

AMENDED RETURN

Form **990**

**Return of Organization Exempt From Income Tax**

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

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

OMB No. 1545-0047  
**2006**  
Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

**A For the 2006 calendar year, or tax year beginning 2006, and ending**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization ITHAKA HARBORS, INC.	<b>D</b> Employer identification number 30-0152775
	Number and street (or P O box if mail is not delivered to street address) Room/suite 151 EAST 61ST STREET	<b>E</b> Telephone number (212) 500-2600
	City or town, state or country, and ZIP + 4 NEW YORK, NY 10065	<b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)
	Please use IRS label or print or type. See Specific Instructions.	

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?  Yes  No  
 H(b) If "Yes," enter number of affiliates: N/A  
 H(c) Are all affiliates included? (If "No," attach a list. See instructions.)  Yes  No  
 H(d) Is this a separate return filed by an organization covered by a group ruling?  Yes  No

G Website WWW.ITHAKA.ORG

J Organization type (check only one)  501(c)(03) (insert no) 4947(a)(1) or 527

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

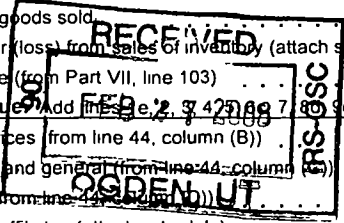
I Group Exemption Number N/A

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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 18,527,441.

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

		SCHEDULE B	
Revenue	1 Contributions, gifts, grants, and similar amounts received		
	a Contributions to donor advised funds	1a	
	b Direct public support (not included on line 1a)	1b	9,296,469.
	c Indirect public support (not included on line 1a)	1c	
	d Government contributions (grants) (not included on line 1a)	1d	1,990,576.
	e Total (add lines 1a through 1d) (cash \$ 10,187,045. noncash \$ 1,100,000.)	1e	11,287,045.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	5,206,505.
	3 Membership dues and assessments	3	
	4 Interest on savings and temporary cash investments	4	1,425,188.
	5 Dividends and interest from securities	5	
	6 a Gross rents	6a	
	b Less rental expenses	6b	
c Net rental income or (loss) Subtract line 6b from line 6a	6c		
7 Other investment income (describe)	7		
8 a Gross amount from sales of assets other than inventory	(A) Securities	8a	
	(B) Other	8b	
	b Less cost or other basis and sales expenses	8c	
	d Net gain or (loss) Combine line 8c, columns (A) and (B)	8d	
9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>			
a Gross revenue (not including \$ of contributions reported on line 1b)	9a		
b Less direct expenses other than fundraising expenses	9b		
c Net income or (loss) from special events Subtract line 9b from line 9a	9c		
10 a Gross sales of inventory, less returns and allowances	10a		
b Less cost of goods sold	10b		
c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c		
11 Other revenue (from Part VII, line 103)	11	608,703.	
12 Total revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	18,527,441.	
Expenses	13 Program services (from line 44, column (B))	13	18,321,060.
	14 Management and general (from line 44, column (B))	14	1,192,108.
	15 Fundraising (from line 44, column (B))	15	
	16 Payments to affiliates (attach schedule)	16	
	17 Total expenses Add lines 13 and 14, column (A)	17	19,513,168.
Net Assets	18 Excess or (deficit) for the year Subtract line 17 from line 12	18	-985,727.
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	32,921,004.
	20 Other changes in net assets or fund balances (attach explanation)	20	
	21 Net assets or fund balances at end of year Combine lines 18, 19, and 20	21	31,935,277.



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

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## Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>23</b> Specific assistance to individuals (attach schedule)				
<b>24</b> Benefits paid to or for members (attach schedule)				
<b>25a</b> Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule)	666,823.	495,171.	171,652.	
<b>25b</b> Compensation of former officers, directors, key employees, etc listed in Part V-B (attach schedule)				
<b>25c</b> 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)				
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c	5,801,249.	5,721,583.	79,666.	
<b>27</b> Pension plan contributions not included on lines 25a, b, and c	741,220.	714,848.	26,372.	
<b>28</b> Employee benefits not included on lines 25a - 27	1,509,142.	1,451,242.	57,900.	
<b>29</b> Payroll taxes	509,066.	491,731.	17,335.	
<b>30</b> Professional fundraising fees				
<b>31</b> Accounting fees	82,540.	82,540.		
<b>32</b> Legal fees	77,676.		77,676.	
<b>33</b> Supplies	154,055.	93,334.	60,721.	
<b>34</b> Telephone	186,298.	40,934.	145,364.	
<b>35</b> Postage and shipping	67,161.	55,862.	11,299.	
<b>36</b> Occupancy	423,268.	380,601.	42,667.	
<b>37</b> Equipment rental and maintenance	130,338.	120,733.	9,605.	
<b>38</b> Printing and publications	68,982.	62,873.	6,109.	
<b>39</b> Travel	1,500,494.	1,482,602.	17,892.	
<b>40</b> Conferences, conventions, and meetings	403,860.	381,505.	22,355.	
<b>41</b> Interest				
<b>42</b> Depreciation, depletion, etc (attach schedule)	344,728.	87,778.	256,950.	STMT 1A
<b>43</b> Other expenses not covered above (itemize)				
<b>a</b> STMT 1	6,846,268.	6,657,723.	188,545.	
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>f</b>				
<b>g</b>				
<b>44</b> Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	19,513,168.	18,321,060.	1,192,108.	

**Joint Costs.** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_,  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_.

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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.

Table with 2 columns: Description of program service and Program Service Expenses. Rows include sections a, b, c, d, e, and f (Total of Program Service Expenses) with associated dollar amounts and checkboxes for foreign grants.

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**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
<b>Assets</b>	45 Cash - non-interest-bearing		45	
	46 Savings and temporary cash investments	31,214,828.	46	26,758,281.
	47 a Accounts receivable	47a 1,461,973.		
	b Less allowance for doubtful accounts	47b	47c	1,461,973.
	48 a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b	48c	
	49 Grants receivable	817,712.	49	3,372,984.
	50 a 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	
	51 a Other notes and loans receivable (attach schedule)	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	20,140.	53	93,742.
	54 a Investments - publicly-traded securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54a	
	b Investments - other securities (attach schedule)	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54b	
	55 a Investments - land, buildings, and equipment, basis	55a		
	b Less accumulated depreciation (attach schedule)	55b	55c	
	56 Investments - other (attach schedule)		56	
57 a Land, buildings, and equipment basis	57a 3,523,425	STMT 1A		
b Less accumulated depreciation (attach schedule)	57b 467,393	615,775.	57c	3,056,032.
58 Other assets, including program-related investments (describe ▶ STMT 3 )	1,256,400.	58	1,033,247.	
59 <b>Total assets</b> (must equal line 74) Add lines 45 through 58	33,927,360.	59	35,776,259.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	818,127.	60	1,708,213.
	61 Grants payable		61	
	62 Deferred revenue	40,000.	62	2,083,704.
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64 a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ▶ STMT 4 )	148,229.	65	49,065.
66 <b>Total liabilities.</b> Add lines 60 through 65	1,006,356.	66	3,840,982.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	18,450,909.	67	17,866,160.
	68 Temporarily restricted	14,470,095.	68	14,069,117.
	69 Permanently restricted		69	
	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 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	32,921,004.	73	31,935,277.
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	33,927,360.	74	35,776,259.





Part VI Other Information (continued)

82 a 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 2,156,307 STMT 2A
83 a 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
84 a Did the organization solicit any contributions or gifts that were not tax deductible? 84a X
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
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
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 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
89 a 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 X
90 a List the states with which a copy of this return is filed NEW JERSEY, NEW YORK
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions) 90b 76
91 a The books are in care of ANGELO FEDERICO Telephone no 212-500-2600
Located at 151 EAST 61ST STREET, NEW YORK, NY ZIP +4 10065
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

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**Part VI Other Information (continued)**

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c X

If "Yes," enter the name of the foreign country ▶

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here ▶   
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ | 92 | 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 <u>ADVISORY AND</u>					
b <u>RESEARCH FEES</u>					529,227.
c <u>SHARED SERVICE FEES</u>					3,212,967.
d <u>PARTICIPANT FEES</u>					1,464,311.
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			14	1,425,188.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b <u>OTHER INCOME</u>			18	608,703.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				2,033,891.	5,206,505.
105 Total (add line 104, columns (B), (D), and (E))					7,240,396.

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)
▼	STMT 8A

**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**

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on life insurance contracts, annuities, or other contracts?

(b) Did the organization, during the year, pay premiums, directly or indirectly, on life insurance contracts, annuities, or other contracts?

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



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**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).

<b>106</b> Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
		X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
<b>Totals</b>				

<b>107</b> Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
		X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
<b>Totals</b>				

<b>108</b> 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
		X

**Please Sign Here**

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

Signature of officer: A. Barnaby Date: 12/4/2008

Type or print name and title: D. BARNABY GIBSON, GEN. COUNSEL, TREASURER & SECRETARY

**Paid Preparer's Use Only**

Preparer's signature: [Signature] Date: 1/30/2009 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: PRICEWATERHOUSECOOPERS LLP EIN: 13-4008324

300 MADISON AVENUE Phone no: 646-471-3000

NEW YORK, NY 10017

Form **990** (2006)

**AMENDED RETURN**

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

**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

OMB No 1545-0047

**2006**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information - (See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

ITHAKA HARBORS, INC.

30-0152775

**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 9				
Total number of other employees paid over \$50,000 . . . ▶	51			

**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 10		
Total number of others receiving over \$50,000 for professional services . . . . . ▶	NONE	

**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
SEE STATEMENT 11		
Total number of other contractors receiving over \$50,000 for other services . . . . . ▶	9	

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

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including 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 ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) . . . . .	1	X
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 )		
<b>a</b> Sale, exchange, or leasing of property? . . . . . <i>.STMT. 12</i>	2a	X
<b>b</b> Lending of money or other extension of credit? . . . . .	2b	X
<b>c</b> Furnishing of goods, services, or facilities? . . . . .	2c	X
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . <i>.FORM 990, .PART. V . .</i>	2d	X
<b>e</b> Transfer of any part of its income or assets? . . . . .	2e	X
<b>3a</b> Did the organization make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments ) . . . . .	3a	X
<b>b</b> Did the organization have a section 403(b) annuity plan for its employees? . . . . .	3b	X
<b>c</b> Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement . . . . .	3c	X
<b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? . . . . .	3d	X
<b>4a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g . . . . .	4a	X
<b>b</b> Did the organization make any taxable distributions under section 4966? . . . . .	4b	X
<b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	4c	X
<b>d</b> Enter the total number of donor advised funds owned at the end of the tax year . . . . . ▶ _____		
<b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year . . . . . ▶ _____		
<b>f</b> Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the rights to provide advice on the distribution or investment of amounts in such funds or accounts . . . . . ▶ _____		
<b>g</b> Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year . . . . . ▶ _____		

**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 )
- 11 a  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 )
- 11 b  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 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	
JSTOR	13-3857105	12	X		498,372.
<b>Total</b>					498,372.

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 NOT APPLICABLE

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. a Enter 2% of amount in column (e), line 24 NOT APPLICABLE. b Prepare a list for your records to show the name of and amount contributed by each person... c Total support for section 509(a)(1) test. d Add Amounts from column (e) for lines 18, 19, 22, 26b. e Public support (line 26c minus line 26d). f Public support percentage (line 26e (numerator) divided by line 26c (denominator)).

27 Organizations described on line 12. a 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" Do not file this list with your return. Enter the sum of such amounts for each year NOT APPLICABLE (2005) (2004) (2003) (2002). 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 11b, as well as individuals) Do not file this list with your return. 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 (2005) (2004) (2003) (2002).

c Add Amounts from column (e) for lines 15, 16, 17, 20, 21. d Add Line 27a total and line 27b total. e Public support (line 27c total minus line 27d total). f Total support for section 509(a)(2) test Enter amount from line 23, column (e) 27f. g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g. h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h.

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, 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 Do not file this list with your return. Do not include these grants in line 15

# AMENDED RETURN

**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
<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>		
-----			
<b>32</b> Does the organization maintain the following			
<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 a 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 )			
-----			
<b>33</b> Does the organization discriminate by race in any way with respect to			
<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 )			
-----			
<b>34 a</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>		

**AMENDED RETURN**

**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) **NOT APPLICABLE**

Check  a if the organization belongs to an affiliated group      Check  b if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		(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	
37	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	37	
38	Total lobbying expenditures (add lines 36 and 37) . . . . .	38	
39	Other exempt purpose expenditures . . . . .	39	
40	Total exempt purpose expenditures (add lines 38 and 39) . . . . .	40	
41	Lobbying nontaxable amount Enter the amount from the following table -		
	<b>If the amount on line 40 is -                      The lobbying nontaxable amount is -</b>		
	Not over \$500,000 . . . . . 20% of the amount on line 40 . . . . .	} 41	
	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		
42	Grassroots nontaxable amount (enter 25% of line 41) . . . . .	42	
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 )

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45	Lobbying nontaxable amount . . . . .				
46	Lobbying ceiling amount (150% of line 45(e)) . . . . .				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount . . . . .				
49	Grassroots ceiling amount (150% of line 48(e)) . . . . .				
50	Grassroots lobbying expenditures . . . . .				

**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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 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?

Table with 3 columns: Question, Yes, No. Rows include: 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.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A'.

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 [X] No

b If "Yes," complete the following schedule

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A'.



FORM 990, PART II - OTHER EXPENSES

=====

DESCRIPTION -----	TOTAL -----	PROGRAM SERVICES -----	MANAGEMENT AND GENERAL -----
OTHER PROFESSIONAL FEES			
CONSULTANTS FEES	3,647,760.	3,597,717.	50,043.
HOSTING FEES	1,849,430.	1,849,430.	
TEMPORARY HELP	273,143.	253,797.	19,346.
INSURANCE	74,084.		74,084.
INTERNET COST	49,129.	45,108.	4,021.
EMPLOYEE DEVELOPMENT & RECRUITMENT	123,037.	121,665.	1,372.
COPYRIGHT & FILING	1,045.		1,045.
OTHER FEES	26,368.	12,822.	13,546.
DESIGN & MATERIAL	4,713.	4,713.	
MARKETING & PROMOTIONS	23,637.	23,637.	
HARDWARE & SOFTWARE	773,922.	748,834.	25,088.
	-----	-----	-----
TOTALS	6,846,268.	6,657,723.	188,545.
	=====	=====	=====

AMENDED RETURN

ITHAKA HARBORS, INC  
FOR THE YEAR ENDED DECEMBER 31, 2006

EIN: 30-0152776

FORM 990, PART II, LINE 42 AND PART IV, LINE 57 - DEPRECIATION EXPENSES AND FIXED ASSETS

Fixed Asset	Cost			Balance at 12/31/06	Accumulated Depreciation			Net Book Value at 12/31/06	
	Balance at 1/1/06	Additions	Dispositions		Balance at 1/1/06	Current year Depreciation	Dispositions		Balance at 12/31/06
Real Estate - 300 E. 54th Street	-	1,100,000	-	1,100,000	-	20,000	-	20,000	1,080,000
Furniture & Fixtures	265,106	443,079	(265,106)	443,079	66,277	110,585	(132,554)	44,308	398,771
Office Equipment	-	124,986	-	124,986	-	12,499	-	12,499	112,487
Office Equipment-Aluka	-	6,700	-	6,700	-	670	-	670	6,030
Computer Equipment-Aluka	-	5,000	-	5,000	-	500	-	500	4,500
Leasehold Improvements	-	440,146	-	440,146	-	29,343	-	29,343	410,803
Software	90,266	20,675	-	110,941	42,466	33,534	-	76,000	34,941
Software - NITLE	-	36,383	-	36,383	-	6,064	-	6,064	30,319
Software-Aluka	5,300	-	-	5,300	883	1,767	-	2,650	2,650
Public Servers	198,329	202,097	-	400,426	59,499	50,989	-	110,488	289,938
Public Servers - Portico	148,869	320,492	-	469,361	41,115	34,979	-	76,094	393,267
Public Servers - NITLE	-	11,383	-	11,383	-	1,138	-	1,138	10,245
Public Servers - Aluka	163,125	206,595	-	369,720	44,980	42,660	-	87,640	282,080
<b>TOTAL</b>	<u>870,995</u>	<u>2,917,536</u>	<u>(265,106)</u>	<u>3,523,425</u> PART IV, L57a	<u>255,221</u>	<u>344,728</u> PART II, L42	<u>(132,554)</u>	<u>467,393</u> PART IV, L57b	<u>3,056,032</u> PART IV, L57c

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

ITHAKA HARBORS, INC. ("ITHAKA") IS DEDICATED TO ACCELERATING THE CREATION, DEVELOPMENT AND SUCCESS OF NOT-FOR-PROFIT ORGANIZATIONS FOCUSED ON DEPLOYING NEW TECHNOLOGIES FOR THE BENEFIT OF THE SCHOLARLY COMMUNITY. ITHAKA'S FOUR PRIMARY AREAS OF ACTIVITY ARE INCUBATING PROMISING AND IMPORTANT PROJECTS AND NEW IDEAS; SUPPORTING AFFILIATED ORGANIZATIONS THROUGH SHARING OF RESOURCES; CONDUCTING RESEARCH ON THE IMPACT OF ADVANCING TECHNOLOGIES ON THE SCHOLARLY COMMUNITY; AND PROVIDING STRATEGIC ASSISTANCE AND ADVICE TO OTHER ORGANIZATIONS ENGAGED IN RELATED ACTIVITIES.

AMENDED RETURN

ITHAKA HARBORS, INC.  
FOR THE YEAR ENDED DECEMBER 31, 2006

EIN: 30-0152775

DURING 2006, ITHAKA HARBORS, INC. ("ITHAKA") RECEIVED UNRESTRICTED GRANT FUNDING OF \$3,256,307 AND RESTRICTED GRANT FUNDING OF \$6,261,469 FROM THE ANDREW W. MELLON FOUNDATION (THE "FOUNDATION") FOR ONGOING OPERATING EXPENSES AND TO SUPPORT COLLECTION DEVELOPMENT. THIS FUNDING INCLUDED IN-KIND CHARITABLE CONTRIBUTIONS OF \$2,156,307 FROM THE FOUNDATION, WHICH ARE NOT INCLUDED IN REVENUE OR EXPENSES IN THE TAX RETURN. EXPENSES INCLUDED IN CHARITABLE IN-KIND CONTRIBUTIONS WERE BASED ON AN ALLOCATION OF PERSONNEL AND SALARY EXPENSE BASED ON TIME FOUNDATION EMPLOYEES SPENT WORKING ON ITHAKA MATTERS AND AN ALLOCATION OF COSTS ASSOCIATED WITH FACILITIES AND UTILITIES PROVIDED TO ITHAKA AND OTHER GENERAL EXPENSES INCURRED FOR ITHAKA.

THE FOUNDATION ALSO PROVIDES CERTAIN INVESTMENT SERVICES AND LEGAL ADVICE TO ITHAKA. THE DOLLAR VALUE OF THESE SERVICES IS NOT BELIEVED TO BE MATERIAL.

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
DUE FROM JSTOR	476,046.	518,011.
DUE FROM ARTSTOR	395,196.	189,702.
DUE FROM THE ANDREW W. MELLON FOUNDATION	346,930.	258,298.
SECURITY DEPOSITS	38,228.	67,236.
	-----	-----
TOTALS	1,256,400.	1,033,247.
	=====	=====

AMENDED RETURN

ITHAKA HARBORS, INC.

30-0152775

FORM 990, PART III - PROGRAM SERVICES

=====

DESCRIPTION

EXPENSES

-----

-----

OTHER SERVICES

833,193.

ITHAKA'S PRIMARY ACTIVITIES INCLUDE INCUBATING PROMISING AND IMPORTANT PROJECTS AND NEW IDEAS; SUPPORTING AFFILIATED ORGANIZATIONS THROUGH THE SHARING OF RESOURCES; CONDUCTING RESEARCH AND PROVIDING STRATEGIC ASSISTANCE TO OTHER ORGANIZATIONS ENGAGED IN RELATED ACTIVITIES.

RESEARCH

791,549.

THE RESEARCH PROGRAM IS DEDICATED TO SUPPORTING ITHAKA'S AFFILIATED NON-PROFIT ORGANIZATIONS AND THE INCUBATED ENTITIES WHILE ALSO INFORMING THE GENERAL HIGHER EDUCATION COMMUNITY OF THE IMPACT OF NEW TECHNOLOGIES.

STRATEGIC ADVISORY

362,961.

THE STRATEGIC ADVISORY GROUP OFFERS STRATEGIC ASSISTANCE AND ADVICE TO OTHER NON-PROFIT ORGANIZATIONS ENGAGED IN RELATED ACTIVITIES.

SHARED SERVICES

4,635,737.

THE SHARED SERVICES OFFER FINANCE, HUMAN RESOURCES AND INFORMATION TECHNOLOGY ASSISTANCE TO ITHAKA'S INCUBATED PROJECTS AND OTHER NON-PROFIT ORGANIZATIONS ENGAGED IN RELATED ACTIVITIES.

AMENDED RETURN

ITHAKA HARBORS, INC.

30-0152775

FORM 990, PART III - PROGRAM SERVICES

DESCRIPTION	EXPENSES
ALUKA ALUKA'S MISSION IS TO MAKE PRIMARY SOURCE MATERIAL FROM THE DEVELOPING WORLD MORE WIDELY AVAILABLE IN DIGITAL FORM.	3,469,135.
NITLE NITLE'S MISSION IS TO HELP SMALLER COLLEGES MAKE FULL USE OF ELECTRONIC AND NETWORKING TECHNOLOGIES TO ENHANCE TEACHING AND RESEARCH.	4,283,785.
PORTICO PORTICO'S MISSION IS TO PRESERVE SCHOLARLY LITERATURE PUBLISHED IN ELECTRONIC FORM TO ENSURE THAT THESE MATERIALS REMAIN ACCESSIBLE TO FUTURE SCHOLARS, RESEARCHERS, AND STUDENTS.	3,944,700.
TOTAL PROGRAM SERVICE EXPENSES:	<u>18,321,060.</u>

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
DUE TO JSTOR	46,497.	40,012.
DUE TO ARTSTOR	84,925.	9,053.
DUE TO THE ANDREW W. MELLON FOUNDATION	16,807.	NONE
TOTALS	----- 148,229. =====	----- 49,065. =====



AMENDED RETURN

30-0152775

ITHAKA HARBORS, INC.

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 -----
KEVIN M. GUTHRIE C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	PRESIDENT 40.00	362,726.	54,922.	NONE
D. BARNABY GIBSON C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	GENERAL COUNSEL, TREASURER & SECRETARY 40.00	199,779.	30,296.	NONE
WILLIAM G. BOWEN C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	CHAIRMAN 2.00	14,100.	NONE	NONE
PAUL A. BREST C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	VICE CHAIRMAN 2.00	NONE	NONE	NONE
CHARLES E. EXLEY, JR. C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	TRUSTEE 2.00	NONE	NONE	NONE
CHARLES M. VEST C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	TRUSTEE 2.00	NONE	NONE	NONE

AMENDED RETURN

30-0152775

ITHAKA HARBORS, INC.

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 -----
DEANNA B. MARCUM C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	TRUSTEE 2.00	NONE	NONE	NONE
KENNETH C. FRAZIER C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	TRUSTEE 2.00	NONE	NONE	NONE
LAWRENCE R. RICCIARDI C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	TRUSTEE 2.00	NONE	NONE	NONE
MAMPHELA A. RAMPHELE C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	TRUSTEE 2.00	5,000.	NONE	NONE
W. DRAKE MCFEELY C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	TRUSTEE 2.00	NONE	NONE	NONE
	GRAND TOTALS	581,605.	85,218.	NONE

FORM 990, PART V-A COMPENSATION PROVIDED BY RELATED ORGANIZATION  
 =====

NAME, ORGANIZATION NAME, RELATIONSHIP	EMPLOYER ID #	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
-----				
WILLIAM G. BOWEN JSTOR TRUSTEE	13-3857105	5,000.	NONE	NONE
GRAND TOTALS		5,000.	NONE	NONE
=====				

THE AMOUNT LISTED BELOW IS COMPENSATION PAID TO WILLIAM G. BOWEN AS HE SERVED AS A TRUSTEE FOR JSTOR'S BOARD OF DIRECTORS DURING 2006.

FORM 990, PART VI - NAMES OF RELATED ORGANIZATIONS

=====

RELATED ORGANIZATION NAME: ARTSTOR INC.

EXEMPT: X NONEXEMPT:

RELATED ORGANIZATION NAME: JSTOR

EXEMPT: X NONEXEMPT:

AMENDED RETURN

ITHAKA HARBORS, INC.

30-0152775

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

=====

LINE NO. ---	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES -----
--------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------

93A TO 93D	SEE STATEMENT 1 AND 3A. ITHAKA'S INCUBATED ENTITIES ALUKA, NITLE AND PORTICO ADVANCE ITS EXEMPT PURPOSES BY USING TECHNOLOGY TO PROVIDE SCHOLARS WITH ACCESS TO CONTENT THAT WOULD OTHERWISE BE DIFFICULT OR IMPOSSIBLE TO LOCATE (ALUKA), PROVIDING TRAINING TO FACULTY IN THE USE OF NEW TECHNOLOGY (NITLE), AND PRESERVING SCHOLARLY LITERATURE IN ELECTRONIC FORM (PORTICO), RESPECTIVELY. ITHAKA'S RESEARCH AND ADVISORY SERVICES HELP THE HIGHER EDUCATION UNDERSTAND AND TAKE ADVANTAGE OF THE OPPORTUNITIES PRESENTED BY NEW TECHNOLOGIES ITHAKA'S SHARED SERVICES ALLOW THE INCUBATED ENTITIES AND OTHER NOT-FOR-PROFIT ORGANIZATIONS ENGAGED IN RELATED ACTIVITIES TO COORDINATE THEIR EFFORTS AND REDUCE THEIR ADMINISTRATIVE COSTS.
------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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
JO ELLEN PARKER C/O ITHAKA HARBORS, INC 151 EAST 61ST STREET NEW YORK, NY 10065	EXECUTIVE DIRECTOR 40.00	221,344.	44,024.	NONE
THOMAS NYGREN C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	EXECUTIVE DIRECTOR 40.00	210,879.	43,141.	NONE
STEPHEN LUCAS C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	VP - SHARED SERVICES 40.00	206,943.	43,862.	NONE
EILEEN FENTON GIFFORD C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	EXECUTIVE DIRECTOR 40.00	167,751.	32,637.	NONE
TONI TRACY C/O ITHAKA HARBORS, INC. 151 EAST 61ST STREET NEW YORK, NY 10065	DIR PUBLISHER RELATIONS 40.00	165,796.	25,581.	NONE
	TOTAL COMPENSATION	972,713.	189,245.	NONE

ITHAKA HARBORS, INC.

AMENDED RETURN

30-0152775

SCH. A, PART II-A COMPENSATION OF THE 5 HIGHEST PAID FOR PROF. SERV.  
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PRICEWATERHOUSECOOPERS LLP	TAX & AUDITING	50,540.
P.O. BOX 7247-8001		
PHILADELPHIA, PA 19170-8001		
	TOTAL COMPENSATION	----- 50,540. =====

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

GREAT LAKES COLLEGE ASSOCIATIONS 535 WEST WILLIAM, SUITE 301 ANN ARBOR, MI 48103	HOST SITE	945,970.
MIDDLEBURY COLLEGE SERVICE BUILDING MIDDLEBURY, VT 05753	HOST SITE	903,524.
NCS TECHNOLOGIES 15 CORPORATE PLACE SOUTH PISCATAWAY, NJ 08854	CONTRACT PROGRAMMING	625,228.
SOUTHWESTERN UNIVERSITY P.O. BOX 770 GEAIRGETOWN, TX 78627	HOST SITE	624,075.
ODYSSEY LP 550 FIFTEENTH STREET SAN FRANCISCO, CA 94103	RESEARCH	533,552.
	TOTAL COMPENSATION	----- 3,632,349. =====



AMENDED RETURN

ITHAKA HARBORS, INC.

30-0152775

SCHEDULE A, PART III - EXPLANATION FOR LINE 2A

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DURING 2006, ITHAKA HARBORS, INC. RECEIVED \$28,200 FROM WILLIAM G. BOWEN, A TRUSTEE, FOR THE USE OF REAL PROPERTY DURING THE PERIOD FROM JULY 2006 THROUGH DECEMBER 2006. THE AMOUNT PAID AS RENT WAS DETERMINED BY AN INDEPENDENT APPRAISAL OF THE FAIR MARKET RENTAL VALUE OF THE PROPERTY.