,874.
c MISCELLANEOUS					6,364.
d					
e	SSS consistent of the contract				
Subtotal (add columns (B), (D), and (E)) .					447,627.
105 Total (add line 104, columns (B), (D), and	(E))			· · · · · · · · · · · · · · · · · · ·	453,456.
Note: Line 105 plus line 1e, Part I, should equa					
Part VIII Relationship of Activities					
Line No. Explain how each activity for whi	ch income is re	eported in colum	π (E) of Part VII cont	tributed importantly to the acc	complishment
of the organization's exempt purp	ouses (other th	ari by providing it	unds for such purpose	S).	
STMT 17					
Part IX Information Regarding Tax	able Subsic	liaries and D	isregarded Entiti	es (See the instruction	26.)
(A)		(B)	(C)	(D)	····
Name, address, and EIN of corporation, partnership, or disregarded entity		Percentage of ownership interest	Nature of activitie	s Total income	(E) End-of-year assets
		%			docto
		%			
		%			
		%			
Part X Information Regarding Tr	ansfers Ass	ociated with	Personal Benefit	Contracts (See the in	structions.)
(a) Did the organization, during the year, receive	any funds, directl	y or indirectly, to pa	y premiums on a persona	al benefit contract?	Yes X No
(b) Did the organization, during the year	ar, pay premi	ums, directly	or indirectly, on a	personal benefit contrac	et? Yes X No
Note: If "Yes" to (b), file Form 8870 and	Form 4720 (s	ee instructions)		

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	XI Information Regarding is a controlling organiza	Transfers To and From ation as defined in section	Controlled Entities. Complete only n 512(b)(13).	if the organization	<u> </u>	Page S
106		n make any transfers to a	controlled entity as defined in section 5	12(b)(13) of	Yes	
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of tran	sfer	<u> X</u>
а						 .
b						
С					<u> </u>	
	Totals					
107	Did the reporting organization 512(b)(13) of the Code? If "Y	n receive any transfers froi (es," complete the schedul	n a controlled entity as defined in section below for each controlled entity.	n	Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer identification Number	(C) Description of transfer	(D) Amount of trans	sfer	1
а		 				
ь						
С						
	Totals					
108	rents, royalties, and annuities	described in question 107		·	Yes	х
Pleas Sign Here	and bolief it is tous seement -	and complete. Declaration of prep	eturn, including accompanying schedules and state arer (other than officer) is based on all information of Date	rnents, and to the best of which preparer has any kno	my kno wledge,	wledge
Paid Prepa	Firm's name (or yours		APR 3 0 2006 Check if self-employed FIN	arer's SSN or PTIN (See Ge	4	×)
Use O	if self-employed),	KE CPA'S PC 9 BROADWAY	Phone r	► 13-36432 10. ► 212-867-		
	<u> </u>	EW YORK. NY	10006-3201		990	(2006)

(Rev. April 2007)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

OMB No. 1545-1709

Internal Revenue S				ile a separate app						
If you are fIf you are f	filing for a filing for a	n Automatic 3-6	Month Extens	ion, complete o	nly Part I and che			\\\\\\\\	!	▶ <u>x</u>
Do not comple	ete Part II L	<i>iniess you have</i>	already been	granted an auto	matic 3-month e	xtension on a pre	eviously file	d Form	1 8868.	
Auto	omatic 3	Month Extens	sion of Time.	. Only submit o	riginal (no copi	es needed).				
Section 501(c and complete) corporat Part I only	ions required to	o file Form 990	0-T and requesti	ng an automatic	6-month extension	on - check t	his box	' I	▶ □
All other corpo	orations (i	ncluding 1120-0 income tax retur	C filers), partne	erships, REMICs,	and trusts must o	use Form 7004 to	request an			
Form 8868 el 8870, group re	turns note lectronica eturns, or	ed below (6 m lly if (1) you w a composite or	onths for sec ant the additi consolidated I	ition 501(c) corp ional (not autom From 990-T. Inst	porations require natic) 3-month e ead, vou must su	nt a 3-month au od to file Form 9 xtension or (2) y ubmit the fully con file and click on a	990-T). How ou file Foundled outleted an	wever, rms 99 d sign	you can 90-BL, 60 ed page 2	not file 069, or 2 (Part II)
Type or		Exempt Organiza							fication nu	
print	THE	COPYRIGHT	C SOCIETY	OF THE USA	£			1597		
File by the	Number,	street, and room	or suite no. If a	P.O. box, see instru	uctions.					
due date for filing your	352	2 7TH AVENU	JE, SUITE	739						
return. See instructions,	City, tow	n or post office, s	state, and ZIP co	ode. For a foreign a	ddress, see instruct	ions.				
		YORK, NY			***************************************					
		o be filed (file a		lication for each	return):					
X Form 990		-		-T (corporation)		Fo	rm 4720			
Form 990		-		-T (sec. 401(a) or 4		1	rm 5227		+	
Form 990		}		-T (trust other than	above)	1	rm 6069			
Form 990	-P - 	i.	Form 104	1-A		Fo	rm 8870			
 If the organ If this is for for the whole g 	nization de r a Group group, che		office or place e organization	e of business in 's four digit Grou s for part of the g	FAX No. ▶ the United States up Exemption Nur group, check this	mber (GEN)	and attach	n a list	. If this is	-
1 request	an autom	atic 3-month (6	months for a	section 501(c) o	corporation requi	red to file Form 9	990-T) exte	nsion c	of time	
until is for the	organizat	05/15 , 2008 ion's return for:	3 , to file the	e exempt organiz	zation return for th	e organization na	med above	. The e	xtension	
► X		year or beginning		10/01.200	6_, and ending	•	09/30	. 200	<u>7.</u> ·	
2 If this tax	year is fo	r less than 12 n	months, check	reason: in	nitial return	Final return	Change	in acc	counting (period
		is for Form 996 dits. See instruc		990-T, 4720, d	or 6069, enter t	he tentative tax,	less any	3a	\$	
				enter any refun	dable credits an	d estimated tax i	payments		- *	
		prior year overp				<u></u>		3 b	\$	
						m, or, if required	•			
		or, if require	ed, by using	EFTPS (Electro	onic Federal Tax	Payment Syste	em). See			
instructio								3с		
Caution. If you for payment in:			ectronic fund v	withdrawal with t	his Form 8868, s	ee Form 8453-E	O and Form	n 8879)-EO	
		-	tion Act Notic	ce. see Instructio	ns.			Form 9	RASA (Ray	4-2007)

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Compensation of the Five Highest Paid Em				13-6	159787
(See page 2 of the instructions. List each one. If the	ployees O here are no	ther Than Off ne, enter "Non	icers, Direc	etors, a	nd Trustees
(a) Name and address of each employee paid more than \$50,000 (b) Title and a per week devo	verage hours	(c) Compensation	(d) Contributi employee benef deferred comp	it plans &	(e) Expense account and other allowances
SEE STATEMENT 18					
Total number of other employees paid over \$50,000 ▶ NONE					
Part II-A Compensation of the Five Highest Paid Inde (See page 2 of the instructions. List each one (where the compensation of the Five Highest Paid Inde	ependent (nether indivi	Contractors f	or Professi	onal Se	rvices
(a) Name and address of each independent contractor paid more than \$50,00	0	(b) Type of ser			Compensation
Total number of others receiving over \$50,000 for professional services NONE					
Part II-B Compensation of the Five Highest Paid Inde (List each contractor who performed services oth firms. If there are none, enter "None." See page 2	er than prof	fessional servic	or Other Sees, whether	ervices individua	ils or
(a) Name and address of each independent contractor paid more than \$50,000		(b) Type of ser	rice	(c)	Compensation
NONE	- -				
		· •1-m·1			
					. =
	l l				

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

Schedule A (Form 990 or 990-EZ) 2008

Pa	rt 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 t of Part VI-B.)		
	Organizations that made an election under section 501(h) by filling 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.		Х
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?		<u>x</u>
С	Furnishing of goods, services, or facilities?		x
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		х
e	Transfer of any part of its income or assets?		х
3 a	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.)		x
þ	Did the organization have a section 403(b) annuity plan for its employees?		Х
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		<u>x</u>
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		<u> x</u>
4a b	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X X
С	Did the organization make a distribution to a donor, donor advisor, or related person?		Х
d	Enter the total number or 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 rights 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		

Schedule A (Form 990 or 990-EZ) 2006

Part IV	Reason for Non-Private Fo	undation State	ıs (See pages 4 thr	ough 7 of th	e instructions.)		
I certify tha	t the organization is not a private foundat	lon because it is: (Ple	ease check only ONE app	licable box.)	. ,,	····		
5	A church, convention of churches, or ass	ociation of churches.	Section 170(b)(1)(A)(i).					
6	A school. Section 170(b)(1)(A)(ii). (Also co	omplete Part V.)						
7 🔲	A hospital or a cooperative hospital servi	ce organization. Secti	ion 170(b)(1)(A)(lii),					
8	A federal, state, or local government or g	overnmental unit. Se	ction 170(b)(1)(A)(v).					
	A medical research organization operated	in conjunction with	a hospital. Section 170(b)(1)(A)(iii). Ente	er the hospital's	name, city,		
	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.)							
	An organization that normally receives a 170(b)(1)(A)(vi). (Also complete the Supp			rnmental unit	or from the gene	eral public. Section		
11b	A community trust. Section 170(b)(1)(A)(vi). (Also complete the	e Support Schedule in F	Part IV-A.)				
1	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 by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)							
13 1	An organization that is not controlled the requirements of section 509(a)(3). Cl	i by any disqualif neck the box that de	ied persons (other tha scribes the type of suppor	n foundation ting organization	managers) and n:	otherwise meets		
[Type I Type II	Type III - Fur	nctionally Integrated	Type III	- Other			
	Provide the following information	about the supported	l organizations. (See pag	e 7 of the instr	uctions.)			
Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) Employer identification number (EIN) (c) Type of organization (described in lines 5 through 12 above or IRC section) (d) Is the supported organization isted in the supporting organization's governing documents?		upported ion listed in pporting ization's	(e) Amount of support					
				Yes	No			
<u></u>								
	, , , , , , , , , , , , , , , , , , , ,							
Total · · ·					, ▶			
14 A	n organization organized and operated to	test for public safet	y, Section 509(a)(4). (See	page 7 of the i		Form 990 or 990-EZ) 2006		

Schedule A (Form 990 or 990-EZ) 2006 13-6159787 Page 4 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year beginning in) (a) 2005 (b) 2004 (c) 2003 (d) 2002 (e) Total Gifts, grants, and contributions received. (Do. not include unusual grants. See line 28.) NONE NONE NONE NONE NONE 219,569. 206,143. 221,012 197,776 844,500. 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose 227,192. 241,971 242,855 1,171,689. 459,671. Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 9,097. 4.987 5,050. 6,786 25,920. Net income from unrelated business activities not included in line 18 20 Tax revenues levied for the organization's benefit and either paid to it or expended on The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets Total of lines 15 through 22 455,858. 453,101. 468,917. 664,233. 2,042,109. 228,666. 211,130. 226,062 204,562 Enter 1% of line 23 4,559. 4,531. 4,689. 6.642 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 NOT. APPLICABLE | 26a b Prepare a list for your records to show the name of and amount contributed by each person (other than a

governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the		
amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	▶ 26t	,
c Total support for section 509(a)(1) test: Enter line 24, column (e)	▶ 26c	
d Add: Amounts from column (e) for lines: 18 19	88.08	
22 26b	▶ 26d	1
e Public support (line 26c minus line 26d total)	≥ 26e	
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶ 26f	%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were rece	eived f	rom a "disqualifie
person," prepare a list for your records to show the name of, and total amounts received in each year from	each '	"disqualified person

person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person."

Do not file this list with your return. Enter the sum of such amounts for each year:

(2005) _____ (2004) ____ (2003) ____ (2003) ____ (2002) ____

8 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

63998M P632 04/28/2008 10:16:25 V06-8.6 LATEST VERSION

c Add: Amounts from column (e) for lines: 15 NONE 16 844,500.

Pa	Private School Questionnaire (See page 9 of the instructions.) NOT APPLIC (To be completed ONLY by schools that checked the box on line 6 in Part IV)	ABL	Е	
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	100	110
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 echolorehine?	30	(2000000	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	30		
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way		2000000	
	that makes the policy known to all parts of the general community it serves?	31	100000000	E000000
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
	Records indicating the racial composition of the student body, faculty, and administrative staff?		(86), (86)	0000000
h	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	32a		├
	basis?			
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32b		_
·	with student admissions, programs, and scholarships?			
A	with student admissions, programs, and scholarships?	32c		ļ
u	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	(35000000000	101000000
	If you analysis difficulties and of the above along the second in the se			
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
	Dogo the agrant-stan dissimilar L			
33	Does the organization discriminate by race in any way with respect to:			
_	Studentel righte or weightenens	1018100019000 -11018001900	0000000000	
a	Students' rights or privileges?	33a	-	ļ
h	Admissione nations?			
D	Admissions policies?	33b		ļ <u>.</u>
_	Employment of featility as administrative at 552			l
C	Employment of faculty or administrative staff?	33c		
	Scholarching or other financial assistance?			
u	Scholarships or other financial assistance?	33d		
_	Educational multiplication			
е	Educational policies?	33e		
	Han affacilities O		ļ	
т	Use of facilities?	33f	<u> </u>	ļ
	Athletic programs?			
y	Athletic programs?	33g	<u> </u>	
	Other sytropyricular activities?			
n	Other extracurricular activities?	<u>33h</u>	0000000000	80000000
	If you appropried "Voo" to any of the above places symbols (If you need more specially the bound of the above places and the control of the c			
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
				2.086
				2283
		08000000	0558863868	gdaggedar.
3 <i>A</i> a	Does the organization receive any financial aid or assistance from a governmental agency?	24-		
J 7 4	2000 and organization receive any intention and or assistance from a governmental agency?	34a		
h	Has the organization's right to such aid ever been revoked or suspended?	246		
D	If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	1008.588	
	in you discretified in each of the entire of a or by prease explaint using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05			\$100.00 \$100.00
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation			(*************************************
	57 CO 1 1705. 10 00, 1070-2 O.B. 007, 00761119 radial nondisciplination? If 190, attach an explanation	35	L.	i

Pa	art VI-A L (.obbying E To be com	xpenditures by Ele pleted ONLY by ar	ecting Public Charition eligible organization	es (See page in that filed For	10 of t m 576	he instruction	ctions	.) .דריאי	RIP
Che	eck ▶a	if the organ	ization belongs to an a	ffiliated group. Check						ntrol" provisions appl
			imits on Lobbyin	ng Expenditures ns amounts paid or incu			Affiliate	(a)		(b) To be completed for all electing
3.6	Total Jahhu			<u> </u>	•					organizations
36 37	Total labby	ing expendi	itures to influence pu	iblic opinion (grassroots	s lobbying)	36				
38	Total lobby	ing expendi	itures to influence a l	legislative body (direct	lobbying)	37				
39	Other even	nig expensi	aures (add ilnes 30 a	and 37)		38				
40	Total evem	nt nurnaea	expenditures (add li	nes 38 and 39)	• • • • • • • • •	39				
41	Lobbying n	ontavable s	implint Enter the am	nes 38 and 39) nount from the following		40				
٠.	If the amou			obbying nontaxable ar						
				of the amount on line 40	•					
				000 plus 15% of the excess						
				000 plus 10% of the excess		41	10103001011011011	ROMARON	etacuaetaeta	
				000 plus 5% of the excess ov						
	Over \$17,000	,000	\$1,00	0,000	J					
42	Grassroots	nontaxable	amount (enter 25%	of line 41)		42				
43	Subtract lin	e 42 from I	ine 36. Enter -0- if lir	ne 42 is more than line	36	43				
44	Subtract lin	e 41 from I	ine 38. Enter -0- if lir	ne 41 is more than line	38	44				
	Caution: If	there is an		e 43 or line 44, you mus						
	(Com	o arganizati		ar Averaging Period						
	(2011)	e organizati		ction 501(h) election do					umns	below.
			See the histract	tions for lines 45 throug						
				Lobbying Expendi	tures During 4	-Year	Averagir	ıg Pe	riod	
	Calendar ye	•	(a)	(b)	(c)			(d)		(e)
	year beginni		2006	2005	2004		20	003		Total
	Lobbying no									
45	amount	•				v 1000				
46	Lobbying cei (150% of line	-								
40	(150 % 011116	: 43(e)) · ·						15000000		
47	Total lobbying	evnenditures								
••	Grassroots n									
48	amount									
	Grassroots cei					4000 NOSON	60 80 00 00 00	0.000	0.000.1000	
49	(150% of line	•								
	Grassroots le					anna naidh	<u> </u>		<u> </u>	
50	expenditures									
Pa				ting Public Charities			NOT			
				ations that did not co		 		13 of	he in	structions.)
				ence national, state or loca		ing any		Yes	No	Amount
				atter or referendum, throug						Amount
a	Volunteers	 .								
D				nsation in expenses rep						
٠ د	Mailiaga ta	nasements								
d	wallings to Publication	members, l	regisiators, or the pul	blic	• • • • • • • • •					
e f	Grante to a	s, or publist ther organi	retione for Johnston -	ements						
g	Direct confe	arer organi. act with lead	cadona for loopying p islators, their staffs	ourposes government officials, or	r a legislativa bas	 hz				
y h	Railies der	nonstration	s seminare convent	government omcials, of tions, speeches, lectures	a registative DOC	ψ,				
i	Total lobbyi	na expendi	tures (Add lines c thr	ough h .)	s, or any owner me	cans .	• • • • •		(C. (2004)	
•	If "Yes" to a	any of the a	bove, also attach a s	statement giving a deta	iled description	of the k	obbving ac	tivities	<u> </u>	
JSA					=					(Form 990 or 990-EZ) 2006
0=12	40 2,000									

Pa	rt VII	Information Regarding Exempt Organizations	Transfers To and Transactions an (See page 13 of the instructions.)	d Relationships With Noncharitab	le		age /
51	Did the ro	porting organization direc	tty or indirectly engage in any of the folloion 501(c)(3) organizations) or in section	owing with any other organization desc	cribed in	n sect	ion
а	Transfers	from the reporting organi	zation to a noncharitable exempt organi	on 527, relating to political organizations	57		
_						Yes	No
	(II) Oth	''		• • • • • • • • • • • • • • • • • • • •	51a(i)	 	X
	Other train	ocations:	*******		a(ii)	<u> </u>	Х
U							
	(I) Sale	es or exchanges of assets	with a noncharitable exempt organization	n , , , , , , , , , , , , , , , , , , ,	b(i)		X
	(III) Pure	mases of assets from a no	oncharitable exempt organization		b(ii)		Х
	(111) 17611	tai oi raciilles, equipment,	or other assets		b(III)		Х
	(14) IZEII	noursement arrangements			b(iv)		Х
	(*) Loa	is or roarr guarantees			b(v)		Х
	(vi) Peri	ormance of services or m	embership or fundraising solicitations		b(vI)	-	X
C	Sharing o	f facilities, equipment, ma	iling lists, other assets, or paid employee		c		X
d	If the answ	ver to any of the above is "Ye	s," complete the following schedule. Column	(h) should always show the fair market value	of the		^
	goods, oth	er assets, or services given b	y the reporting organization. If the organization	on received less than fair market value in any	or the		
	transaction	or sharing arrangement, she	ow in column (d) the value of the goods, other	spects of services received:			
	(a)			assets, or services received:			
	Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d)			
			reame of Horichaniable exempt organization	Description of transfers, transactions, and sh	aring arra	ngemer	nts
I	1/A						
	•						
	describe	d in section 501(c) of the (complete the following sch		more tax-exempt organizations n section 527? ▶	Yes	х] No
	Nai	(a) ne of organization	(b) Type of organization	(c) Description of relationsh	ip		
1	I/A						
		· · · · · · · · · · · · · · · · · · ·					
-							
			-				
	•						
		<u>-</u>					

Schedule A (Form 990 or 990-EZ) 2006

FORM 990,	PART I -	MEMBERSHIP	DUES	AND	ASSESSMENTS
=====					

DESCRIPTION AMOUNT

MEMBERSHIP DUES 226,845.

TOTAL 226,845.

FORM 990,	PART	I	 OTHER	INCREASES	IN	FUND	BALANCES

DESCRIPTION

----UNREALIZED GAIN ON INVESTMENT

2,624.

TOTAL

2,624.

FORM 990, PART II - OTHER EXPENSES

MANAGEMENT AND GENERAL	950. 4,623. 8,475. 5,390. 41,574. 1,127. 62,955.	
PROGRAM SERVICES	168. 816. 1,239. 1,300. 73,411. 42,500. 7,337. 4,652.	
TOTAL	1,118. 5,439. 9,714. 6,341. 1,300. 73,411. 42,500. 48,911. 4,652. 1,127.	
DESCRIPTION	OFFICE EXPENSE INSURANCE WEBSITE AND COMPUTER CREDIT CARD FEES AWARDS LUNCHEONS JOURNAL EDITORIAL SERVICES INVESTMENT EXPENSES AUDIT FEES CONTRIBUTIONS TO LOCAL CHAPTER MISCELLANEOUS	

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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 - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION

ENDING BOOK VALUE

WACHOVIA INVESTMENTS

72,335.

TOTALS

72,335. ______ FORM 990, PART IV - OTHER ASSETS

DESCRIPTION

ENDING BOOK VALUE

RENT DEPOSIT

3,200.

TOTALS

3,200.

FORM 990, PART IV - OTHER LIABILITIES ______

DESCRIPTION

ENDING BOOK VALUE

DUE TO GENERAL FUND

NONE

TOTALS

NONE ______

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION C	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
HELENE BLUE HELEN BLUE MUSIQUE LTD. 421 7TH AVE. NEW YORK, NY 10001	PRESIDENT	NONE	NONE	NONE
KAREN FRANK HOWARD RICE NEMEROVSKI CANDAY FALK 3 EMBARCADERO CENTRE,7TH FLOOR SAN FRANCISCO, CA 94111	VICE PRESIDENT	NONE	NONE	NONE
GLORIA PAHRES PATTERSON BELKNAP WEBB & TYLOR 1133 AVE. OF THE AMERICAS	SECRETARY	NONE	NONE	NONE
COREY FIELD BALLARD SPAHR ANDREWS & INGERSOLL, 1735 MARKET ST. 51ST FL PHILADELPHIA, PA 19103	TREASURER	NONE	NONE	NONE
MICHAEL KLIPPER MEYER, KLIPPER & MOHR, PLLC 923 15 ST NW WASHINGTON, DC 20005	ASSISTANT TREASURER	NONE	NONE	NONE
ROSE AUSLANDER CARTER LEDYARD & MILBURN LLP 2 WALL ST. NEW YORK, NY 10005	TRUSTEE	NONE	MONE	NONE
ANKEL SINGER LLP	TRUSTEE	NONE	NONE	NONE

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

COMPENSATION EXPENSE ACCT TO EMPLOYEE AND OTHER COMPENSATION BENEFIT PLANS ALLOWANCES		NONE NONE NONE	NONE NONE NONE	NONE NONE NONE	NONE NONE NONE	NONE NONE	NONE NONE NONE
TITLE AND TIME DEVOTED TO POSITION		TRUSTEE	TRUSTEE	TRUSTEE	TRUSTEE	TRUSTEE	TRUSTEE
NAME AND ADDRESS	405 LEXINGTON AVE NY, NY 10174	BEVERLY A BERNEMAN QUERREY & HARROW 175 W JACKSON BLVD CHICAGO, IL 60604	ROBERT A. GORMAN UNIV. OF PENNA LAW SCHOOL 507 CYPRESS ST. PHILADELPHIA, PA 19106	NAOMI JANE GRAY PAUL HASTINGS JANOFSKY WALKER LLP 55 2ND ST 24TH FL SAN FRACISCO, CA 94105	JAMIE B. BISCHOFF BALLARD SPAHR ANDREWS & INGERSOLL 1735 MARKET STREET, 51ST FL. PHILADELPHIA, PA 19103	ANDREW P. BRIDGES WINSTON & STRAWN LLP 101 CALIFORNIA STREET SUITE 3900 SAN FRANCISCO, CA 94111	JOHN DALANEY MORRISON & FOERSTER LLP 1290 AVENUE OF THE AMERICAS

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION COM	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
NEW YORK, NY 10104		i : : : : :	 	
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	TRUSTRE	NONE	NONE	NONE
STEFAN MENTZER WHITE & CASE LLP 1155 AVENUE OF THE AMERICAS NEW YORK, NY 10036	TRUSTEE	NONE	NONE	NONE
STANLEY PIERRE-LOUIS VIACOM INC. 1515 BROADWAY NY, NY 10036	TRUSTEE	NONE	NONE	NONE
JOHN P. LUNEAU RAZOR & TIE DIRECT LLC 214 SULLIVAN STREET SUITE 4A NEW YORK, NY 10012	ASSISTANT SECRETARY	NONE	NONE	NONE
DEIRDRE SILVER JOHN WILEY & SONS 111 RIVER STREET HOBOKEN, NJ 7030	TRUSTEE	NONE	NONE	NONE
CYDNEY TUNE	TRUSTEE			

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

NAME AND ADDRESS	LE AND TIME ED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
PILLSBURY WINTHROP LLP 50 FREMONT STREET SAN FRANCISCO, CA 94105		 		
JONATHAN ZAVIN LOEB & LOEB 345 PARK AVENUE NEW YORK, NY 10154	TRUSTEE			
ANGELA WASHELESKY SACHNOFF & WEAVER, LTD. 30 SOUTH WACKER DRIVE, STE 2900 CHICAGO, IL 60606	TRUSTEE			
DIAN ZIMMERMAN NEW YORK UNIVERSITY SCHOOL OF LAW 40 WASHINGTON SQUARE SOUTH NEW YORKN, Y 10012	TRUSTEE			
JEREMY WILLIAMS WARNER BROS. 8000 WARNER BLVD. BURBANK, CA 90067	TRUSTEE			
MICHELENA HALLIE MTV NETWORKS 1515 BROADWAY 34TH FLOOR NY, NY 10036	TRUSTEE	NONE	NONE	NONE
KENNETH M KAUFMAN SKADDEN ARPS SLATE MEAGHER FLOM LLP	TRUSTEE	NONE	NONE	NONE

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

NAME AND ADDRESS	TLE AND TIME TED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
1440 NY AVE NW WASHINGTON, DC 20005		1 		;
DAVID A DONAHUE FROSS ZELNICK LEHRMAN ZISSU PC 866 UN PLAZA NY, NY 10017	TRUSTEE	NONE	NONE	NONE
ERIC J SCHWARTZ MITCHELL SILBERBERG KNUPP LLP 2300 M STREET SUITE 800 WASHINGTON, DC 20037	TRUSTEE	NONE	NONE	NONE
NANCY J MERTZEL THELEN REID BROWN RAYSMAN STEINER 9003RD AVE NY, NY 10022	TRUSTEE	NONE	NONE	NONE
NOEL L SILVERMAN LAW OFFICE OF NOEL L SILVERMAN 200 PARK AVE SUITE 1614 NY, NY 10003	TRUSTEE	NONE	NONE	NONE
MARC D OSTROW BOOSEY HAWKES INC 35 E 21ST ST. NY, NY 10010	TRUSTEE	NONE	NONE	NONE
BERNARD R. SORKINS 10 COLVIN RD. SCARSDALE, NY 10583	TRUSTEE	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION COM	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ERIC M STAHL DAVIS WRIGHT TREMAINE LLP 1201 3RD AVE SUITE 2200 SEATTLE, WA 98101	TRUSTEE	NONE	NONE	NONE
IAN SAFFER TOWNSEND TOWNSEND AND CREW LLP 1200 17TH ST. SUITE 1200 DENVER, CO 80202	TRUSTEE	NONE	NONE	NONE
LOIS WASOFF 258 SUDBURY RD. CONCORD, MA 01742	TRUSTEE	NONE	NONE	NONE
KATHERINE E WOODS SONY BMG NASHVILLE 1400 18TH AVE. SOUTH NASHVILLE, TN 37212	TRUSTEE	NONE	NONE	NONE
DAVID GREEN COBRIS CORP 710 2ND AVE. SUITE 200 SEATTLE, WA 98104	EXECUTIVE COMMITTEE	NONE	NONE	NONE
ELEANOR LACKMAN ARNOLD PORTER LLP 399 PARK AVE NY, NY 10022	EXECUTIVE COMMITTEE	NONE	NONE	NONE
E. LEONARD RUBIN	EXECUTIVE COMMITTEE	NONE	NONE	NONE

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

ONS EXPENSE ACCT E AND OTHER ANS ALLOWANCES		NONE	NONE	NONE	NONE NONE	NONE NONE	NONE NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS		NC	NC	NC	NC	NO	NO
COMPENSATION		NONE	NONE	NONE	NONE	NONE	NONE
TITLE AND TIME DEVOTED TO POSITION		EXECUTIVE COMMITTEE	HONORARY TRUSTEE	HONORARY TRUSTEE	HONORAY TRUSTEE	HONORARY TRUSTEE	HONORARY TRUSTEE
NAME AND ADDRESS	REED SMITH LLP 10 S WACKER DRIVE 40TH FLR CHICAGO, IL 60606	JOSEPH SALVO WEIL GOTSHAL MANGES 767 STH AVE. NY, NY 10153	ROBERT BERNSTEIN L/O OF ROBERT J BERNSTEIN 488 MADISON AVE NY, NY 10022	RICHARD DAANNAY COWAN LIEBOWITZ LATMAN 1133 AVE. OF AMERICAS NY, NY 10036	MARIA A DANZILO JOHN WILEY & SONS 111 RIVER ST. HOBOKEN, NJ 07030	EUGENE GIRDEN 76 BROOKDALE DR STANFORD, CT 06903	MORTON DAVID GOLDBERG COWAN LIEBOWITZ LATMAN PC 1133 AVE. OF AMERICAS NY, NY 10036

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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
ALAN HARTNICK ABELMAN FRAYNE SCHWAB 666 3RD AVE 10TH FLOOR NY, NY 10017	HONORARY TRUSTEE	NONE	NONE	NONE
BERNARD KORMAN 215 E 68TH ST. NY, NY 10021	HONORARY TRUSTEE	NONE	NONE	NONE
E GABRIEL PERLE 2500 S OCEAN BLVD. APT 3 PALM BEACH, FL 33480	HONORARY TRUSTEE	NONE	NONE	NONE
JUDITH SAFFER BROADCAST MUSIC INC 320 W 57TH ST NY, NY 10019	HONORARY TRUSTEE	NONE	NONE	NONE
MICHAEL POLLACK 11 MOOREWOOD OAKS PORT WASHINGTON, NY 11050	HONORARY TRUSTEE	NONE	NONE	NONE
BARRY SLOTNICK LOEB & LOEB 345 PARK AVE NY, NY 10154	HONORARY TRUSTEE	NONE	NONE	NONE
ROGER ZISSU FROSS ZELNICK LEHRMAN ZISSU 866 UN PLAZA 6TH FLR	HONORARY TRUSTEE	NONE	NONE	NONE

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

	TITLE AND TIME		CONTRIBUTIONS TO EMPLOYEE	EXPENSE ACCT AND OTHER
NAME AND ADDRESS	DEVOTED TO POSITION	COMPENSATION	BENEFIT PLANS	ALLOWANCES
NY, NY 10017				

NONE

NONE

NONE

GRAND TOTALS

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	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.

PAID EMPLOYEES
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A, PAR
SCHEDULE

COMPENSATION	.62,679	.66,679.
TITLE AND TIME DEVOTED TO POSITION	ADMINISTRA 40.00	TOTAL COMPENSATION
NAME AND ADDRESS	AMY NICKERSON GOLDSTEIN 121 GARRISON AVENUE, 402 JERSEY CITY, NJ 07036	

	Date	Date	Gross Sales	Cost or Other	Long-term
Description	Acquired	Sold	Price	Basis	Gain/Loss
- 1					
CAPITAL GAINS (LOSSES) FROM SECURITIES					
CAPITAL GAINS	VAR	09/30/2007	1,567.		1,567.
IOTAL CAPITAL GAINS (LOSSES) FROM SECURITI	ES		1,567.		1,567.
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TOTAL STREET, MARKET LABOUR.					-
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Totals			1,567.		1,567.

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