A :*• **Organization Exempt Under Section 501(c)(3)**

OMB No. 1545-0047

990-EZ) **(Except Private Foundation) and Section** 50He). **501** (f), **501** (k), 501 (n), **or** 4947(a)(l)

**Nonexempt Charitable Trust**

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

**2007**

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

-i- ;; :-

**Employer identification number**

T-TTAIN WRESTLING

33-1071711

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

.'See page 1 o( the instructions. List each one. If there are none, enter "None.")

| M "o^e 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 |
|---|---|---|---|---|
| | | | | |
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| | | | | |
| | | | | |
| ~~a -j-nberof other employees paid over $50,000 *• | | | | |

PartIM* Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

| (a) Name and address of each independent contractor paid more than $50.000 | (b) Type of service | (c) Compensation |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| oca) number of others receiving over $50,000 for : T_=5 :~al services ..... *• | f | |

**?art li-Bj Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

| '-. - (a) Name and address of each independent contractor paid more than $50,000 | (b) Type of service | (c) Compensation |
|---|---|---|
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| | | |
| •B Tjnce- of other contractors receiving over : : .″-.- ;5-vices ..... ^ | | |