

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
 (except black lung benefit trust or private foundation)

2006

Department of the Treasury
 Internal Revenue Service

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

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning 9/01, 2006, and ending 8/31, 2007

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C TEXAS JEWELERS ASSOCIATION 1306-A WEST ANDERSON LANE AUSTIN, TX 78757	D Employer identification number 74-6064608 E Telephone number 512-454-8626 F Group Exemption Number ▶
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: Cash Accrual
 Other (specify) ▶

I Website: ▶ TEXASJEWELERS.ORG
J Organization type (check only one) — 501(c) (6) (insert no.) 4947(a)(1) or 527

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

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 51,775.

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

	1 Contributions, gifts, grants, and similar amounts received	1	47,935.
	2 Program service revenue including government fees and contracts	2	2,394.
	3 Membership dues and assessments	3	
	4 Investment income	4	1,250.
REVENUE	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5c	
	6 Special events and activities (attach schedule). If any amount is from gaming, check here ... <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
b Less: direct expenses other than fundraising expenses	6b		
c Net income or (loss) from special events and activities (line 6a less line 6b)	6c		
	7a Gross sales of inventory, less returns and allowances	7a	
	b Less: cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c	
	8 Other revenue (describe ▶ <u>See Statement 1</u>)	8	196.
	9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	51,775.
EXPENSES	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	24,000.
	14 Occupancy, rent, utilities, and maintenance	14	1,181.
	15 Printing, publications, postage, and shipping	15	7,399.
	16 Other expenses (describe ▶ <u>See Statement 2</u>)	16	4,962.
	17 Total expenses (add lines 10 through 16)	17	37,542.
	18 Excess or (deficit) for the year (line 9 less line 17)	18	14,233.
ASSETS	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	76,532.
	20 Other changes in net assets or fund balances (attach explanation)	20	-195.
	21 Net assets or fund balances at end of year (combine lines 18 through 20)	21	90,570.

Part II Balance Sheets — If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.
 (See Instructions)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	74,878.	92,302.
23 Land and buildings		
24 Other assets (describe ▶ <u>See Statement 4</u>)	2,545.	6,220.
25 Total assets	77,423.	98,522.
26 Total liabilities (describe ▶ <u>See Statement 5</u>)	891.	7,952.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	76,532.	90,570.

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

COPY

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

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See Instructions.)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
SEE ATTACHED LIST OF OFFICERS AND DIRECTORS	0	0.	0.	0.
ALL SERVE WITHOUT BENEFITS ALLOWANCES OR COMPENSATION	0	0.	0.	0.

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

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

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

Corporation Search Results

Officers and Directors

TEXAS JEWELERS ASSOCIATION

[Return to: Corporation Search Results](#)

Officer and director information on this site is obtained from the most recent Public Information Report (PIR) processed by the Secretary of State (SOS). PIRs filed with annual franchise tax reports are forwarded to the SOS. After processing, the SOS sends the Comptroller an electronic copy of the information, which is displayed on this web site. The information will be updated as changes are received from the SOS.

You may order a copy of a Public Information Report from open.records@cpa.state.tx.us or Comptroller of Public Accounts, Open Government Division, PO Box 13528, Austin, Texas 78711.

Title:	Name and Address:	Expiration/Resignation Date:
<i>PRESIDENT</i>	DOUG JACKSON 3625 LAMAR AVE PARIS , TX 75462	
<i>DIRECTOR</i>	DOUG JACKSON 3625 LAMAR AVE PARIS , TX 75462	
<i>DIRECTOR</i>	MARK PRIEST 18 E CONCHO AVE SAN ANGELO , TX 77630	
<i>PRESIDENT</i>	PETER LECODY 777 S CENTRAL EXPWY BLDG 1, STE. 1 RICHARDSON , TX 75081	
<i>DIRECTOR</i>	PETER LECODY 777 S CENTRAL EXPWY BLDG 1, STE. 1 RICHARDSON , TX 75081	
<i>TREASURER</i>	STAN MATHEWS 2670 MACARTHUR DR. ORANGE , TX 77630	
<i>SECRETARY</i>	STAN MATHEWS 2670 MACARTHUR DR. ORANGE , TX 77630	