

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)

Department of the Treasury
Internal Revenue Service

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

A For the 2006 calendar year, or tax year beginning 10/01, 2006, and ending 09/30/2007

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending.
C Name of organization: AMNESTY INTERNATIONAL USA INC
D Employer identification number: 52-0851555
E Telephone number: (212) 807-8400
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).

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? No
H(b) If "Yes," enter number of affiliates
H(c) Are all affiliates included? No
H(d) Is this a separate return filed by an organization covered by a group ruling? No
I Group Exemption Number: 9240
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: WWW.AMNESTYUSA.ORG
J Organization type (check only one): 501(c)(3)
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.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: 60,067,591.

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

Table with 21 rows and 4 columns. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue; 3 Membership dues; 4 Interest on savings; 5 Dividends; 6 Gross rents; 7 Other investment income; 8 Gross amount from sales of assets; 9 Special events; 10 Gross sales of inventory; 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets at beginning; 20 Other changes; 21 Net assets at end of year.

COPY FOR PUBLIC INSPECTION

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

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>11,736,222.</u> noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	11,736,222.	11,736,222.	STMT 2	
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)	1,458,558.	959,999.	313,323.	185,236.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)				
c 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	8,811,175.	7,092,793.	147,956.	1,570,426.
27 Pension plan contributions not included on lines 25a, b, and c	459,211.	339,244.	10,156.	109,811.
28 Employee benefits not included on lines 25a - 27	1,401,903.	1,152,889.	48,706.	200,308.
29 Payroll taxes	717,253.	570,628.	18,142.	128,483.
30 Professional fundraising fees	2,761,845.			2,761,845.
31 Accounting fees	70,536.		70,536.	
32 Legal fees	152,111.		75,531.	76,580.
33 Supplies	227,337.	176,444.	9,996.	40,897.
34 Telephone	857,756.	735,136.	65,026.	57,594.
35 Postage and shipping	587,099.	541,428.	16,353.	29,318.
36 Occupancy	2,445,447.	1,929,937.	94,757.	420,753.
37 Equipment rental and maintenance	324,025.	247,679.	14,865.	61,481.
38 Printing and publications	1,229,811.	1,069,309.	14,985.	145,517.
39 Travel	1,869,935.	1,572,963.	67,605.	229,367.
40 Conferences, conventions, and meetings				
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)	463,371.	324,360.	78,773.	60,238.
43 Other expenses not covered above (itemize):				
a OTHER PROFESSIONAL FEES	2,287,564.	1,670,050.		617,514.
b INSURANCE	121,821.	86,395.	20,052.	15,374.
c BANK SERVICE CHARGES	588,419.	412,707.	99,570.	76,142.
d ADVERTISING/PUBLI./SUBSCR	300,667.	236,786.	10,262.	53,619.
e DIRECT PRODUCTION COSTS	1,619,426.	59,310.	11,664.	1,548,452.
f JOINT PRODUCTION COSTS	6,363,736.	5,975,697.		388,039.
g MISCELLANEOUS EXPENSES	314,748.	283,312.	13,098.	18,338.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	47,169,976.	37,173,288.	1,201,356.	8,795,332.

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 \$ 6,363,736. ; (ii) the amount allocated to Program services \$ 5,975,697. ;
 (iii) the amount allocated to Management and general \$ NONE ; and (iv) the amount allocated to Fundraising \$ 388,639.

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)		(B)
		Beginning of year		End of year
Assets	45 Cash - non-interest-bearing	1,288,460.	45	1,007,583.
	46 Savings and temporary cash investments	2,359,557.	46	2,261,392.
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b		47c
	48a Pledges receivable	48a 4,332,273.		
	b Less: allowance for doubtful accounts	48b 721,901.	4,882,920.	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) (attach schedule)			50b
	51a Other notes and loans receivable (attach schedule)	51a 750,000.		
	b Less: allowance for doubtful accounts	51b	750,000.	51c 750,000.
	52 Inventories for sale or use		386,728.	52 650,938.
	53 Prepaid expenses and deferred charges		963,244.	53 1,583,637.
	54a Investments - publicly-traded securities <input type="checkbox"/> STMT 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		19,953,764.	54a 23,517,940.
	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 <input type="checkbox"/> STMT 8 <input type="checkbox"/> Cost <input type="checkbox"/> FMV	57a 6,663,931.			
b Less: accumulated depreciation (attach schedule)	57b 5,734,520.	1,288,784.	57c 929,411.	
58 Other assets, including program-related investments (describe <input type="checkbox"/> STMT 9)		37,489.	58 48,129.	
59 Total assets (must equal line 74). Add lines 45 through 58		31,910,946.	59 34,359,402.	
Liabilities	60 Accounts payable and accrued expenses		4,006,962.	60 3,102,399.
	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 <input type="checkbox"/> STMT 10	1,400,000.	2,000,000.
	65 Other liabilities (describe <input type="checkbox"/> STMT 11)		7,204,178.	65 7,624,210.
	66 Total liabilities. Add lines 60 through 65		12,611,140.	66 12,726,609.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		8,761,666.	67 13,357,663.
	68 Temporarily restricted		8,626,973.	68 6,338,963.
	69 Permanently restricted		1,911,167.	69 1,936,167.
	Organizations that do not follow SFAS 117, check here <input 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			72
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)		19,299,806.	73 21,632,793.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		31,910,946.	74 34,359,402.	

Part VI Other Information (continued)

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? 82a 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 7,199,765.
83a Did the organization comply with the public inspection requirements for returns and exemption applications? 83a X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 83b X
84a Did the organization solicit any contributions or gifts that were not tax deductible? 84a N/A
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 84b N/A
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 85a N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? 85b N/A
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.
c Dues, assessments, and similar amounts from members 85c N/A
d Section 162(e) lobbying and political expenditures 85d N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? 85g N/A
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? 85h N/A
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a N/A
b Gross receipts, included on line 12, for public use of club facilities 86b N/A
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a N/A
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A
88b 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 88a 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 88b X
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 NONE ; section 4912 NONE ; section 4955 NONE
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 X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 NONE
d Enter: Amount of tax on line 89c, above, reimbursed by the organization NONE
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 89e X
f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89f X
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? 89g N/A
90a List the states with which a copy of this return is filed SEE STATEMENT 17
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.) 90b 166
91a The books are in care of GORDON SINGH Telephone no. 212-633-4239
Located at AIUSA, 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY ZIP +4 10001
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)? 91b X
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.

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? Yes No
 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 | N/A

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 LITERATURE & MERC. SALES					543,301.
b CONFERENCE FEES					148,265.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	659,112.	
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			18	1,909,853.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b LIST RENTAL					187,339.
c EVENTS			01	224,935.	
d MISCELLANEOUS			01	144,719.	
e					
104 Subtotal (add columns (B), (D), and (E))				2,938,619.	878,905.
105 Total (add line 104, columns (B), (D), and (E))					3,817,524.

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).
93A	TO DISSEMINATE INFORMATION TO THE MEMBERS AND GENERAL PUBLIC
93B	TO TRAIN STUDENTS AND OTHER HUMAN RIGHTS ACTIVISTS
103B	TO RAISE THE CONSCIENCE OF THE PUBLIC BY RECOGNIZING THOSE WHO WORKED TIRELESSLY FOR THE CAUSE OF HUMAN RIGHTS.

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
	%			
	%			
	%			
	%			

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).

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
	N/A	

	(A) Name, address, of each controlled entity	(B) Employer Identification 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
	N/A	

	(A) Name, address, of each controlled entity	(B) Employer Identification 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
	N/A	

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

_____ Date _____
 Signature of officer

 Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. X) P00037219
Firm's name (or yours if self-employed), address, and ZIP + 4	EIN		13-5381590
BDO SEIDMAN, LLP 330 MADISON AVENUE NEW YORK, NY 10017-5001	Phone no.		212-885-8000

SCHEDULE A
(Form 990 or 990-EZ)

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

2006

Name of the organization

AMNESTY INTERNATIONAL USA INC

Employer identification number

52-0851555

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 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
SEE STATEMENT 18				
Total number of other employees paid over \$50,000 . . ▶	71			

Part II-A 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
SEE STATEMENT 19		
Total number of others receiving over \$50,000 for professional services ▶	6	

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 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
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶	NONE	

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

Schedule A (Form 990 or 990-EZ) 2006

Part III Statements About Activities (See page 2 of the instructions.)

Table with 3 columns: Question, Yes, No. Rows include: 1. Lobbying activities (Yes: X, No:); 2. Substantial contributors (Yes: , No:); 2a-e. Other activities (Yes: , No: X); 3a-d. Grants and services (Yes: , No: X); 4a-c. Donor advised funds (Yes: , No: X); 4d-f. Assets and distributions (Yes: , No: NONE).

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a 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 **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) **more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) **no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III - Functionally Integrated Type III - Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 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.

Table with columns: Calendar year (or fiscal year beginning in), (a) 2005, (b) 2004, (c) 2003, (d) 2002, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends; 19 Net income from unrelated business activities; 20 Tax revenues levied; 21 Value of services or facilities furnished; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12.

Part V Private School Questionnaire (See page 9 of the instructions.) NOT APPLICABLE
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	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?	29	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31	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.) ----- ----- -----	31	
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
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.	34b	
35	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	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 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		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	1,229.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	203,293.
38	Total lobbying expenditures (add lines 36 and 37)	38	204,522.
39	Other exempt purpose expenditures	39	38,170,122.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	38,374,644.
41	Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is -		
	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	41	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		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	250,000.
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

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 13 of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
46 Lobbying ceiling amount (150% of line 45(e))					6,000,000.
47 Total lobbying expenditures	204,522.	202,688.	183,356.	244,206.	834,772.
48 Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
49 Grassroots ceiling amount (150% of line 48(e))					1,500,000.
50 Grassroots lobbying expenditures	1,229.	1,190.	2,667.	3,758.	8,844.

Part VI-B Lobbying Activity by Nonelecting Public Charities

NOT APPLICABLE

(For reporting only by organizations that did not complete Part VI-A) (See page 13 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
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

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

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2006

Name of organization

AMNESTY INTERNATIONAL USA INC

Employer identification number

52-0851555

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule - see instructions.)

General Rule -

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules -

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2006)

Name of organization AMNESTY INTERNATIONAL USA INC	Employer identification number 52-0851555
---	---

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		1,496,471.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		1,280,628.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
7		1,002,762.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES
=====

DESCRIPTION -----	AMOUNT -----
UNREALIZED GAINS ON INVESTMENTS	1,159,862.
TOTAL	----- 1,159,862. =====

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

=====

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
-----	-----	-----	-----
GRANTS PAID			
=====			
AMNESTY INTERNATIONAL LTD 1 EASTON STREET WC1X 0DW LONDON UNITED KINGDOM	NONE 501(C)(3) EQUIVALENT	ANNUAL ASSESSMENT FOR THE SUPPORT OF THE PROGRAM ACTIVITIES OF AMNESTY INTERNATIONAL LTD.	11,736,222.
		TOTAL CONTRIBUTIONS PAID	11,736,222.
			=====

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

=====

AMNESTY INTERNATIONAL OF THE USA, INC IS THE U.S. SECTION OF AMNESTY INTERNATIONAL LIMITED, A WORLDWIDE MOVEMENT OF PEOPLE WHO CAMPAIGN FOR INTERNATIONALLY RECOGNIZED HUMAN RIGHTS. AIUSA'S MISSION IS TO ACT IN CONCERT WITH THE INTERNATIONAL HUMAN RIGHTS MOVEMENT, WITHIN THE CONTEXT OF ITS WORK TO PROMOTE ALL PROVISIONS IN THE UNIVERSAL DECLARATION OF HUMAN RIGHTS.

FORM 990, PART III - PROGRAM SERVICE ACCOMPLISHMENTS

PROGRAM SERVICE ACCOMPLISHMENT A

COMMUNICATIONS AND PUBLICATIONS - THE PURPOSE OF THIS PROGRAM IS TO INFORM THE VOLUNTEER MEMBERSHIP, MEDIA, POLICYMAKERS AND PUBLIC AT-LARGE OF AIUSA'S RESEARCH, RECOMMENDATIONS AND INITIATIVES TO END HUMAN RIGHT VIOLATIONS. WE EMPLOY AN ARRAY OF TACTICS, INCLUDING ONLINE COMMUNICATIONS AND ORGANIZING, MEDIA RELATIONS, VISIBILITY PROJECTS, AND PUBLICATION OF REPORTS, INCLUDING THE ANNUAL REPORT. ADDITIONALLY, TELEVISION AND RADIO STATIONS THROUGHOUT THE UNITED STATES CONTRIBUTE SIGNIFICANT AMOUNTS OF AIRTIME FOR PUBLIC SERVICE ANNOUNCEMENTS, WHICH INFORM VIEWERS AND LISTENERS ABOUT THE WORK OF AIUSA. WE PUBLISH AMNESTY INTERNATIONAL, A QUARTERLY FOUR-COLOR NEWS MAGAZINE TO INFORM AND INSPIRE READERS TO TAKE ACTION ON HUMAN RIGHTS ISSUES.

PROGRAM SERVICE ACCOMPLISHMENT B

INTERNATIONAL - SUPPORTS RESEARCH INTO HUMAN RIGHTS VIOLATIONS WORLDWIDE AND THE COORDINATION OF INTERNATIONAL EFFORTS TO STOP THEM. THE LARGEST COMPONENT OF THIS PROGRAM IS THE ANNUAL ASSESSMENT PAID TO THE INTERNATIONAL SECRETARIAT TO FUND ITS RESEARCH AND ACTIONS TO PREVENT AND END GRAVE ABUSES OF THE RIGHTS TO PHYSICAL AND MENTAL INTEGRITY, FREEDOM OF CONSCIENCE AND EXPRESSION, AND FREEDOM FROM DISCRIMINATION. ALSO INCLUDED ARE SUPPORT FOR INTERNATIONAL MEMBERSHIP AND PROGRAM DEVELOPMENT EFFORTS AND PARTICIPATION IN INTERNATIONAL MEETINGS FURTHERING THE GOALS OF THE MOVEMENT.

PROGRAM SERVICE ACCOMPLISHMENT C

MEMBERSHIP PROGRAMS - RESPONSIBLE FOR PROGRAMS WHICH DEVELOP THE CAPACITY OF AIUSA MEMBERS AND SUPPORTERS AND ALLIES TO BRING PRESSURE TO BEAR ON PERPETRATORS OF HUMAN RIGHTS ABUSE AND THOSE WHO HELP THEM COORDINATE THE WORK. THE PURPOSE OF THIS PROGRAM IS TO COORDINATE THE WORK OF A BROAD-BASED MEMBERSHIP OF APPROXIMATELY 360,000. VOLUNTEERS ARE AT THE CORE OF ALL OF AIUSA'S WORK SO THE RECRUITMENT, TRAINING AND ONGOING SUPPORT OF VOLUNTEER LEADERS ARE CENTRAL TO THE ORGANIZATION'S GROWTH AND DEVELOPMENT. OTHER PROGRAMS PROVIDE RESOURCE DEVELOPMENT (VIDEOS, ORGANIZING

FORM 990, PART III - PROGRAM SERVICE ACCOMPLISHMENTS

=====

PACKETS, MANUALS), ONGOING SUPPORT AND OUTREACH TO YOUTH, CAMPUS AND LOCAL COMMUNITY GROUPS; AND FIELD ORGANIZING AND SPECIAL EVENT PLANNING. PLANNING AND IMPLEMENTATION OF FIVE REGIONAL CONFERENCES AND THE ANNUAL GENERAL MEETING FOR THE ORGANIZATION ARE ALSO A PART OF THIS DEPARTMENT'S RESPONSIBILITIES.

PROGRAM SERVICE ACCOMPLISHMENT D

CAMPAIGNS AND ACTIONS - TAKES THE LEAD IN DEVELOPING THIS SECTION'S HUMAN RIGHTS STRATEGY AND CARRYING OUT THE SPECIALIZED TASKS NECESSARY FOR THE IMPLEMENTATION OF THOSE STRATEGIES. IT ALSO RESPONDS TO AND MOBILIZES MEMBERSHIP TO INFLUENCE STATE AND NON-STATE ACTORS TO SUPPORT AND PROTECT HUMAN RIGHTS. ACTIVISTS AND STAFF WORK ON URGENT ACTIONS; INTERACT WITH AND SPEAK OUT TO POLICY- AND OPINION-MAKERS; AND UNDERTAKE A RANGE OF MAJOR CAMPAIGNS, COUNTRY ACTIONS, AND CORPORATE APPROACHES.

FORM 990, PART IV - OTHER NOTES AND LOANS RECEIVABLE

=====

BORROWER: AMNESTY INTERNATIONAL LIMITED
 INTEREST RATE: 6.000000
 MATURITY DATE: 07/06/2008
 RELATIONSHIP: AFFILIATED ORGANIZATION

BEGINNING BALANCE DUE	750,000.
ENDING BALANCE DUE	750,000.

TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE	750,000.
--	----------

=====

TOTAL ENDING OTHER NOTES AND LOANS RECEIVABLES	750,000.
--	----------

=====

FORM 990, PART IV - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	COST OR FMV -----
MARKETABLE DEBT SECURITIES	7,338,490.	FMV
MARKETABLE EQUITY SECURITIES	12,360,250.	FMV
MUTUAL FUNDS	3,819,200.	FMV

TOTALS	23,517,940.	
	=====	

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT
 =====

FIXED ASSET DETAIL

ACCUMULATED DEPRECIATION DETAIL

ASSET DESCRIPTION	METHOD/ CLASS	FIXED ASSET DETAIL				ACCUMULATED DEPRECIATION DETAIL			
		BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE
FURNITURE&FIXTURES	SL	1,725,416.			1,725,416.	1,588,311.	65,778.		1,654,089.
OFFICE EQUIPMENT	SL	3,485,357.			3,485,357.	3,085,349.	267,797.		3,353,146.
LEASEHOLD IMPROV	SL	1,453,158.			1,453,158.	597,489.	129,796.		727,285.
TOTALS		6,663,931.			6,663,931.	5,271,149.			5,734,520.

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
SECURITY DEPOSITS	48,129.
TOTALS	----- 48,129. =====

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE

=====

LENDER: JP MORGAN CHASE BANK
 ORIGINAL AMOUNT: 2,000,000.
 INTEREST RATE: 9.250000
 MATURITY DATE: 03/03/2008
 SECURITY PROVIDED: MARKETABLE EQUITY SECURITIES
 PURPOSE OF LOAN: LINE OF CREDIT

BEGINNING BALANCE DUE	1,400,000.
ENDING BALANCE DUE	2,000,000.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	1,400,000.
	=====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	2,000,000.
	=====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
ASSESSMENT FEE DUE TO I/S	3,737,562.
GIFT ANNUITY PAYABLE	3,101,681.
DUE TO N. CAGE CAMPAIGN	750,000.
OTHER LIABILITIES	34,967.
TOTALS	----- 7,624,210. =====

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

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
LARRY COX 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	EXECUTIVE DIRECTOR 35.00	215,000.	30,491.	NONE
CURTIS GOERING 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	SR. DEPUTY EXECUTIVE DIRECTOR 35.00	180,300.	27,700.	NONE
JULIE HERTZOG (THRU 08-2007) 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	CHIEF OPERATING OFFICER 35.00	178,263.	18,836.	NONE
CATHERINE CARPENTIERI (THRU 08-2007) 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	DEVELOPMENT DED 35.00	159,800.	26,265.	NONE
KAREN SCHNEIDER (THRU 08-2007) 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	COMMUNICATIONS DED 35.00	135,952.	24,521.	NONE
MILA ROSENTHAL 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	RESEARCH AND POLICY DED 35.00	123,600.	23,730.	NONE

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

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
LEO GIVS (THRU 08-2007) 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	MEMBERSHIP MOBILIZATION DED 35.00	136,617.	24,642.	NONE
GERALD A LEMELLE (THRU 08-2007) 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	ADVOCACY DED 35.00	128,750.	24,091.	NONE
ELLEN DORSEY 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	CHAIR 10.00	NONE	NONE	NONE
MAYRA GOMEZ 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	INTERNATIONAL COMMITTEE CHAIR 10.00	NONE	NONE	NONE
JEFF BACHMAN 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	VICE CHAIR 10.00	NONE	NONE	NONE
STEVE ABRAMS 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	TREASURER 10.00	NONE	NONE	NONE

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

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
SIMON BILLENNESS 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	GENERAL SECRETARY 10.00	NONE	NONE	NONE
KARIMA BENNOUNE 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
RACHEL FOWLER 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
RICK HALPERIN 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
SHAHRAM HASHEMI 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
TRAM NGUYEN 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	EXEC COMMITTEE MEMBER AT LARGE 10.00	NONE	NONE	NONE

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

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
DENNIS NURKSE 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
PHYLLIS PAUTRAT 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
LISA SCHWEBEL 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
JASON SENGHEISER 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
ANIKET SHAH 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	EXEC COMMITTEE MEMBER AT LARGE 10.00	NONE	NONE	NONE
BRET THIELE 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
ERICK VELIZ	BOARD MEMBER 10.00	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001				
DIEGO ZAVALA 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	BOARD MEMBER 10.00	NONE	NONE	NONE
	GRAND TOTALS	1,258,282.	200,276.	NONE

FORM 990, PART VI, LINE 90A - STATES
=====

AL, AZ, CA, CO, CT, FL, GA,
IL, KS, KY, ME, MD, MA, MI, MS, MO, NH, NJ,
NY, NC, ND, OH, OR, PA, RI, SC, TN, UT, WA, WI,

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

=====

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCOUNT -----
ALEXANDRA M ARRIAGA 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	GOVT RELATIONS DIR 35.00	113,071.	22,994.	NONE
VIVIANNE LEE POTTER 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	DIRECT RESPONSE DIR 35.00	112,615.	22,895.	NONE
JOSHUA RUBENSTEIN 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	NORTHEAST REGION DIR 35.00	112,615.	22,675.	NONE
GWEN FITZGERALD 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	MEDIA RELATIONS DIR 35.00	112,615.	22,247.	NONE
LESLEY A EDINBORO 5 PENN PLAZA, 16TH FLOOR NEW YORK, NY 10001	I/T DIRECTOR 35.00	109,886.	22,771.	NONE
	TOTAL COMPENSATION	----- 560,802. =====	----- 113,582. =====	----- NONE =====

SCH. A, PART II-A COMPENSATION OF THE 5 HIGHEST PAID FOR PROF. SERV.

=====

COMMUNITY COUNSELING SERVICES P. O. BOX 27462 NEW YORK, NY 10087-7462	FUNDRAISING	508,000.
OMP FUNDRAISING 1133 19TH STREET, NW WASHINGTON, DC 20036	FUNDRAISING	259,200.
LA PIANA ASSOCIATES 440 GRAND AVENUE OAKLAND, CA 94610	STRATEGIC PLANNING	233,225.
DONOR DIGITAL 182 SECOND STREET SAN FRANCISCO, CA 94105	ONLINE FUNDRAISING	124,296.
LAB COMMUNICATIONS 500 PROFESSIONAL CENTER DRIVE NOVATO, CA 94947	MARKETING & ADVERT.	109,000.

TOTAL COMPENSATION	----- 1,233,721. =====
--------------------	------------------------------

SCHEDULE A, PART IV-A - OTHER INCOME

=====

DESCRIPTION	2005	2004	2003	2002	TOTAL
-----	-----	-----	-----	-----	-----
LIST RENTAL	161,561.	221,587.	236,168.	239,484.	858,800.
MISCELLANEOUS INCOME	348,064.	805,823.	621,340.	370,924.	2,146,151.
	-----	-----	-----	-----	-----
TOTALS	509,625.	1,027,410.	857,508.	610,408.	3,004,951.
	=====	=====	=====	=====	=====

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ **Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).**

OMB No. 1545-0092

2006

Name of estate or trust

Employer identification number

AMNESTY INTERNATIONAL USA INC

52-0851555

Note: Form 5227 filers need to complete **only** Parts I and II.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

	(a) Description of property (Example: 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 35)	(f) Gain or (Loss) for the entire year (col. (d) less col. (e))
1						
2	Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824					2
3	Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts					3
4	Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2005 Capital Loss Carryover Worksheet					4 ()
5	Net short-term gain or (loss). Combine lines 1 through 4 in column (f). Enter here and on line 13, column (3) below					5

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

	(a) Description of property (Example: 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 35)	(f) Gain or (Loss) for the entire year (col. (d) less col. (e))
6	SEE STATEMENT 1			13,634,343.	11,724,490.	1,909,853.
7	Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824					7
8	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts					8
9	Capital gain distributions					9
10	Gain from Form 4797, Part I					10
11	Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2005 Capital Loss Carryover Worksheet					11 ()
12	Net long-term gain or (loss). Combine lines 6 through 11 in column (f). Enter here and on line 14a, column (3) below					12 1,909,853.

Part III Summary of Parts I and II

Caution: Read the instructions before completing this part.

	(1) Beneficiaries' (see page 36)	(2) Estate's or trust's	(3) Total
13 Net short-term gain or (loss)	13		
14 Net long-term gain or (loss):			
a Total for year	14a		1,909,853.
b Unrecaptured section 1250 gain (see line 18 of the worksheet on page 36).	14b		
c 28% rate gain.	14c		
15 Total net gain or (loss). Combine lines 13 and 14a	15		1,909,853.

Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4. If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2006

Part IV Capital Loss Limitation

16 Enter here and enter as a (loss) on Form 1041, line 4, the **smaller** of:
a The loss on line 15, column (3) **or**
b \$3,000

16	()
-----------	-----

*If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22, is a loss, complete the **Capital Loss Carryover Worksheet** on page 39 of the instructions to determine your capital loss carryover.*

Part V Tax Computation Using Maximum Capital Gains Rates (Complete this part **only** if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), **and** Form 1041, line 22 is more than zero.)

Note: *If line 14b, column (2) or line 14c, column (2) is more than zero, complete the worksheet on page 38 of the instructions and skip Part V. Otherwise, go to line 17.*

17 Enter taxable income from Form 1041, line 22	17		
18 Enter the smaller of line 14a or 15 in column (2) but not less than zero	18		
19 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2)	19		
20 Add lines 18 and 19	20		
21 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶	21		
22 Subtract line 21 from line 20. If zero or less, enter -0-	22		
23 Subtract line 22 from line 17. If zero or less, enter -0-	23		
24 Enter the smaller of the amount on line 17 or \$2,050	24		
25 Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 through 27; go to line 28 and check the "No" box. <input type="checkbox"/> No. Enter the amount from line 23	25		
26 Subtract line 25 from line 24	26		
27 Multiply line 26 by 5% (.05)			27
28 Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 28 through 31; go to line 32. <input type="checkbox"/> No. Enter the smaller of line 17 or line 22	28		
29 Enter the amount from line 26 (If line 26 is blank, enter -0-)	29		
30 Subtract line 29 from line 28	30		
31 Multiply line 30 by 15% (.15)			31
32 Figure the tax on the amount on line 23. Use the 2006 Tax Rate Schedule on page 23 of the instructions			32
33 Add lines 27, 31, and 32			33
34 Figure the tax on the amount on line 17. Use the 2006 Tax Rate Schedule on page 23 of the instructions			34
35 Tax on all taxable income. Enter the smaller of line 33 or line 34 here and on line 1a of Schedule G, Form 1041			35

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

AMNESTY INTERNATIONAL USA INC

Identifying number

52-0851555

Business or activity to which this form relates

GENERAL 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	
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	
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	463,371.

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	
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		39 yrs.	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	463,371.
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	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No
(a) Type of property (list vehicles first) (b) Date placed in service (c) Business/investment use percentage (d) Cost or other basis (e) Basis for depreciation (business/investment use only) (f) Recovery period (g) Method/Convention (h) Depreciation deduction (i) Elected section 179 cost
25 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25
26 Property used more than 50% in a qualified business use: % % %
27 Property used 50% or less in a qualified business use: % % % S/L - S/L - S/L -
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)
31 Total commuting miles driven during the year
32 Total other personal (noncommuting) miles driven
33 Total miles driven during the year. Add lines 30 through 32
34 Was the vehicle available for personal use during off-duty hours? Yes No Yes No Yes No Yes No Yes No Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?
36 Is another vehicle available for personal use?

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? Yes No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners
39 Do you treat all use of vehicles by employees as personal use?
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Code section (e) Amortization period or percentage (f) Amortization for this year
42 Amortization of costs that begins during your 2006 tax year (see instructions):
43 Amortization of costs that began before your 2006 tax year 43
44 Total. Add amounts in column (f). See the instructions for where to report 44

