

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2005

Open to Public Inspection

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

A For the 2005 calendar year, or tax year beginning 07-01-2005 and ending 06-30-2006

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: American National Red Cross & Its Constituent Chapters and Branches. Address: 17th D Streets NW, Washington, DC 20006

D Employer identification number: 53-0196605

E Telephone number: (202) 303-4498

F Accounting method: Accrual

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

G Web site: www.redcross.org

J Organization type: 501(c)(3)

K Check here if the organization's gross receipts are normally not more than \$25,000

L Gross receipts: 6,221,188,722

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? H(b) If "Yes" enter number of affiliates. H(c) Are all affiliates included? H(d) Is this a separate return filed by an organization covered by a group ruling? I Group Exemption Number. M Check if the organization is not required to attach Sch B

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

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Gross amount from sales of assets, Special events, Gross sales of inventory, Other revenue, Total revenue, Program services, Management and general, Fundraising, Payments to affiliates, Total expenses, Excess or (deficit) for the year, Net assets at beginning of year, Other changes in net assets, Net assets at end of year.

**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)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22</b>	Grants and allocations (attach schedule) (cash \$ <sup>0</sup> _____ noncash \$ <sup>0</sup> _____ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22</b>			
<b>23</b>	Specific assistance to individuals (attach schedule) <input checked="" type="checkbox"/>	<b>23</b>	2,092,331,717	2,092,331,717	
<b>24</b>	Benefits paid to or for members (attach schedule)	<b>24</b>			
<b>25</b>	Compensation of officers, directors, etc . . . . .	<b>25</b>	2,746,797	582,025	2,164,772
<b>26</b>	Other salaries and wages . . . . .	<b>26</b>	1,282,324,228	1,152,408,349	82,442,595
<b>27</b>	Pension plan contributions . . . . .	<b>27</b>	67,285,984	63,138,880	2,228,036
<b>28</b>	Other employee benefits . . . . .	<b>28</b>	217,120,495	190,689,826	17,993,252
<b>29</b>	Payroll taxes . . . . .	<b>29</b>	101,726,865	93,097,173	5,132,932
<b>30</b>	Professional fundraising fees . . . . .	<b>30</b>	8,344,886		8,344,886
<b>31</b>	Accounting fees . . . . .	<b>31</b>	8,757,170	4,838,843	3,560,471
<b>32</b>	Legal fees . . . . .	<b>32</b>	6,591,509	4,657,771	1,872,702
<b>33</b>	Supplies . . . . .	<b>33</b>	565,112,541	546,523,399	2,926,756
<b>34</b>	Telephone . . . . .	<b>34</b>	35,638,153	32,768,424	1,678,793
<b>35</b>	Postage and shipping . . . . .	<b>35</b>	92,446,278	84,571,012	781,160
<b>36</b>	Occupancy . . . . .	<b>36</b>	116,841,592	110,153,226	3,985,778
<b>37</b>	Equipment rental and maintenance . . . . .	<b>37</b>	65,934,812	63,084,800	1,950,109
<b>38</b>	Printing and publications . . . . .	<b>38</b>	20,569,849	13,676,191	1,043,829
<b>39</b>	Travel . . . . .	<b>39</b>	153,565,238	147,522,201	4,097,358
<b>40</b>	Conferences, conventions, and meetings . . . . .	<b>40</b>	4,866,216	3,197,764	1,000,355
<b>41</b>	Interest . . . . .	<b>41</b>	17,558,752	13,240,028	3,465,382
<b>42</b>	Depreciation, depletion, etc (attach schedule)	<b>42</b>	93,224,914	75,375,352	15,267,253
<b>43</b>	Other expenses not covered above (itemize)				
<b>a</b>	MINOR EQUIPMENT	<b>43a</b>	55,041,088	52,026,433	2,554,852
<b>b</b>	AUTO RENTAL & MAINTENANCE	<b>43b</b>	27,945,629	27,278,594	503,618
<b>c</b>	OTHER CONTRACTUAL SVCS	<b>43c</b>	438,615,158	380,944,375	28,998,898
<b>d</b>	OTHER ASSISTANCE	<b>43d</b>	6,403,045	3,756,089	1,399,278
<b>e</b>		<b>43e</b>			
<b>f</b>		<b>43f</b>			
<b>g</b>		<b>43g</b>			
<b>44</b>	<b>Total functional expenses.</b> Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	5,480,992,916	5,155,862,472	185,048,179

**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 \$4,593,562, (ii) the amount allocated to Program services \$1,843,532, (iii) the amount allocated to Management and general \$397,448, and (iv) the amount allocated to Fundraising \$2,352,582

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

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

What is the organization's primary exempt purpose? <b>▶ HELP PEOPLE PREVENT, PREPARE FOR, AND RESPOND TO EMERGENCIES</b>  All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
<b>a</b> See Statements 1-3  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	5,155,862,472
<b>b</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>c</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>d</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . <input type="checkbox"/>	5,155,862,472

**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	<b>45</b> Cash—non-interest-bearing . . . . .	138,708,916	<b>45</b>	177,557,921
	<b>46</b> Savings and temporary cash investments . . . . .	895,353,431	<b>46</b>	1,354,989,851
	<b>47a</b> Accounts receivable . . . . .	<b>47a</b> 136,421,622		
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>47b</b> 2,674,000	251,806,162	<b>47c</b> 133,747,622
	<b>48a</b> Pledges receivable . . . . .	<b>48a</b> 122,172,952		
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>48b</b> 1,840,785	125,266,651	<b>48c</b> 120,332,167
	<b>49</b> Grants receivable . . . . .		<b>49</b>	
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>50</b>	
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b>		
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>51b</b>		<b>51c</b>
	<b>52</b> Inventories for sale or use . . . . .	152,060,045	<b>52</b>	121,830,730
	<b>53</b> Prepaid expenses and deferred charges . . . . .	87,411,942	<b>53</b>	105,187,020
	<b>54</b> Investments—securities (attach schedule) . . . . .	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54</b>
	<b>55a</b> Investments—land, buildings, and equipment basis . . . . .	<b>55a</b>		
	<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>55b</b>		<b>55c</b>
<b>56</b> Investments—other (attach schedule) . . . . .	1,217,874,829	<b>56</b>	<input checked="" type="checkbox"/> 1,333,560,060	
<b>57a</b> Land, buildings, and equipment basis . . . . .	<b>57a</b> 2,047,457,843			
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>57b</b> 881,667,874	1,098,839,935	<b>57c</b> 1,165,789,969	
<b>58</b> Other assets (describe <input type="checkbox"/> _____ _____ )			<b>58</b>	
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .	3,967,321,911	<b>59</b>	4,512,995,340	
Liabilities	<b>60</b> Accounts payable and accrued expenses . . . . .	385,202,938	<b>60</b>	416,299,011
	<b>61</b> Grants payable . . . . .		<b>61</b>	
	<b>62</b> Deferred revenue . . . . .		<b>62</b>	
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>63</b>	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .	209,629,137	<b>64a</b>	<input checked="" type="checkbox"/> 297,617,555
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .	217,763,337	<b>64b</b>	<input checked="" type="checkbox"/> 133,532,751
	<b>65</b> Other liabilities (describe <input type="checkbox"/> _____ )	508,605,619	<b>65</b>	<input checked="" type="checkbox"/> 479,982,583
<b>66 Total liabilities</b> Add lines 60 through 65 . . . . .	1,321,201,031	<b>66</b>	1,327,431,900	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/></b> and complete lines 67 through 69 and lines 73 and 74			
	<b>67</b> Unrestricted . . . . .	1,319,460,060	<b>67</b>	1,596,067,488
	<b>68</b> Temporarily restricted . . . . .	856,593,727	<b>68</b>	1,095,221,059
	<b>69</b> Permanently restricted . . . . .	470,067,093	<b>69</b>	494,274,893
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/></b> and complete lines 70 through 74			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>72</b>	
	<b>73 Total net assets or fund balances</b> (add lines 67 through 69 <b>or</b> lines 70 through 72, column (A) <b>must</b> equal line 19, column (B) <b>must</b> equal line 21) . . . . .	2,646,120,880	<b>73</b>	3,185,563,440
	<b>74 Total liabilities and net assets / fund balances</b> Add lines 66 and 73 . . . . .	3,967,321,911	<b>74</b>	4,512,995,340

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

Table with 5 main rows (a-e) and sub-rows for adjustments (b1-b4, d1-d2). Total revenue (e) is 5,861,509,376.

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

Table with 5 main rows (a-e) and sub-rows for adjustments (b1-b4, d1-d2). Total expenses (e) is 5,480,992,916.

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

Table with 5 columns: (A) Name and address, (B) Title and average hours per week devoted to position, (C) Compensation (If not paid, enter -0-), (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Row 1 contains 'See Additional Data Table'.

<b>Part V-A Current Officers, Directors, Trustees, and Key Employees</b> <i>(continued)</i>		Yes	No
<b>75a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . . . .	46		
<b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . . . .		<b>75b</b>	No
<b>c</b> Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? <b>Note.</b> Related organizations include section 509(a)(3) supporting organizations If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization		<b>75c</b>	No
<b>d</b> Does the organization have a written conflict of interest policy? . . . . .		<b>75d</b>	Yes

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

<b>Part VI Other Information</b> <i>(See the instructions.)</i>		Yes	No
<b>76</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	<b>76</b>		No
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . . If "Yes," attach a conformed copy of the changes	<b>77</b>	Yes	
<b>78a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	<b>78a</b>	Yes	
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>78b</b>	Yes	
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . .	<b>79</b>		No
<b>80a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . . . .	<b>80a</b>	Yes	
<b>b</b> If "Yes," enter the name of the organization <b>▶</b> <u>PATHOGEN REMOVAL &amp; DIAGNOSTIC TECHNOLOGIES (PRDT)</u> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
<b>81a</b> Enter direct or indirect political expenditures (See line 81 instructions) . . . . .	<b>81a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>81b</b>		No

**Part VI Other Information** *(continued)*

<b>Yes</b>	<b>No</b>
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<b>82a</b>	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? . . . . .	<b>82a</b>	Yes	
<b>b</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) . . . . .	<b>82b</b>	144,912,286	
<b>83a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	<b>83a</b>	Yes	
<b>b</b>	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . . . .	<b>83b</b>	Yes	
<b>84a</b>	Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .	<b>84a</b>		No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>84b</b>		
<b>85</b>	<b>501(c)(4), (5), or (6) organizations.</b> <b>a</b> Were substantially all dues nondeductible by members? . . . . .	<b>85a</b>		
<b>b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	<b>85b</b>		
	If "Yes," was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year			
<b>c</b>	Dues assessments, and similar amounts from members . . . . .	<b>85c</b>		
<b>d</b>	Section 162(e) lobbying and political expenditures . . . . .	<b>85d</b>		
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . .	<b>85e</b>		
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . .	<b>85f</b>		
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . . .	<b>85g</b>		
<b>h</b>	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? . . . . .	<b>85h</b>		
<b>86</b>	<b>501(c)(7) orgs.</b> Enter <b>a</b> Initiation fees and capital contributions included on line 12	<b>86a</b>	0	
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities . . . . .	<b>86b</b>	0	
<b>87</b>	<b>501(c)(12) orgs.</b> Enter <b>a</b> Gross income from members or shareholders . . . . .	<b>87a</b>	0	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	<b>87b</b>	0	
<b>88</b>	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 . . . . .	<b>88</b>	Yes	
<b>89a</b>	<b>501(c)(3) organizations</b> Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> _____ 0, section 4912 <input type="checkbox"/> _____ 0, section 4955 <input type="checkbox"/> _____ 0			
<b>b</b>	<b>501(c)(3) and 501(c)(4) orgs.</b> 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 . . . . .	<b>89b</b>		No
<b>c</b>	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . <input type="checkbox"/> _____			
<b>d</b>	Enter Amount of tax on line 89c, above, reimbursed by the organization . . . . . <input type="checkbox"/> _____			
<b>90a</b>	List the states with which a copy of this return is filed <input type="checkbox"/> _____			
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2005 (See instructions) )	<b>90b</b>	34,900	
<b>91a</b>	The books are in care of <input type="checkbox"/> Financial Management Telephone no <input type="checkbox"/> (202) 303-4498 2025 E STREET NW Located at <input type="checkbox"/> WASHINGTON, DC ZIP + 4 <input type="checkbox"/> 20006			
<b>b</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 <input type="checkbox"/> _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts	<b>91b</b>	Yes	No
<b>c</b>	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country <input type="checkbox"/> _____	<b>91c</b>	Yes	
<b>92</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> _____ and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . <input type="checkbox"/> _____	<b>92</b>		

**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	
<b>93</b> Program service revenue					
<b>a</b> BIOMEDICAL SERVICE					2,165,172,456
<b>b</b> COST RECOVERY					141,686,877
<b>c</b> Fees & Contracts					4,996,732
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies					306,438,671
<b>94</b> Membership dues and assessments . . . . .					
<b>95</b> Interest on savings and temporary cash investments			14	3,390,274	
<b>96</b> Dividends and interest from securities . . . . .			14	85,720,435	
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property . . . . .	331120	-275,440			
<b>b</b> non debt-financed property . . . . .			16	3,851,576	
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory			18	74,605,649	
<b>101</b> Net income or (loss) from special events . . . . .			01	36,583,381	
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue <b>a</b> <u>REBATES</u>					6,830,138
<b>b</b> Charitable Gaming	713200	1,105,259			
<b>c</b> Parking Garage	812930	69,579			
<b>d</b> S-CORP INCOME	512000	5,435			
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .		904,833		204,151,315	2,625,124,874
<b>105</b> Total (add line 104, columns (B), (D), and (E)) . . . . .					2,830,181,022

**Note:** Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Additional Data Table

**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
PATHOGEN REMOVAL & DIAGNOSTIC TECHNOLOGIES PRDT WASHINGTON, DC20006 01-0587732	51 0	RESEARCH&DEVE	0	4,224
	%			
	%			
	%			

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

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
  - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No
- NOTE:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

**Please Sign Here**

Signature of officer: \_\_\_\_\_ Date: 2007-03-08

ROBERT MCDONALD 2025 E STREET, NW  
Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: KPMG LLP  
1660 International Drive  
McLean, VA 221024848

Preparer's SSN or PTIN (See Gen Inst W): \_\_\_\_\_  
EIN: \_\_\_\_\_  
Phone no: \_\_\_\_\_



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

Department of the Treasury  
Internal Revenue Service

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

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

**Supplementary Information—(See separate instructions.)**

**MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2005**

Name of the organization  
American National Red Cross & Its Constituent  
Chapters and Branches

Employer identification number  
53-0196605

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
D Eric Pogue 2025 E ST NW WASHINGTON, DC 20006	SVP, HUMAN RESOURCES 60	287,424	24,452	150,388
Douglas Loock 2025 E ST NW WASHINGTON, DC 20006	VP, SALES & MKTG 60	387,430	44,213	7,925
Theresa Bischoff 150 AMSTERDAM AVE NEW YORK, NY 10023	CEO, ARC-GNY 60	378,159	28,281	3,994
C William Cherry 2025 E ST NW WASHINGTON, DC 20006	SVP, QUALITY & REGUL 60	337,948	32,333	4,935
Rosemary Mackey 150 AMSTERDAM AVE NEW YORK, NY 10023	GNY-CHF BUS & FR OFF 60	325,170	21,348	0
Total number of other employees paid over \$50,000	7,130			

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Chimes Inc 5455 Corporate Drive Suite 303 TROY, MI 48098	Temp staff for IT	12,888,611
Kelly Scott Madison 35 East Wacker Dr 14th Floor CHICAGO, IL 60601	Brand advertising	4,722,317
National Genetics Institute 2311 Pontius Ave LOS ANGELES, CA 90064	Plasma testing	6,242,576
Northrop Grumman 8110 Gatehouse Rd FALLS CHURCH, VA 22042	Biomed computer syst	3,369,812
JP Morgan Securities 277 Park Ave 15th Floor NEW YORK, NY 10172	Investment advisory	2,454,868
Total number of others receiving over \$50,000 for professional services	198	

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SATELLITE SPECIALIZED TRANSPORTAION 102 NW NEWPORT AVE BEND, OR 97701	KATRINA LOGISTICS	30,542,160
ACS EDUCATION SERVICES 1 WORLD TRADE CNTR STE 2200 LONG BEACH, CA 90831	KATRINA CALL CENTER	6,187,417
PATRIOT COMMUNICATIONS LLC 8544 SUNSET BLVD LOS ANGELES, CA 90069	DONATION LINE SUPP	6,183,600
GRIZZARD COMMUNICATIONS GROUP 229 PEACHTREE ST NE SUITE 900 ATLANTA, GA 30303	DIRECT MAIL CAMPAIGN	5,492,110
QUICK NTERNATIONAL COURIER POBOX 35417 NEWARK, NJ 07193	BLOOD TRANSPORTATION	4,212,544
Total number of other contractors receiving over \$50,000 for other services	247	

<b>Part III Statements About Activities</b> (See page 2 of the instructions.)		<b>Yes</b>	<b>No</b>
<b>1</b>	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>1,073,286</u> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B ) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		
<b>2</b>	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.) <input type="checkbox"/>		
<b>a</b>	Sale, exchange, or leasing property?	<b>2a</b>	No
<b>b</b>	Lending of money or other extension of credit?	<b>2b</b>	No
<b>c</b>	Furnishing of goods, services, or facilities?	<b>2c</b>	No
<b>d</b>	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<b>2d</b>	Yes
<b>e</b>	Transfer of any part of its income or assets?	<b>2e</b>	No
<b>3a</b>	Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments )	<b>3a</b>	No
<b>b</b>	Do you have a section 403(b) annuity plan for your employees?	<b>3b</b>	Yes
<b>c</b>	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	<b>3c</b>	No
<b>4a</b>	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	<b>4a</b>	No
<b>b</b>	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>4b</b>	No

<b>Part IV Reason for Non-Private Foundation Status</b> (See pages 3 through 6 of the instructions.)									
The organization is not a private foundation because it is (Please check only <b>ONE</b> applicable box )									
<b>5</b>	<input type="checkbox"/> A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)								
<b>6</b>	<input type="checkbox"/> A school Section 170(b)(1)(A)(ii) (Also complete Part V )								
<b>7</b>	<input type="checkbox"/> A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)								
<b>8</b>	<input type="checkbox"/> A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)								
<b>9</b>	<input type="checkbox"/> A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) <b>Enter the hospital's name, city, and state</b> ▶ _____								
<b>10</b>	<input type="checkbox"/> 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 <b>Support Schedule</b> in Part IV-A)								
<b>11a</b>	<input checked="" type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the <b>Support Schedule</b> in Part IV-A)								
<b>11b</b>	<input type="checkbox"/> A community trust Section 170(b)(1)(A)(vi) (Also complete the <b>Support Schedule</b> in Part IV-A)								
<b>12</b>	<input type="checkbox"/> An organization that normally receives <b>(1) more than 33 1/3%</b> of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and <b>(2) no more than 33 1/3%</b> of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the <b>Support Schedule</b> in Part IV-A )								
<b>13</b>	<input type="checkbox"/> An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in <b>(1)</b> lines 5 through 12 above, or <b>(2)</b> sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) Check the box that describes the type of supporting organization ▶ <input type="checkbox"/> Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> Type 3								
Provide the following information about the supported organizations (see page 5 of the instructions )									
<table border="1"> <thead> <tr> <th>(a) Name(s) of supported organization(s)</th> <th>(b) Line number from above</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>		(a) Name(s) of supported organization(s)	(b) Line number from above						
(a) Name(s) of supported organization(s)	(b) Line number from above								
<b>14</b>	<input type="checkbox"/> An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions )								

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12 ) **Use cash method of accounting.**

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants See line 28 )	1,362,357,642	617,696,293	651,720,797	1,809,562,971	4,441,337,703
<b>16</b> Membership fees received					0
<b>17</b> 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	2,374,227,467	2,356,731,558	2,272,786,165	2,165,324,233	9,169,069,423
<b>18</b> 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	81,172,924	69,770,838	76,746,531	87,597,998	315,288,291
<b>19</b> Net income from unrelated business activities not included in line 18					0
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
<b>21</b> 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 public without charge					0
<b>22</b> Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	8,193,896	18,691,238	27,168,897	20,731,837	74,785,868
<b>23</b> Total of lines 15 through 22	3,825,951,929	3,062,889,927	3,028,422,390	4,083,217,039	14,000,481,285
<b>24</b> Line 23 minus line 17	1,451,724,462	706,158,369	755,636,225	1,917,892,806	4,831,411,862
<b>25</b> Enter 1% of line 23	38,259,519	30,628,899	30,284,224	40,832,170	
<b>26 Organizations described on lines 10 or 11:</b>					
<b>a</b> Enter 2% of amount in column (e), line 24					<b>26a</b> 96,628,237
<b>b</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 2001 through 2004 exceeded the amount shown in line 26a <b>Do not file this list with your return.</b> Enter the total of all these excess amounts					<b>26b</b>
<b>c</b> Total support for section 509(a)(1) test Enter line 24, column (e)					<b>26c</b> 4,831,411,862
<b>d</b> Add Amounts from column (e) for lines 18 315,288,291 19 0 22 26b					<b>26d</b> 390,074,159
<b>e</b> Public support (line 26c minus line 26d total)					<b>26e</b> 4,441,337,703
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 91 93 %
<b>27 Organizations described on line 12:</b>					
<b>a</b> For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " <b>Do not file this list with your return.</b> Enter the sum of such amounts for each year (2004) (2003) (2002) (2001)					
<b>b</b> For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals ) <b>Do not file this list with your return.</b> After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2004) (2003) (2002) (2001)					
<b>c</b> Add Amounts from column (e) for lines 15 16 17 20 21					<b>27c</b>
<b>d</b> Add Line 27a total and line 27b total					<b>27d</b>
<b>e</b> Public support (line 27c total minus line 27d total)					<b>27e</b>
<b>f</b> Total support for section 509(a)(2) test Enter amount from line 23, column (e)					<b>27f</b>
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b>
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b>
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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 <b>Do not file this list with your return.</b> Do not include these grants in line 15					

**Part V Private School Questionnaire** (See page 7 of the instructions.)**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	<b>29</b>	
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	<b>30</b>	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )	<b>31</b>	
<hr/>		
<hr/>		
<hr/>		
<b>32</b> Does the organization maintain the following	<b>32a</b>	
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?	<b>32d</b>	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		
<hr/>		
<hr/>		
<b>33</b> Does the organization discriminate by race in any way with respect to	<b>33a</b>	
<b>a</b> Students' rights or privileges?	<b>33a</b>	
<b>b</b> Admissions policies?	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff?	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance?	<b>33d</b>	
<b>e</b> Educational policies?	<b>33e</b>	
<b>f</b> Use of facilities?	<b>33f</b>	
<b>g</b> Athletic programs?	<b>33g</b>	
<b>h</b> Other extracurricular activities?	<b>33h</b>	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )		
<hr/>		
<hr/>		
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency?	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	<b>34b</b>	
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	<b>35</b>	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)  
(To be completed ONLY by an eligible organization that filed Form 5768)Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked "a" and "limited control" provisions apply**Limits on Lobbying Expenditures**

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

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)		
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)		
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)		0
<b>39</b>	Other exempt purpose expenditures		
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39)		0
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table— <b>If the amount on line 40 is—</b> <b>The lobbying nontaxable amount is—</b> Not over \$500,000                                      20% of the amount on line 40 Over \$500,000 but not over \$1,000,000        \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000     \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000    \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000                                    \$1,000,000		
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)		
<b>43</b>	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36		0
<b>44</b>	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38		0

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots nontaxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

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

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

	Yes	No	Amount
<b>a</b> Volunteers	Yes		
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.)	Yes		
<b>c</b> Media advertisements	Yes		5,889
<b>d</b> Mailings to members, legislators, or the public	Yes		90,937
<b>e</b> Publications, or published or broadcast statements	Yes		138,008
<b>f</b> Grants to other organizations for lobbying purposes	Yes		50,000
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body	Yes		636,779
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means	Yes		151,673
<b>i</b> Total lobbying expenditures (Add lines c through h.)			1,073,286

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

**Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 11 of the instructions.)

**51** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a** Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
- (ii) Other assets

**b** Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities, equipment, or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations

**c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees

**d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
<b>51a(i)</b>		No
<b>a(ii)</b>		No
<b>b(i)</b>		No
<b>b(ii)</b>		No
<b>b(iii)</b>		No
<b>b(iv)</b>		No
<b>b(v)</b>		No
<b>b(vi)</b>		No
<b>c</b>		No

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

**52a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Yes  No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

# TY 2005 General Explanation Attachment

**Name:** American National Red Cross & Its Constituent Chapters and Branches

**EIN:** 53-0196605

Identifier	Return Reference	Explanation
PART III		<p>American National Red Cross and June 30, 2006 Its Constituent Chapters and Branches 53-0196605 IRS Form 990 PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS (a) Disaster Services \$ 2,485,854,361 (b) Armed Forces Emergency Services 54,094,555 (c) Community Services 133,466,201 (d) Health and Safety Services 224,593,133 (e) Biomedical Services 2,103,571,893 (f) International Services 154,282,329 TOTAL \$ 5,155,862,472</p> <p>===== Description of Services Provided (a) Disaster Services The organization responded to 46 large-scale disasters in fiscal year 2006, including Hurricanes Katrina, Rita and Wilma as well as tropical storms, floods and tornadoes Through its network of more than 800 local chapters in all 50 states, as well as offshore U S territories and possessions in the Caribbean and the Pacific, the Red Cross responded to a total of over 74,000 disasters large and small The organization provided food, lodging, health services, crisis interventions and community mental-health debriefings and/or other related emergency care to persons in need The services of the American Red Cross began with safe shelters for evacuees and continued as families mapped and traveled their road to recovery The number of trained disaster staff that provided these services in the national Disaster Services Human Resources System was approximately 56,000 in FY 2006 Chapters throughout the country trained thousands more to respond to disasters within the boundaries of their own communities Disaster Services includes services provided through the Liberty Disaster Relief Fund On September 11, 2001, terrorist attacks on the United States considerably increased the number and scope of services provided by the American Red Cross to relief workers, families of victims and others directly impacted by the attacks Due to the significant response by the American Red Cross, and to help ensure greater public accountability, a separate Liberty Disaster Relief Fund was established for the monetary and in-kind contributions provided to support American Red Cross services to terrorism victims The services provided to date have been determined by the immediate and long term needs of those directly affected The Liberty Disaster Relief Fund continues to provide long term services such as financial assistance, mental health and health services, cash management and other specialized programs (b) Armed Forces Emergency Services The organization provides military members, veterans, and their families with emergency communications, assistance in obtaining financial assistance for expenses related to emergency travel or personal crisis and other vital services at U S military installations worldwide (c) Community Services American Red Cross chapters offer community services that help people lead safer, healthier lives and allow for greater self-reliance These services include meal delivery to housebound residents, food pantries, rides to medical appointments, homeless shelters, transitional housing, caregiver education and support groups, friendly visitors, Lifeline , hospital / nursing home volunteers, fuel assistance, latchkey programs and language banks (d) Health and Safety Services The organization trains people to prevent, prepare for and respond to emergencies Courses include first aid, CPR/AED training, HIV/AIDS prevention education, aquatics and water safety, and caregiving courses such as babysitter's training (e) Biomedical Services The organization collects, tests, and distributes nearly half of the nation's blood and blood components and operates 35 regional blood service centers throughout the country In fiscal year 2006, the organization collected over 6 million productive units of blood from over 4 million donors and supplied 2,900 hospitals and other facilities with blood and blood products for transfusion (f) International Services The organization helps at risk people around the world, prevent, prepare for, and response to disasters, complex humanitarian emergencies, and life-threatening health conditions through global initiatives and community-based programs With a focus on global health, disaster preparedness and response, restoring family links, and the dissemination of international humanitarian law , the organization provides rapid, effective, and large-scale humanitarian assistance to those in need To achieve our goals, the organization works with our partners in the International Red Cross and Red Crescent Movement and other international relief and development agencies to build local capacities, mobilize and empower communities, and establish partnerships Our largest program is currently the Tsunami Recovery Program which is improving community health and preventing disease outbreaks, supporting communities as they rebuild their lives and reestablish their livelihoods, and helping affected Red Cross and Red Crescent Societies and their communities develop disaster preparedness capabilities</p>

Identifier	Return Reference	Explanation
PART I - LINE 8		<p>American National Red Cross and June 30, 2006 Its Constituent Chapters and Branches 53-0196605 IRS Form 990</p> <p>PART I - LINE 8 SALE OF SECURITIES AND OTHER ASSETS Securities Net Gain \$20,868,051 The gain or loss from sale of securities was shown on a net basis in the Consolidated Financial Statements Other Assets Net Gain \$53,737,598 Part I, Line 8 under "Other" details the proceeds from sale of fixed assets (less nominal expenses) and the net book value of assets sold The American National Red Cross fiscal policy provides for capitalization of land, buildings and major equipment and recognition of depreciation, except on land, as a current cost of operation Accordingly, land, buildings, land and building improvements, and major equipment are carried separately on the balance sheet of the national sector and of each affected chapter having custody of these fixed assets Generally, fixed assets are defined as any item with a useful life of three or more years that costs more than \$2,500 These fixed assets (excluding land) are depreciated monthly on a straight line basis over their estimated useful lives The useful lives established as a corporate standard for fixed assets provide 10 years for land improvements and generally 45 years for buildings For major equipment, the useful life is generally 3 to 15 years Fixed assets are recorded at cost, or, if donated, at their fair market value at time of acquisition Title to all real property owned by the organization is vested in "The American National Red Cross," but the property under the custody of each chapter is carried on its books and annual depreciation is recorded together with any liabilities against the property Prior approval by national headquarters is required for the purchase, sale or major improvement of the property The financial position and results of operations of chapters and regional blood services are included in the Consolidated Financial Statements of the American Red Cross which are audited by KPMG LLP, independent certified public accountants, and by the U S Army Audit Agency The consolidated financial statements are used as the basis for the preparation of Form 990 for the organization In view of the size of the organization and decentralization of the financial records of the national sector and some one thousand chapters with fixed assets, it is not feasible to present the detail called for in the schedules designated in Part II, Line 42, and Part IV, Line 57</p>



Identifier	Return Reference	Explanation
SCHEDULE A, PART III - LINE 1		American National Red Cross and June 30, 2006 Its Constituent Chapters and Branches 53-0196605 IRS Form 990 SCHEDULE A, PART III - LINE 1 STATEMENT ABOUT ACTIVITIES The American National Red Cross does not contribute to or participate in election campaigns It does not endorse candidates for elective office nor does it publish or distribute information that directly or indirectly endorses or opposes a candidate The American National Red Cross does, from time to time, present written and oral testimony at legislative hearings, communicate with legislators and their staffs, and issue public statements related to pending legislation These activities are generally limited to areas in which it has a recognized expertise (such as blood banking, public health, disaster mitigation, and non-profit tax exemption)

Identifier	Return Reference	Explanation
SCHEDULE A, PART III - LINE 3		<p>American National Red Cross and June 30, 2006 Its Constituent Chapters and Auxiliaries 53-0196605 IRS Form 990 SCHEDULE A, PART III - LINE 3 DISBURSEMENT IN FURTHERANCE OF CHARITABLE PROGRAMS AND GRANTS Pursuant to the Congressional Charter of the American National Red Cross (36 U S C 3 Fifth), the organization carries out a system of national and international relief to mitigate or prevent suffering caused by disasters Disaster victims qualify to receive such assistance based on either obvious circumstances, such as apparent need for food, clothing or shelter, or a casework process in which the nature and extent of the disaster-caused needs for Red Cross aid are determined in the light of other available resources and the ability of the victims to assist themselves Contributions to other organizations consist primarily of those made to the International Committee of the Red Cross, the Federation of Red Cross and Red Crescent Societies and national Red Cross societies of other countries Contributions may be made for a variety of purposes, including regular financial support and disaster relief assistance The American Red Cross has ongoing relationships with all such Red Cross organizations which are governed by humanitarian principles and qualify for such assistance Pursuant to its Congressional Charter (36 U S C 3 Fourth), the American National Red Cross also acts in matters of voluntary relief and in accord with the military authorities to provide communications and welfare assistance to members of the Armed Forces of the United States, their families and veterans Assistance to this group is determined generally on the basis of their military, veteran or dependent status and the particular needs related thereto as revealed through casework and similar means No member of, or contributor to, the Red Cross is eligible for any of the above types of assistance not available to persons who are not members of, or contributors to, the Red Cross, and no account is taken or records maintained as to whether recipients are members of, or contributors to, the Red Cross or related to corporate directors, officers, employees or donors Employees of the American National Red Cross are eligible for limited financial assistance to further their educations, and its employees serving overseas are eligible for limited financial assistance to help defray the costs of schooling of their dependents at overseas locations Former employees who retire with low benefits may be assisted from a special fund In all instances, eligibility for the assistance is based on the needs of the individual employee concerned</p>

Identifier	Return Reference	Explanation
Part VI	Form 990, Part VI, Questions 91b and 91c	Question 91b - Countries where Organization has an interest in or signature or other authority over a financial account in a foreign country Albania, Bulgaria, Ecuador, Colombia, Honduras, El Salvador, Dominican Republic, Mexico, Cambodia, India, Vietnam, Kenya, South Africa, Nigeria, Sri-Lanka, Indonesia, and Maldives Question 91c - Countries outside the United States where Organization maintained an office Thailand, Indonesia, Sri Lanka, India, Vietnam, Cambodia, Russia, Albania, China, Kenya, Tanzania, Ecuador, Dominican Republic, Haiti, El Salvador, Columbia, Mexico, and Maldives

Identifier	Return Reference	Explanation
OFFICER COMPENSATION SCHEDULE	FORM 990, PART II, LINE 25 - OFFICER COMPENSATION SCHEDULE	<p>THE FOLLOWING SCHEDULE BREAKS OUT OFFICER COMPENSATION BY FUNCTIONAL EXPENSE CATEGORY SEE STATEMENTS 21-27 FOR FURTHER INFORMATION ON COMPENSATION OF THE OFFICERS PROGRAM MANAGEMENT OFFICER NAME AND TYPE OF COMPENSATION SERVICE AND GENERAL =====</p> <p>MARSHA EVANS, PRESIDENT AND CEO COLUMN C COMPENSATION 640,488 COLUMN D EMPLOYEE BENEFITS AND SEVERANCE 539,719 COLUMN E EXPENSE ACCOUNT 3,604 MS EVANS' TERM AS PRESIDENT &amp; CEO ENDED ON DECEMBER 12, 2005 COLUMN C INCLUDES \$247,500 OF SEVERANCE RECEIVED PRIOR TO JUNE 30, 2006, COLUMN D INCLUDES \$514,038 OF SEVERANCE TO BE RECEIVED AFTER JUNE 30, 2006 JOHN F MCGUIRE, EVP &amp; INTERIM CEO COLUMN C COMPENSATION 220,011 220,011 COLUMN D EMPLOYEE BENEFITS 16,417 16,417 COLUMN E EXPENSE ACCOUNT 1,755 1,755 EXECUTIVE VP &amp; CEO, BIOMEDICAL SERVICES FROM 07/01/05 - 12/12/05, INTERIM PRESIDENT &amp; CEO FROM 12/13/05 - 06/30/06 MARY ELCANO, GENERAL COUNSEL &amp; SECRETARY COLUMN C COMPENSATION 341,355 COLUMN D EMPLOYEE BENEFITS 19,106 COLUMN E EXPENSE ACCOUNT 4,185 ALAN MCCURRY, EVP CHAPTER &amp; INTL COLUMN C COMPENSATION 341,355 COLUMN D EMPLOYEE BENEFITS 19,106 COLUMN E EXPENSE ACCOUNT 4,185 ROBERT P MCDONALD, CFO COLUMN C COMPENSATION 339,503 COLUMN D EMPLOYEE BENEFITS 32,755 COLUMN E EXPENSE ACCOUNT 5,875 -----</p> <p>TOTALS 582,025 2,164,772 =====</p>

## TY 2005 Individual Assistance Schedule

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

Class of Activity	Amount
Disaster Relief	1,957,029,329
International Services	120,021,917
Community Services	12,339,621
Armed Forces Emergency Services	2,940,850

**TY 2005 Investments - Other Schedule**

**Name:** American National Red Cross & Its Constituent  
 Chapters and Branches

**EIN:** 53-0196605

Description	Book Value	Cost/FMV
Other investments	1,333,560,060	F

## TY 2005 Mortgages and Notes Payable Schedule

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

**Total Mortgage Amount:** 133532751

<b>Item No.</b>	1
<b>Lender's Name</b>	various
<b>Lender's Title</b>	
<b>Relationship to Insider</b>	
<b>Original Amount of Loan</b>	
<b>Balance Due</b>	133532751
<b>Date of Note</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security Provided by Borrower</b>	
<b>Purpose of Loan</b>	
<b>Description of Lender Consideration</b>	
<b>Consideration FMV</b>	

## TY 2005 Other Changes in Net Assets Schedule

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

Description	Amount
NET UNREALIZED GAINS ON INVESTMENTS	64,456,100
CHANGE IN MINIMUM PENSION LIABILITY	94,470,000



**TY 2005 Other Expenses Included Schedule**

**Name:** American National Red Cross & Its Constituent  
 Chapters and Branches

**EIN:** 53-0196605

Description	Amount
RENTAL EXPENSE	2,200,079

## TY 2005 Other Liabilities Schedule

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

Description	Beginning of Year Amount	End of Year Amount
Postretirement benefits	388,910,000	337,750,000
Other liabilities	119,695,619	142,232,583

**TY 2005 Other Revenues Included Schedule**

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

<b>Description</b>	<b>Amount</b>
RENTAL EXPENSE	2,200,079

## TY 2005 Special Events Schedule

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

Event Name	Gross Receipts	Contributions	Gross Revenue	Direct Expense	Net Income (Loss)
OTHER SPECIAL EVENTS	49,180,558		49,180,558	15,115,835	34,064,723
ARC in Greater New York	2,292,961		2,292,961	489,783	1,803,178
ARC of Greater Palm Beach Area	1,705,598		1,705,598	1,139,606	565,992
ARC OF SOUTHEASTERN VIRGINIA	1,574,197		1,574,197	1,424,709	149,488

### TY 2005 Tax-Exempt Bond Liabilities Schedule

**Name:** American National Red Cross & Its Constituent Chapters and Branches

**EIN:** 53-0196605

<b>Item No.</b>	1
<b>Name of Issue</b>	
<b>Purpose</b>	REAL ESTATE - NHQ JEFF. PARK
<b>Amount Outstanding</b>	24100000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2020-09
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	2
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - NHQ Holland Lab
<b>Amount Outstanding</b>	7000000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2015-12
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	3
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Penn-Jersey RBS
<b>Amount Outstanding</b>	7200000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2024-02
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	4
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Greater Chesapea
<b>Amount Outstanding</b>	4225000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2019-03
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	5
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - NHQ Penn Jersey
<b>Amount Outstanding</b>	4950000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2024-02
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	6
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - New England RBS
<b>Amount Outstanding</b>	2349000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2013-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	7
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - South Carolina R
<b>Amount Outstanding</b>	1891680
<b>Unexpended Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2017-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	8
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Heart of America
<b>Amount Outstanding</b>	1900000
<b>Unexpended Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2025-12
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	9
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Fort Wayne RBS
<b>Amount Outstanding</b>	1788363
<b>Unexpended Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2017-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	10
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - SE Pennsylvania
<b>Amount Outstanding</b>	1200000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2019-02
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	11
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Rochester Monroe
<b>Amount Outstanding</b>	1780000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2019-07
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	12
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - NE Pennsylvania
<b>Amount Outstanding</b>	1286000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2017-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	



<b>Item No.</b>	13
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Arkansas RBS & P
<b>Amount Outstanding</b>	1164000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2017-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	14
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Midwest RBS
<b>Amount Outstanding</b>	800000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2013-06
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	15
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Westchester Coun
<b>Amount Outstanding</b>	1200000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2022-05
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	16
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Lehigh Valley Ch
<b>Amount Outstanding</b>	845000
<b>Unexpended Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2019-12
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	17
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Johnstown RBS
<b>Amount Outstanding</b>	501000
<b>Unexpended Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2018-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	18
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Central Illinois
<b>Amount Outstanding</b>	300000
<b>Unexpended Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2025-12
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	19
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Central South Ca
<b>Amount Outstanding</b>	360320
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2017-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	20
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Allen Wells Chap
<b>Amount Outstanding</b>	34637
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2017-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	21
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - NHQ Leasing
<b>Amount Outstanding</b>	4100000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2009-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	22
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Missouri-Illinoi
<b>Amount Outstanding</b>	3125000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2013-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	23
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Heart of America
<b>Amount Outstanding</b>	57701
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	24
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Puerto Rico RBS
<b>Amount Outstanding</b>	108000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	25
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Puerto Rico Chap
<b>Amount Outstanding</b>	36254
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	26
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Nassau County
<b>Amount Outstanding</b>	1387000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2032-11
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	27
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Seattle-King Cou
<b>Amount Outstanding</b>	240000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2008-01
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	28
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - South Central AI
<b>Amount Outstanding</b>	1430000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2019-02
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	29
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Rochester Monroe
<b>Amount Outstanding</b>	12000000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2030-04
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	30
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Minneapolis Chap
<b>Amount Outstanding</b>	3175000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2028-09
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	31
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - NHQ Washington D
<b>Amount Outstanding</b>	93500000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2025-11
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	32
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Jersey Coast Cha
<b>Amount Outstanding</b>	1780000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2030-11
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	33
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Greater Chicago
<b>Amount Outstanding</b>	8000000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2032-02
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	34
<b>Name of Issue</b>	
<b>Purpose</b>	NHQ Washington DC
<b>Amount Outstanding</b>	11500000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2025-11
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	35
<b>Name of Issue</b>	
<b>Purpose</b>	Greenwich Connecticut Chapter
<b>Amount Outstanding</b>	2303600
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2035-12
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	36
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - NHQ California B
<b>Amount Outstanding</b>	40000000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2034-09
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	



<b>Item No.</b>	37
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - NHQ Cambria Bloo
<b>Amount Outstanding</b>	20000000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2035-09
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

<b>Item No.</b>	38
<b>Name of Issue</b>	
<b>Purpose</b>	Real Estate - Greater New York
<b>Amount Outstanding</b>	30000000
<b>Unexpeded Bond Proceeds</b>	
<b>Third Party Use</b>	
<b>Space Percentage</b>	
<b>Maturity Date</b>	2036-02
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security</b>	

## TY 2005 Employee Compensation Explanation

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

Employee	Explanation
D Eric Pogue	COLUMN E INCLUDES CLOSING COSTS OF \$146,798.
Douglas Loock	PERIOD OF SERVICE WITH THE AMERICAN RED CROSS ENDED 2/10/06, COLUMN C INCLUDES AN INCENTIVE BONUS OF \$106,527, COLUMN C INCLUDES \$72,489 OF SEVERANCE RECEIVED PRIOR TO 6/30/06, COLUMN D INCLUDES \$8,055 OF SEVERANCE TO BE RECEIVED AFTER 6/30/06.
Theresa Bischoff	COLUMN C INCLUDES A PERFORMANCE BONUS OF \$60,000.
C William Cherry	
Rosemary Mackey	COLUMN C INCLUDES A PERFORMANCE BONUS OF \$53,000.

**TY 2005 Non Electing Public Charities Statement**

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

**Statement:** THE AMERICAN NATIONAL RED CROSS PARTICIPATES IN LOBBYING AND OTHER PUBLIC POLICY ADVOCACY ACTIVITIES AT THE FEDERAL AND STATE LEVEL (WITHIN THE LIMITS SET BY IRS REGULATIONS) ON ISSUES THAT ARE RELATED TO THE ORGANIZATION'S MISSION INCLUDING: BIOMEDICAL SERVICES AND RESEARCH; HOMELAND SECURITY, PREPAREDNESS, RESPONSE AND DISASTER MITIGATION; PUBLIC HEALTH AND SAFETY; EMERGENCY COMMUNICATIONS SERVICES TO THE ARMED FORCES; INTERNATIONAL SERVICES; AND THE REGULATION OF NONPROFIT ORGANIZATIONS. THESE ACTIVITIES INCLUDE PREPARING AND PRESENTING WRITTEN AND ORAL TESTIMONY AT LEGISLATIVE HEARINGS AND EXECUTIVE BRANCH ADVISORY COMMITTEE MEETINGS; COMMUNICATING WITH POLICYMAKERS AND THEIR STAFFS AT MEETINGS AND BRIEFINGS; AND ISSUING PUBLIC STATEMENTS RELATED TO PENDING LEGISLATION AND REGULATION. THE AMERICAN NATIONAL RED CROSS DOES NOT CONTRIBUTE TO OR PARTICIPATE IN ELECTION CAMPAIGNS. IT DOES NOT ENDORSE CANDIDATES FOR ELECTIVE OFFICE, NOR DOES IT PUBLISH OR DISTRIBUTE INFORMATION THAT DIRECTLY OR INDIRECTLY ENDORSES OR OPPOSES A CANDIDATE.

## TY 2005 Other Income Schedule

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

Description	2003	2002	2001	2000	Total
PURCHASES, REFUNDS, ETC	6,568,547	16,445,523	14,778,912	8,920,269	46,713,251
CHARITABLE GAMING	1,347,127	1,904,858	12,111,669	11,578,081	26,941,735
PARKING GARAGE	220,381	278,878	240,091	233,487	972,837
S-CORPORATION INCOME	57,841	61,979	38,225		158,045

**TY 2005 Self Dealing Statement**

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

Line Number	Explanation
2d	FORM 990, PART V

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2005 Supplemental Support Schedule

**Name:** American National Red Cross & Its Constituent  
Chapters and Branches

**EIN:** 53-0196605

Year	Gifts, Grants and Contributions Received	Membership Fees Received	Gross Receipts From Admissions, Etc.	Gross Investment Income And Post 1975UBI	Net UBI Pre 1975	Tax Revenues Levied For Organization's Benefit	Value Of Services, Facilities Furnished By Government	Other Income	Total
2005	1,362,357,642		2,374,227,467	81,172,924				8,193,896	3,825,951,929
2004	617,696,293		2,356,731,558	69,770,838				18,691,238	3,062,889,927
2003	651,720,797		2,272,786,165	76,746,531				27,168,897	3,028,422,390
2002	1,809,562,971		2,165,324,233	87,597,998				20,731,837	4,083,217,039

**Additional Data****Software ID:****Software Version:****EIN:** 53-0196605**Name:** American National Red Cross & Its Constituent Chapters and Branches**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
Bonnie McElveen-Hunter 2025 E St NW WASHINGTON,DC 20006	Chairman 25	0		
Marsha Evans 2025 E St NW WASHINGTON,DC 20006	President and CEO 60	640,488	539,719	3,604
John F McGuire 2025 E St NW WASHINGTON,DC 20006	EVP & INTERIM CEO 60	440,022	32,833	3,510
Mary Elcano 2025 E St NW WASHINGTON,DC 20006	GNRL Counsel/SECRETARY 60	341,355	19,106	4,185
Kathryn A Forbes 2025 E St NW WASHINGTON,DC 20006	Nat Chair of Volunt 60	0		
Alan McCurry 2025 E St NW WASHINGTON,DC 20006	EVP, CHAPTER & INTL 60	309,013	31,829	3,000
Robert P McDonald 2025 E St NW WASHINGTON,DC 20006	CFO 60	339,503	32,755	5,875
Gina F Adams 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Cesar A Aristeiguieta 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Sanford A Belden 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
John L Braxton 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Julie Burger 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Steven E Carr 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Wei-Tih Cheng 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Michael Chertoff 2025 E St NW WASHINGTON,DC 20006	Board Member 1	0		
M Victoria Cummock 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Brian L Derksen 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Douglas H Ditrlick 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Richard M Fountain 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Allan I Goldberg 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		



**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

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James G Goodwin 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Carlos M Gutierrez 2025 E St NW WASHINGTON,DC 20006	Board Member 1	0		
Susan B Hassmiller 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Michael W Hawkins 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Joyce N Hoffman 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
James F Holmes 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Judith Richards Hope 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Ann F Kaplan 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
R Bruce LaBoon 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Sherry Lansing 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
Anna Maria Larsen 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
William Lucy 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Allen W Mathies 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
William F McConnell 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
R James Nicholson 2025 E St NW WASHINGTON,DC 20006	Board Member 1	0		
Richard M Niemiec 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Ross H Ogden 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Peter Pace 2025 E St NW WASHINGTON,DC 20006	Board Member 1	0		
Theodore R Parrish 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Laurence E Paul 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
Joseph B Pereles 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Condoleezza Rice 2025 E St NW WASHINGTON,DC 20006	Board Member 1	0		
Melanie R Sabelhaus 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
H Marshall Schwarz 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Glenn A Sieber 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Brian G Skotko 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Robert L Smolen 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Margaret Spellings 2025 E St NW WASHINGTON,DC 20006	Board Member 1	0		
E Francine Stokes 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		
Walter E Thornton 2025 E St NW WASHINGTON,DC 20006	Board Member 8	0		

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Christine K Wilkinson 2025 E St NW WASHINGTON, DC 20006	Board Member 8	0		
Steven H Wunning 2025 E St NW WASHINGTON, DC 20006	Board Member 8	0		

**Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:**

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).
93A	DISTRIB OF TESTED BLOOD PRODUCTS TO HOSPITALS CONTRIBUTED TO
0	THE SAFETY & AVAILABILITY OF THE US BLOOD SUPPLY IN
0	EMERGENCY SITUATIONS
93B	MATERIALS & TEXTBOOKS FOR FIRST AID, HEALTH, AND ACCIDENT
0	PREVENTION TO HELP PEOPLE PREVENT, PREPARE FOR AND HANDLE
0	EMERGENCIES
93C	AIDS EDUCATION AND RESEARCH AND RELATED DISASTER AND HEALTH
0	SERVICES PROGRAMS
93G	FEMA REIMBURSEMENTS, AIDS EDUCATION AND RESEARCH, AND
0	RELATED DISASTER HEALTH SERVICES PROGRAMS
103B	REBATES ON MATERIALS AND TEXTBOOKS FOR FIRST AID, HEALTH,
0	AND ACCIDENT PREVENTION TO HELP PEOPLE PREVENT, PREPARE FOR,
0	AND HANDLE EMERGENCIES

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2005, or tax year beginning 07/01, 2005, and ending 06/30, 2006

2005

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

See instructions on back.

Department of the Treasury Internal Revenue Service

Name of exempt organization

Employer identification number

AMERICAN NATIONAL RED CROSS & ITS CONSTITUENT CHAPTERS AND BRANCHES

53-0196605

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b whichever is applicable, blank (i.e. do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

Table with 5 rows (1a-5a) and 2 columns (Form type, Amount). Row 1a: Form 990 check here [X], Total revenue, if any (Form 990, line 12) 5,861,509,376.

Part II Declaration of Officer

6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(s) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(s).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2005 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund(s) and, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here: Signature of officer (Robert J. ...), Date, Title (Chief Financial Officer)

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Publication 4206, Information for Authorized IRS e-file Providers for Exempt Organization Filings. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only: ERO's signature (Scott M. ...), Date (3/8/07), Check if also paid preparer [X], Check if self-employed [ ], ERO's SSN or PTIN (P00451522), Firm's name (KPMG LLP), address (1660 INTERNATIONAL DRIVE, MCLEAN, VA), Phone no. (703-286-8000), EIN (13-5565207)

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only: Preparer's signature, Date, Check if self-employed [ ], Preparer's SSN or PTIN, Firm's name, address, and ZIP code, Phone no.