

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

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

A For the 2006 calendar year, or tax year beginning 3/01/06, and ending 2/28/07

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
 WASHINGTON METROPOLITAN AUTO BODY ASSOCIATION

Number and street (or P O box if mail is not delivered to street address) Room/suite
 P.O. BOX 3157

City or town, state or country, and ZIP + 4
 MECHANICSVILLE VA 23116

D Employer identification number
 52-0907465

E Telephone number
 804-789-9649

F Accounting method: Cash
 Accrual Other (specify)

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 are not applicable to section 527 organizations **I**

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

H(b) If "Yes," enter number of affiliates Yes No

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

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

I Group Exemption Number Yes No

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

G Website: WWW.WMABA.COM

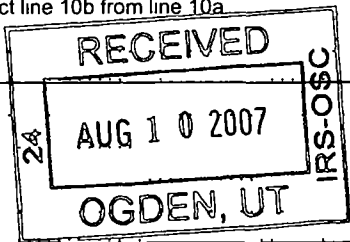
J Organization type (check only one) 501(c) (6) (insert no) 4947(a)(1) or 527

K Check here if the organization is not a 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 Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 125,280

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

Revenue					
1	Contributions, gifts, grants, and similar amounts received.				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	251		
c	Indirect public support (not included on line 1a)	1c			
d	Government contributions (grants) (not included on line 1a)	1d			
e	Total (add lines 1a through 1d) (cash \$ <u>251</u> noncash \$ _____)			1e	251
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	2,905
3	Membership dues and assessments		SEE STATEMENT 1	3	83,865
4	Interest on savings and temporary cash investments			4	2,366
5	Dividends and interest from securities			5	198
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) Subtract line 6b from line 6a			6c	
7	Other investment income (describe _____)			7	
8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
b	Less cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss) Combine line 8c, columns (A) and (B)	8c		8d	
9	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 1b)	9a	35,695		
b	Less direct expenses other than fundraising expenses	9b	25,315		
c	Net income or (loss) from special events Subtract line 9b from line 9a			9c	10,380
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a			10c	
11	Other revenue (from Part VII, line 103)			11	
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	99,965
13	Program services (from line 44, column (B))			13	
14	Management and general (from line 44, column (C))			14	
15	Fundraising (from line 44, column (D))			15	
16	Payments to affiliates (attach schedule)			16	
17	Total expenses. Add lines 16 and 44, column (A)			17	56,186
18	Excess or (deficit) for the year Subtract line 17 from line 12			18	43,779
19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	112,333
20	Other changes in net assets or fund balances (attach explanation)		SEE STATEMENT 2	20	1,928
21	Net assets or fund balances at end of year Combine lines 18, 19, and 20			21	158,040



SCANNED AUG 27 2007

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 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b	Other grants and allocations (attach schedule) STMT 3 (cash \$ <u>301</u> non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	301			
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25a	Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule)				
25b	Compensation of former officers, directors, key employees, etc listed in Part V-B (attach schedule)				
25c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				
26	Salaries and wages of employees not included on lines 25a, b, and c				
27	Pension plan contributions not included on lines 25a, b, and c				
28	Employee benefits not included on lines 25a - 27				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees	600			
32	Legal fees				
33	Supplies	797			
34	Telephone	560			
35	Postage and shipping	537			
36	Occupancy				
37	Equipment rental and maintenance				
38	Printing and publications	640			
39	Travel	920			
40	Conferences, conventions, and meetings	4,230			
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	65			
43	Other expenses not covered above (itemize)				
a	SEE STATEMENT 4	47,536			
b					
c					
d					
e					
f					
g					
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	56,186	0	0	0

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?

▶ SEE STATEMENT 5

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

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

a MONTHLY DINNER MEETINGS, CONFERENCES AND EDUCATIONAL MEETINGS ATTENDED BY APPROXIMATELY 100 AND 400 PERSONS, RESPECTIVELY, LEADING TO RESOLUTION OF COMMON TRADE PROBLEMS AND EXCHANGE OF IDEAS.

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

b THIS ORGANIZATION SUPPORTS NATIONAL ORGANIZATIONS WITH WHOM WE SHARE SIMILIAR GOALS AND PURPOSES.

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

c COST OF MAINTAINING CONTRACTUAL PROFESSIONAL SERVICES TO OPERATE THE ORGANIZATION ON A DAILY BASIS.

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

d ESTABLISHED A FUND TO PROVIDE SCHOLARSHIPS TO QUALIFYING STUDENTS WISHING TO PURSUE CAREERS IN THE AUTO BODY INDUSTRY.

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶ 0

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		45
	46 Savings and temporary cash investments	92,737	46 134,907
	47a Accounts receivable	47a	
	b Less allowance for doubtful accounts	47b	47c
	48a Pledges receivable	48a	
	b Less allowance for doubtful accounts	48b	48c
	49 Grants receivable		49
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (att schedule)		50b
	51a Other notes and loans receivable (attach schedule)	51a	
	b Less allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges		53
	54a Investments—publicly-traded securities SEE STATEMENT 6 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	19,596	54a 21,839
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b
	55a Investments-land, buildings, and equipment basis	55a	
	b Less accumulated depreciation (attach schedule)	55b	55c
	56 Investments-other (attach schedule)		56
57a Land, buildings, and equipment basis	57a 1,359		
b Less accumulated depreciation (attach schedule)	57b 65	57c 1,294	
58 Other assets, including program-related investments (describe ▶)		58	
59 Total assets (must equal line 74) Add lines 45 through 58	112,333	59 158,040	
Liabilities	60 Accounts payable and accrued expenses		60
	61 Grants payable		61
	62 Deferred revenue		62
	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 ▶)		65
66 Total liabilities. Add lines 60 through 65	0	66 0	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		
	67 Unrestricted		67
	68 Temporarily restricted		68
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74		
	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	112,333	72 158,040
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	112,333	73 158,040	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	112,333	74 158,040	

Part VI Other Information (continued)

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		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)		
	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
	83b		
84a	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?	N/A	
	84b		
85	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	
c	Dues, assessments, and similar amounts from members		
	85c	0	
d	Section 162(e) lobbying and political expenditures		
	85d	0	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e	0	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f	0	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
	85g		
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	
	85h		
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12		
	86a		
b	Gross receipts, included on line 12, for public use of club facilities		
	86b		
87	501(c)(12) orgs Enter a Gross income from members or shareholders		
	87a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
	87b		
88a	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
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ ; section 4912 ▶ , section 4955 ▶		
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		
	89b		
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
	89e		
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
	89f		
g	For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
	89g		
90a	List the states with which a copy of this return is filed ▶ DC		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions)	90b	
91a	The books are in care of ▶ JORDAN HENDLER PO Box 3157 Located at ▶ MECHANICSVILLE VA 23116	Telephone no ▶ (804) 789-9649 ZIP + 4 ▶ 23116-0028	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
	91b	Yes	No
			X

Part VI Other Information (continued)

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

91c	Yes	No
		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 MONTHLY MEETINGS					2,455
b PUBLICATION FEES					450
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					83,865
95 Interest on savings and temporary cash investments			14	39	2,327
96 Dividends and interest from securities			14	198	
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					
101 Net income or (loss) from special events			1	10,380	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))			0	10,617	89,097
105 Total (add line 104, columns (B), (D), and (E))					99,714

Note: Line 105 plus line 1e, 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)
▼	SEE STATEMENT 8

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
N/A	%			
	%			
	%			
	%			

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	X	No
Yes	X	No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

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

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	X

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	X

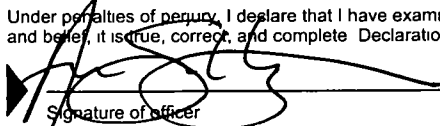
	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

Please Sign Here

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.

Signature of officer:  Date: 8/6/2007

Type or print name and title: AARON SCHULENBURG, TREASURER

Paid Preparer's Use Only

Preparer's signature: JEFFREY A. STOLLER Date: 7/18/07 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: GOODWICH, STOLLER AND ASSOCIATES, INC. 1014 INGLESIDE AVENUE BALTIMORE, MD 21228

EIN: 52-2129161 Preparer's SSN or PTIN (See Gen Instr X): P00000061 Phone no: 410-747-3520

Federal Statements**Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments**

<u>Description</u>	<u>Amount</u>
MEMBERSHIP DUES	\$ <u>83,865</u>
TOTAL	\$ <u><u>83,865</u></u>

Statement 2 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

<u>Description</u>	<u>Amount</u>
UNREALIZED GAIN/LOSS ON INVESTMENTS CARRIED AT FMV	\$ <u>1,928</u>
TOTAL	\$ <u><u>1,928</u></u>

Federal Statements

Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations

Name Address	Date of Gift	Description of Property	Relationship to Org	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
RAINBOW CHILDREN'S HOME	6/20/06	NONE	\$	50	\$	\$		
COLLISION INDUSTRY FOUNDATION	6/20/06	NONE		251				
TOTAL			\$	301	\$	0	\$	0

Federal Statements

Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Mgt & General</u>	<u>Fund- Raising</u>
EXPENSES	\$	\$	\$	\$
MANAGEMENT & ADMINISTRATION	43,551			
NATIONAL DUES	845			
INSURANCE	1,909			
BANK CHARGES	357			
WEBSITE	874			
TOTAL	<u>\$ 47,536</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

Statement 5 - Form 990, Part III - Organization's Primary Exempt Purpose

EDUCATE & EXCHANGE TRADE INFORMATION, WHILE PROVIDING
SCHOLARSHIPS TO STUDENTS INTERESTED IN AN AUTO BODY
CAREER.

Federal Statements

Statement 6 - Form 990, Part IV, Line 54a - Publicly Traded Securities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>
US AND STATE GOVERNMENT CORPORATE STOCK	\$	\$	
ALLSTATE CORPORATION	1,273	1,557	MARKET
VARIOUS NW MUTUTAL FUNDS AND STOCKS	18,323	20,282	MARKET
CORPORATE BONDS			
TOTAL	<u>\$ 19,596</u>	<u>\$ 21,839</u>	

Federal Statements

Statement 7 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
TORCHY CHANDLER 10731 BALTIMORE AVENUE BELTSVILLE MD 20705	PRESIDENT	12	0	0	0
BARRY DORN 8190 MECHANICSVILLE PIKE MECHANICSVILLE MD 23111	VP	4	0	0	0
KRIS BURTON 9204 ENTERPRISE COURT MANASSAS PARK VA 20111	SECRETARY	4	0	0	0
AARON SCHULENBURG 1715 PULASKI HIGHWAY HAVRE DE GRACE MD 21078	TREASURER	10	0	0	0
MIKE ANDERSON 417 E. CLIFFORD AVENUE ALEXANDRIA VA 22305	DIRECTOR	2	0	0	0
DON BEAVER 2600 CRAIN HIGHWAY, BOX 739 GAITHERSBURG MD 20879	DIRECTOR	2	0	0	0
JON DAVIS 9003 KINGS HIGHWAY KING GEORGE VA 22485	DIRECTOR	2	0	0	0
JOHN KRAUSS 103 GORDON ROAD FALLS CHURCH VA 22046	DIRECTOR	2	0	0	0
TIM PFEIFLE 8505 LEESBURG PIKE VIENNA VA 22182	DIRECTOR	2	0	0	0
CHRIS POHANKA 3860 S. FOUR MILE RUN DRIVE	DIRECTOR	2	0	0	0

Federal Statements

52-0907465

Statement 7 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
ARLINGTON VA 22206					
KRIS SHANNON 19310 WOODFIELD ROAD GAITHERSBURG MD 20879	DIRECTOR	2	0	0	0

Statement 8 - Form 990, Part VIII - Relationship of Activities

<u>Line No.</u>	<u>Description</u>
93A	MONTHLY MEETINGS AND OTHER GROUP ACTIVITIES SUCH AS SEMINARS AND CONFERENCES CONTRIBUTE TO THE PROFESSIONAL EDUCATION, KNOWLEDGE AND MORALE OF MEMBERS AND THEIR EMPLOYEES, THEREBY, IMPROVING THE QUALITY OF THE WORK PERFORMED.
93B	MONTHLY TRADE PAPER, "HAMMER & DOLLY", CONTAINS TRADE NEWS, PRODUCTS AND SUPPLY AVAILABILITY AND GENERAL EDUCATION MATERIALS.
94	DUES FROM MEMBERS NEEDED TO MAINTAIN OUR ABILITY TO FUNCTION AS A VIABLE TRADE ORGANIZATION.
95	MODEST INTEREST INCOME IS EARNED ON TEMPORARY UNEXPENDED FUNDS.

Depreciation and Amortization
 (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **WASHINGTON METROPOLITAN AUTO BODY ASSOCIATION** Identifying number **52-0907465**

Business or activity to which this form relates
INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	108,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	430,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2007 Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	65

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2006	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B-Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs		S/L	
h	Residential rental property		27 5 yrs	MM	S/L	
i	Nonresidential real property		27 5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs		S/L	
c	40-year		40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr	22	65
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.