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)

20**03**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

| | For th | the 2003 calendar year, or tax year beginning AUGUST 1 , 2003, and ending | | | | | | | JULY 31 , 20 04 | | | |
|---------------|-----------------------|---------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------|----------------------------------------|----------------|------------------|--------------------|----------------------------------------------------------------------|--|--|--|
| R | | applicable | Please | C Name of organization | | | | D Emplo | yer identification number | | | |
| _ | | s change | use IRS label or | CREATION EVIDENCE | MUSEUM | | 1 | 75 2 | 075799 | | | |
| _ | Name c | • | print or | Number and street (or P O I | box if mail is not delivered | to street addr | ess) Room/suite | E Teleph | one number | | | |
| _ | iname c Initial re | - | type. See | P.O. BOX 309 | | | | (254 |) 897-3200 | | | |
| $\overline{}$ | | | Specific | City or town, state or countr | ry, and ZIP + 4 | | | | ng method: | | | |
| _ | Final ret | | Instruc- tions | GLÉN ROSE, TX 7604 | | | | _ | her (specify) | | | |
| | | ed return | • Soc | tion E01/a)/2) organizations | and 4947/a\/1\ noneyon | nt charitable | H and I are no | | to section 527 organizations | | | |
| Ш. | Applicati | on pending | | ction 501(c)(3) organizations sts must attach a completed | | | H(a) Is this a | group retur | n for affiliates? 📋 Yes 🗹 No | | | |
| G | Wehsiti | o ▶ cre | ation@ | creationevidence.org | | | H(b) If "Yes," | enter numb | er of affiliates ▶ | | | |
| _ | | | | | | | H(c) Are all af | filiates inclu | ıded? ☐ Yes ☑ No | | | |
| J | Organiz | zation type | (check o | only one) > 2 501(c) (3) | ◆ (insert no) ☐ 4947(a) | (1) or 527 | 7 (If "No," | attach a list | See instructions) | | | |
| K | Chèck | here ▶ 🗌 | If the c | organization's gross receipts ar | re normally not more than | \$25,000 The | H(d) is this a s | eparate retui | m filed by an | | | |
| | organiza | ation need | not file a | return with the IRS, but if the o | organization received a Form | n 990 Package | organizati | | oy a group ruling? Yes V No | | | |
| | in the m | nail, it shou | ld file a re | turn without financial data Som | ne states require a comple | ete retum. | | emption N | | | | |
| | Gross | receints: | Add line | s 6b, 8b, 9b, and 10b to lin | na 12 🕨 | | | | the organization is not required form 990, 990-EZ, or 990-PF) | | | |
| | art | | | penses, and Change: | | Fund Ral | | | | | | |
| | T | | | | ······································ | runu bai | ances (See p | age 10 c | or the instructions.) | | | |
| | 1 | | | gifts, grants, and sımilar | | 1 1 | 315,352. | 50 <i>/////</i> | | | | |
| | 1 | • | | upport | | 1a | 313,332. | ////// | | | | |
| | b | Indirect | public : | support | | , , | | 0 | | | | |
| | C | Governi | ment co | ontributions (grants) . | ่วร่อ ว่อว่อก่ ' ' | 1c | 0440.70 | 0 1d | 222 462 26 | | | |
| | d | · · · · · · · · · · · · · · · · · · · | | | | | | | 323,463.26 | | | |
| | 2 | | | e revenue including goveri | | | | 2 | 167537.14 | | | |
| | 3 | Membe | rship di | ues and assessments . | · · · · · · · | | | 3 | 0 | | | |
| | 4 | Interest | on sav | ings and temporary cash | h investments | | | 4 | 0 | | | |
| | 5 | Dividen | ds and | interest from securities | | | | 5 | 0 | | | |
| | 6a | Gross re | ents . | | | 6a | | 0 //// | | | | |
| | Ь | Less: re | ental exp | penses | | 6b | | 0 ///// | _ | | | |
| | С | Net rent | tal incoi | me or (loss) (subtract line | e 6b from line 6a) . | | | 6c | 0 | | | |
| ā | 7 | Other in | ivestme | nt income (describe | | | | 7 | 0 | | | |
| Revenue | 8a | Gross a | mount | from sales of assets oth | ner (A) Securities | 1 1 - | (B) Other | ///// | | | | |
| Še | | than inv | entory | | | 8a | | ///// | | | | |
| | Ь | Less: co | st or oth | er basis and sales expense | | 8b | | | | | | |
| | С | Gain or | (loss) (a | attach schedule) | | 8c | | ////// | | | | |
| | d | Net gair | or (loss | s) (combine line 8c, colum | nns (A) and (B)) | | | . 8d | 0 | | | |
| | 9 | Special 6 | events ar | nd activities (attach schedule | e). If any amount is from | gaming, ch | ieck here 🕨 🗌 | | | | | |
| | а | Gross re | evenue | (not including \$ | of | _ | | | | | | |
| | | contribu | utions re | eported on line 1a) | | 9a | 5907. | —— <i>V/////</i> / | | | | |
| | b | Less: d | irect ex | penses other than fundr | raising expenses . | 9b | 3029. | 23 | | | | |
| | C | Net ince | ome or | (loss) from special event | t s (subtract line 9b fr | om line 9a) | | 9c | 2878.27 | | | |
| | 10a | Gross s | ales of | inventory, less teturis a | no allowances | 10a | 9900. | | | | | |
| | Ь | Less: c | ost of g | oods sold | | 10b | 10,790. | 00 ///// | | | | |
| | C | Gross pr | rofit or (le | oss) from sales of inventory | y (attach schedule) (sub | tract line 10b | b from line 10a) | 10c | -890.00 | | | |
| | 11 | Other re | evenue | (from Part VII, Tine 103) | 4005 . [우] | | | . 11 | 808.36 | | | |
| | 12 | Total re | venue (| add ines 1d, 2, 3, 4, 5, 6 | ic, 7, 8d, 96010c, and | <u>11)</u> | <u> </u> | . 12 | 493,797.03 | | | |
| _ | 13 | Progran | n servic | es (from line 44) Colling | (B)) ₁ 7: | | | . 13 | 287,226.15 | | | |
| Ses | 14 | | | nd general (from line 44 | | | | 14 | 193,853.01 | | | |
| Expenses | 15 | | | om line 44, column (D)) | | | | 15 | 17,135.50 | | | |
| EX | 16 | Paymer | syments to affiliates (attach schedule) | | | | 16 | 0 | | | | |
| | 17 | Total e | xpense | s (add lines 16 and 44, o | column (A)) | | | . 17 | 498,214.66 | | | |
| ş | 18 | Excess | or (defi | cit) for the year (subtrac | t line 17 from line 12 |) | | 18 | -4417.63 | | | |
| SSe | 19 | | | und balances at beginni | | • | (A)) | 19 | 1,178,851.97 | | | |
| Net Assets | 20 | | | in net assets or fund ba | | | | 20 | 0 | | | |
| ž | 21 | | | ind balances at end of year | | | | . 21 | 1,174,434,34 | | | |

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 11282Y



| Рd | | Functional Expenses and section | 20015 111050 on 4947(a)(1) | none | kempt chantable trusts | but optional for others (| See page 22 of the instr | uctions) |
|----------------------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------|--------------------------------------------|-------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------------------|
| | , Do | not include amounts reported on lin 6b, 8b, 9b, 10b, or 16 of Part I. | e | | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
| 22 | Gran | ts and allocations (attach schedule) | | | | | | |
| | (cash | \$ noncash \$ | / ⊢ | 22 | | | | |
| 23 | Speci | fic assistance to individuals (attach scho | | 23 | | | | |
| 24 | | fits paid to or for members (attach sche | ~~,~,. <u> </u> | 24 | 72 254 05 | | 72 254 95 | |
| 25 | | pensation of officers, directors, etc. | | 25 | 72,254.85 90,033.01 | 70.652.20 | 72,254.85 17.379.63 | |
| 26 | | r salaries and wages | – | 26 | 90,033.01 | 72,653.38 | 17,379.63 | |
| 27 | | sion plan contributions | · · · | 27 28 | 24,857.59 | 13,430.37 | 11,427.22 | |
| 28 | | r employee benefits | · · ⊢ | 29 | 11,632.13 | 6291.38 | 5340.75 | |
| 29 | | oll taxes | | 30 | 11,032.13 | 0231.30 | 0 | |
| 30 | | essional fundraising fees | – | 31 | 5000.00 | • | 5000.00 | |
| 31 | | ounting fees | – | 32 | 483.94 | 0 | 60.19 | 423.75 |
| 32 33 | | ll fees | – | 33 | 15,717.41 | 3031.97 | 7999.43 | 4686.01 |
| 34 | | olies | · · ⊢ | 34 | 12,438.82 | 10,543.05 | 1263.98 | 631.79 |
| 3 4 35 | | age and shipping | · · ⊢ | 35 | 26,330.14 | 19,732.09 | 2703.67 | 3894.38 |
| 36 | | age and shipping | – | 36 | 26,473.47 | 0 | 26,473.47 | 0 |
| 37 | | pment rental and maintenance | – | 37 | 3562.61 | 0 | 3562.61 | 0 |
| 38 | • | ing and publications | | 38 | 10,400.10 | 6164.55 | 200.33 | 4035.22 |
| 39 | Trave | | | 39 | 22,374.03 | 8970.11 | 12,387.26 | 1016.66 |
| 40 | | erences, conventions, and meetings | - I | 40 | 169.00 | 0 | 169.00 | 0 |
| 41 | | est | | 41 | 2730.69 | 0 | 2730.69 | 0 |
| 42 | | eciation, depletion, etc. (attach sche | | 42 | 51,861.50 | 51,861.50 | 0 | 0 |
| 43 | Other | expenses not covered above (itemize): a Do | natic 4 | 13a | 9838.63 | 0 | 9838.63 | 0 |
| Ь | Cha | mber/Biosphere | 4 | 13b | 2563.82 | 2563.82 | 0 | 0 |
| C | | cellaneous Projects & Materials B | | 13c | 78,155.92 | 61814.26 | 13,893.97 | 2447.69 |
| d | | avations | | 13d | 6851.51 | 5684.18 | 1167.33 | 0 |
| е | | cial Projects - Fiji, Colombia | | 13e | 24,485.49 | 24,485.49 | 0 | 0 |
| 14 | Total f | unctional expenses (add lines 22 through 43) Organi eting columns (B)-(D), carry these totals to lines 1: | zations 3—15 . | 44 | 498,214.66 | 287,226.15 | 193,853.01 | 17,135.50 |
| 4re | any joir | ts. Check ► ☐ If you are following toosts from a combined educational care. | ampaign ai | nd fu | | | | |
| | | iter (i) the aggregate amount of these jo | | | | | | s \$ |
| | | ount allocated to Management and ger | | | | e amount allocated | | |
| Рa | rt III | Statement of Program Service | e Accor | npii Exc | snments (See p | page 25 of the in | ISTRUCTIONS) | n |
| Wha | at is th | e organization's primary exempt pu | rpose? > | | ······································ | | | Program Service Expenses |
| All c of c | rganiz: lients s | ations must describe their exempt pui served, publications issued, etc Disci ons and 4947(a)(1) nonexempt charitabl | pose ach uss achiei | ievei veme | ments in a clear ar ents that are not n | id concise manner. neasurable. (Sectio | State the number n 501(c)(3) and (4) | (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others) |
| а | | um operations with displays, lect ons verifying scinetific Creation. | ures, dist | tribu | ition of education | nal materials and | extension | |
| | | | (Gra | nts | and allocations | \$ |) | 248,470.32 |
| b | Exca | vations for fossils - field excavation | | | | tific research. | | - |
| | | | | | | | | |
| | | | | | | | | 6000.04 |
| | D | and for an flood on income to | | | and allocations | 3 | | 6022.34 |
| С | | arch for pre-flood environment an ientific Creation | a with the | e ny | perbaric biospin | ere to simulate th | e environment | |
| | | | (Gra | nts | and allocations | \$ | ·····) | 2563.82 |
| ď | | ch for living dinosaurs - Papau, Ne | | | | | | |
| | | ects in Suva, Fiji, and Colombia, S | | erica | l <u>.</u> | | | |
| | Exca | vation of dinosaur bones in Color | | | and allocations | • | ······ | 20460.67 |
| e | Other | program services (attach schedule) | | | and allocations | \$ | <u> </u> | 30169.67 |
| | | of Program Service Expenses (sho | | | | _ ` | , • | 287,226.15 |
| f | IUGI I | of the second contract contracts the second contract the second contracts the second contract the second contracts the second contract the second contracts the second contracts the second contract the | | | | | | |

Part IV Balance Sheets (See page 25 of the instructions.)

| | lote: | 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 |
|---------------|-------|-----------------------------------------------------------------------------------------------------------------------|--------------------------|----------------|----------------------|
| | 45 | Cash—non-interest-bearing | 12,906.88 | 45 | 16,624.62 |
| | 46 | Savings and temporary cash investments | 0 | 46 | 0 |
| | | | | | |
| | 47a | Accounts receivable | | | |
| | ь | Less: allowance for doubtful accounts | 3168.45 | 47c | 2679.67 |
| | | | | | |
| | 48a | Pledges receivable | _ | | _ |
| | ь | Less: allowance for doubtful accounts 48b 0 | | 48c | |
| | 49 | Grants receivable | 0 | 49 | 0 |
| | 50 | Receivables from officers, directors, trustees, and key employees | ^ | | 0 |
| | | (attach schedule) | 0 | 50 | <u> </u> |
| | 51a | Other notes and loans receivable (attach | | | |
| Assets | | schedule) | ^ | | 0 |
| ISS | _ | Less: allowance for doubtful accounts | 24,130.66 | 51c | 20,724.43 |
| _ | 52 | Inventories for sale or use | -500.00 | 53 | 325.00 |
| | 53 | Prepaid expenses and deferred charges | -300.00 | 54 | 020.00 |
| | 54 | Investments—securities (attach schedule) ▶ ☐ Cost ☐ FMV | | | <u>-</u> |
| | 55a | Investments—land, buildings, and | | | |
| | ١. | equipment basis | | | |
| | D | Less: accumulated depreciation (attach schedule) | 0 | 55c | 0 |
| | 56 | Investments—other (attach schedule) | 61,000.00 | 56 | 61,000.00 |
| | | Land, buildings, and equipment: basis 57a 972,777.05 | | | |
| | l . | Less: accumulated depreciation (attach | | | |
| | " | schedule) | 456,307.48 | 57c | 438,370.42 |
| | 58 | Other assets (describe > Artifacts & fossils) | 659,822.06 | 58 | 670,837.12 |
| | | , | | | |
| | 59 | Total assets (add lines 45 through 58) (must equal line 74) | 1,226,835.53 | | 1,210,561.26 |
| | 60 | Accounts payable and accrued expenses | 0 | 60 | 0 |
| | 61 | Grants payable | 0 | 61 | |
| | 62 | Deferred revenue | 0 | 62 | 0 |
| ies | 63 | Loans from officers, directors, trustees, and key employees (attach | 0 | | 0 |
| Liabilities | | schedule) | <u>_</u> | 63 64a | 0 |
| <u>.</u> | l | Tax-exempt bond liabilities (attach schedule) | 47,983.56 | | |
| _ | l . | Mortgages and other notes payable (attach schedule) Other liabilities (describe ▶ Note due - vacuum system interest) | 47,565.50 | 65 | 35,002.59 1124.33 |
| | 65 | Other liabilities (describe > Note due - Vacuum system interest | | 03 | 1124.55 |
| | 66 | Total liabilities (add lines 60 through 65) | 47,983.56 | 66 | 36,126.92 |
| | | anizations that follow SFAS 117, check here ▶ ☑ and complete lines | • | | · |
| | Orga | 67 through 69 and lines 73 and 74. | | | |
| Ses | 67 | Unrestricted | 477,449.67 | 67 | 476,565.22 |
| an | 68 | Temporarily restricted | 41,580.24 | 68 | 27,032.00 |
| Bal | 69 | Permanently restricted | 659,822.06 | 69 | 670,837.12 |
| Fund Balances | l | anizations that do not follow SFAS 117, check here ▶ □ and | | | |
| Ţ | • | complete lines 70 through 74. | _ | | - |
| ō | 70 | Capital stock, trust principal, or current funds | 0 | 70 | 0 |
| ets | 71 | Paid-ın or capital surplus, or land, building, and equipment fund | 0 | | 0 |
| Net Assets or | 72 | Retained earnings, endowment, accumulated income, or other funds | 0 | 72 | 0 |
| ž A | 73 | Total net assets or fund balances (add lines 67 through 69 or lines | | | |
| ž | | 70 through 72; | 1,178,851.97 | | 1,174,434.34 |
| | | column (A) must equal line 19; column (B) must equal line 21) | | 73 | |
| | 74 | Total liabilities and net assets / fund balances (add lines 66 and 73) | 1,226,835.53 | 74 | 1,210,561.26 |

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.

Page 4

| Par | t IV-A | Financia | liation of Revenu I Statements with See page 27 of th | h Řevenue | per | Part | F | econciliation of inancial Statent eturn | of Expenses nents with | s pe | r Audited enses per |
|-----|----------------------------------------------------------|----------------------------|----------------------------------------------------------------------|--------------|------------------------------------------------------------|---------|---------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------|------------------------------------------------|------------------------|
| а | | | and other support | | | а | | enses and lo | • | | |
| b | • | ıncluded o | statements > n line a but not on | a | N/A | b | Amounts I | nancial statemen ncluded on line , Form 990: | | a | N/A |
| (1) | · · | lized gains | s | | | (1) | Donated and use of | services | | | |
| (2) | Donated | services of facilities | \$ | | | (2) | Prior year ac reported on | justments | | | |
| (3) | Recoverie | es of prior | • | | | (2) | Form 990 | <u>\$</u> | | | |
| (4) | Other (sp | | <u></u> | | | | (3) Losses reported on line 20, Form 990 . \$ (4) Other (specify): | | | | |
| | | | \$ s (1) through (4) ► | b | ////////////////////////////////////// | (,, | | \$ | | | |
| С | | | <u>-</u> | С | N/A | ٠ | | nts on lines (1) th | rough (4)> | b | N/A N/A |
| d | Amounts included on line 12, Form 990 but not on line a: | | | | d Amounts included on line 17, Form 990 but not on line a: | | | | | | |
| (1) | not includ | expenses | • | | | (1) | not include | d on line | | | |
| (2) | 6b, Form 9 Other (sp | 990 ecify) [.] | <u>\$</u> | | | (2) | • • | ecify): | | | |
| | | | \$ | d | ////////////////////////////////////// | | | \$ | | d | N/A |
| е | | | es (1) and (2) ne 12, Form 990 | | | e | | ints on lines (1) nses per line 17, | | ٦ | 1071 |
| Do | (line c plu | ıs lıne d) . | <u></u> | e | N/A | | (line c plus | s line d) | <u>, , , </u> | е | N/A |
| Par | | instruction | ers, Directors, Tr s.) | ustees, ar | ia key E | mpio | yees (List e | each one even if | not compen | sateo | ; see page 27 or |
| | | (A) Nam | e and address | | (B) Title and average hours per week devoted to position | | (C) Compensation (If not paid, enter -0) | (D) Contributions to employee benefit plans deferred compensation | | (E) Expense account and other allowances | |
| 508 | | ard, Glen | Rose, TX 76043 | | Director & President-50 | | | 66,717.50 15,6 | | 9.82 | 2190.24 |
| | ald Jenkin Pine Oak. | | ld, MO 65802 | | Vice-President - 5 hr. | | | 0 | 0 | | 0 |
| Cha | les Hiltibi | ital | boro, IL 62859 | | Sec-Tre | asure | r - 5 hr. | 0 | | 0 | 0 |
| | DOX 403, | | | | | | | | | | |
| | | ••••• | • • • • • • • • • • • • • • • • • • • • | | | | · · · · · · | | | | |
| | | | | ••••• | | | | | | | |
| | | | | | | | | | | · | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 75 | organizatio | on and all re | or, trustee, or key en lated organizations, o edule—see page 2 | of which mor | e than \$10 |),000 w | mpensation (vas provided | of more than \$100 by the related org | 0,000 from yo anizations? | our • | ☐ Yes ☑ No |

Form 990 (2003)

Part VI Other Information (See page 28 of the instructions.)

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| Par | t VI Other Information (See page 28 of the instructions.) | | Yes | No |
|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------|----------------------|
| 76 | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . | 76 | | <u> </u> |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? | 77 | | ✓ |
| | If "Yes," attach a conformed copy of the changes. | | | /////. |
| 78a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?. | 78a | | ✓ |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 78b | | √ |
| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement | 79 | | 1 |
| | Is the organization related (other than by association with a statewide or nationwide organization) through common | | | |
| oua | membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? | 80a | ,,,,,,, | 1 |
| . | If "Yes," enter the name of the organization ▶ | | | |
| D | · · · · · · · · · · · · · · · · · · · | | | |
| 01- | $1 \stackrel{\circ}{=} 1$ | | | |
| | | 81b | | unin. S |
| | Did the organization file Form 1120-POL for this year? | <u> </u> | | |
| 82a | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge | 82a | | ✓ |
| | or at substantially less than fair rental value? | | | |
| b | If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part II or as an expense in Part II. (See instructions in Part III.) | | | |
| | as totalize in the rest as an experies in the rest in | 83a | | |
| | Did the organization comply with the public inspection requirements for returns and exemption applications? | 83b | 1 | |
| | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | 84a | | |
| | Did the organization solicit any contributions or gifts that were not tax deductible? | ////// | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions | 0.46 | | ///////. S |
| | or gifts were not tax deductible? | 84b | | |
| 85 | 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? | 85a 85b | | |
| þ | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | ////// | | |
| | If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization | | | |
| | received a waiver for proxy tax owed for the prior year. Dues assessments and similar amounts from members 185c N/A | | | |
| | Dues, assessments, and similar amounts from members | | | |
| d | Section 162(e) lobbying and political experiorities | | | |
| e | Aggregate Horideducuble amount of section 0033(e)(1)(A) dues notices | | | |
| | laxable amount of lobbying and political experiences (inc obdites obt). | 85g | | |
| _ | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? | 039 | | _ |
| h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its | | | 1 |
| | reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax | 85h | | • |
| | year? | | | |
| 86 | 30 NC/(7) 0/93. Effect. a initiation fees and capital contributions included on line 12. | | | |
| | Gross receipts, included on line 12, for public use of club facilities | | | |
| 87 | 301(c)(12) digs Effet. a Gloss income from members of shaleholders | | | |
| þ | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) | | | |
| | Sources against amounts due of received from them. | | | |
| 88 | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or | | | 1 |
| | partnership, or an entity disregarded as separate from the organization under Regulations sections | 00 | | • |
| | 301.7701-2 and 301.7701-3? If "Yes," complete Part IX | 88 | | |
| 89a | 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: | | | |
| | 36CUOT 4317 - , 36CUOT 4312 - , 36CUOT 4333 - | | | |
| b | 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction | | | 1 |
| | during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach | 89b | | • |
| | a statement explaining each transaction | 030 | | |
| С | Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under | | | ٥ |
| | sections 4912, 4955, and 4958 | | | 0 |
| 00~ | List the states with which a copy of this return is filed TEXAS | | | - |
| ᄱ | Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) | | 9 | |
| 91 | The books are in care of ► CREATION EVIDENCE MUSEUM - Frances Snid Telephone no. ► (254)8 | | | |
| 91 | Located at ► 3102 F.M. 205, GLEN ROSE, TX ZIP + 4 ► 76043 | | | • • • • • • |
| 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 | • • | | ب |

Page 6

| Part | VII | Analysis of Income-Producing A | | | | | 1 |
|------------|----------|---------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------|--------------------------------------------------|-----------------------|-------------------------|
| Note | : Ent | er gross amounts unless otherwise | Unrelated | business income | Excluded by sec | tion 512, 513, or 514 | (É) Related or |
| ındıç | ated | | (A) | (B) | (C) | (D) | exempt function |
| 93 ` | Prog | ram service revenue: | Business code | Amount | Exclusion code | Amount | income |
| а | | RANCE FEES - MUSEUM TOURS | | | | | 23,295.00 |
| b | EDU | JCATIONAL PRODUCTS SOLD | · · · · · · · · · · · · · · · · · · · | | | | 144,242.14 |
| С | | · · · · · · · · · · · · · · · · · · · | | | | | |
| d | | | | + | | | |
| e | | | | | | | |
| f | | icare/Medicaid payments | 1 | | 1 | | |
| 9 | | and contracts from government agencie | es | | - | | |
| 94 | | bership dues and assessments | | - | | | |
| 95 | | est on savings and temporary cash investmen | its | | - | | |
| 96 | | dends and interest from securities | | | | | |
| 97 | | rental income or (loss) from real estate | | | | | |
| a | | financed property | • | | <u> </u> | | |
| | | debt-financed property | | | | | |
| 98 | | ental income or (loss) from personal propert | у | | | | |
| 99 | | er investment income | -: | | + | | |
| 100 | | or (loss) from sales of assets other than invento | · 1 | | | | 2878.27 |
| 101 | | income or (loss) from special events . ss profit or (loss) from sales of inventory | l l | | | | -890.00 |
| 102 103 | | er revenue: a REFUNDS RECEIVED | • | | | | 405.35 |
| ius b | | DENDS REC'D (Not from securities) | | | | | 328.01 |
| C | | CELLANEOUS | | | | | 75.00 |
| d | | | | | | | |
| e | | | | | | | |
| 104 | Subi | total (add columns (B), (D), and (E)) . | | | | | 170,333.77 |
| 105 | | I (add line 104, columns (B), (D), and (E |)) | | | . • | 170,333.77 |
| Note: | | 105 plus line 1d, Part I, should equal th | | | | | |
| Part | VIII | Relationship of Activities to the Ac | complishment | of Exempt Purp | ooses (See pa | ge 34 of the in | structions.) |
| Line | No. | Explain how each activity for which incom | ne is reported in co | lumn (E) of Part V | 'll contributed in | portantly to the | accomplishment |
| | <u> </u> | of the organization's exempt purposes (ot | | • | <u> </u> | | |
| 93 | | Admission fees for 14,628 persons a | ttending Creatio | n Science lectu | res & tours | | |
| 93 | b | Distribution of Creation educational | materials - book | s, videos, poste | ers, etc | | |
| 10 | | Special event - public excavation - at | tendance =208 | | | | |
| 10 | | Sale of Bronze statuettes for Fund ra | | | | | |
| Part | IX | Information Regarding Taxable Sub | | sregarded Entit | t ies (See page | 34 of the instru | T |
| | Nam | (A) ne, address, and EIN of corporation, | (B) Percentage of | (C | | (D) | (E) End-of-year |
| | | partnership, or disregarded entity | ownership interest | Nature of | activities | Total income | assets |
| | | | % | | | | |
| | | | % | | | | |
| | | | % | | | | |
| Down | V [| Information Departing Transfers Ass | % | anal Panaft Ca | mtmasta (Cas n | and 24 of the inc | tautions) |
| Part | | Information Regarding Transfers Ass | | | | | |
| | | ne organization, during the year, receive any funds, | | | | | ☐ Yes ☑ No |
| | | the organization, during the year, pay pr "Yes" to (b) , file Form 8870 and Form | | | a personai ber | ietit contract? | ☐ Yes 🗹 No |
| -1404 | | Under penalties of perjury, I declare that I have exar | | · · · · · · · · · · · · · · · · · · · | schodules and stat | ements and to the | nest of my knowledge |
| | | and belief, it is true, correct, and complete Declara | | | | | |
| Pleas | se | 1 Puells Par | | | 1 | 1/18/05 | , |
| Sign | | Signature of officer | <u></u> | | <u>l</u> | Date | |
| Here | | De Corl E Bouch Breeident & Die | | | | | |
| | | | | | | | |
| | | | | Date | Check if | Prenarer's SSN o | r PTIN (See Gen Inst. W |
| | | | | 1-310 | self- | | (occ och not 11 |
| | | | | | employed ► L | - | |

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 Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

| Name of the organization CREATION EVIDENCE MUSEUM | | Employer identification number 75 2075799 | | | | |
|-----------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------|--|--|
| Part I Compensation of the Five High (See page 1 of the instructions. I | est Paid Employees Of ist each one. If there ar | ther Than Office e none, enter "N | ers, Directors, a None.") | nd Trustees | | |
| (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 | | |
| NONE | N/A | N/A | N/A | N/A | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total number of other employees paid over \$50,000 ▶ | | | | | | |
| Part II Compensation of the Five High (See page 2 of the instructions. List | | | | | | |
| (a) Name and address of each independent contracto | | | of service | (c) Compensation | | |
| NONE | | N/A | | N/A | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total number of others receiving over \$50,000 for professional services ▶ | 0 | | | | | |

75-2075799 Page 2

Schedule A (Form 990 or 990-EZ) 2003

| 2 2 3 4 5 5 6 6 6 6 6 6 6 6 | attempor incumental organization organizatio | the year, has the organization attempted to influence national, state, or local legislation, including any of to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid arred in connection with the lobbying activities A, or line i of Part VI-B) | 1 2a 2b 2c 2d 2e 3a 3b | V | |
|---------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|----------|-------------|
| 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 2 | organii the lot During substa with al owner, transac Sale, e Lendin Furnisl Payme Transfo Do you de Do you Did yo | cations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of obying activities If the year, has the organization, either directly or indirectly, engaged in any of the following acts with any initial contributors, trustees, directors, officers, creators, key employees, or members of their families, or my taxable organization with which any such person is affiliated as an officer, director, trustee, majority or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the ctions.) exchange, or leasing of property? In go of money or other extension of credit? In thing of goods, services, or facilities? In the compensation (or payment or reimbursement of expenses if more than \$1,000)? In the compensation of the income or assets? In make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how extermine that recipients qualify to receive payments) In have a section 403(b) annuity plan for your employees? In maintain any separate account for participating donors where donors have the right to provide advice | 2b 2c 2d 2e 3a | <i>J</i> | ✓ ✓ ✓ |
| a : b : c : | substa with a owner, transac Sale, e Lendin Furnisi Payme Transf Do you you de Do you Did yo | initial contributors, trustees, directors, officers, creators, key employees, or members of their families, or my taxable organization with which any such person is affiliated as an officer, director, trustee, majority or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the ctions.) exchange, or leasing of property? go of money or other extension of credit? hing of goods, services, or facilities? ent of compensation (or payment or reimbursement of expenses if more than \$1,000)? er of any part of its income or assets? u make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how extermine that recipients qualify to receive payments) u have a section 403(b) annuity plan for your employees? u maintain any separate account for participating donors where donors have the right to provide advice | 2b 2c 2d 2e 3a | <i>y</i> | ✓ ✓ ✓ |
| b c d | Lendin Furnisi Payme Transfo Do you de Do you Did yo | ing of money or other extension of credit? | 2b 2c 2d 2e 3a | ✓ | ✓ ✓ ✓ |
| c d | Furnisl Payme Transf Do yoi you de Do yoi Did yo | hing of goods, services, or facilities? ent of compensation (or payment or reimbursement of expenses if more than \$1,000)? er of any part of its income or assets? u make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how etermine that recipients qualify to receive payments) u have a section 403(b) annuity plan for your employees? u maintain any separate account for participating donors where donors have the right to provide advice | 2c 2d 2e 3a | <i>J</i> | ✓ ✓ ✓ |
| d I | Payme Transfe Do you you de Do you Did yo | ent of compensation (or payment or reimbursement of expenses if more than \$1,000)? | 2d 2e 3a | 1 | ✓ |
| | Transf Do you you de Do you Did yo | er of any part of its income or assets? | 2e 3a | | ✓ |
| | Do yoi you de Do yoi Did yo | u make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how etermine that recipients qualify to receive payments) | 3a_ | | ✓ |
| | you de Do yoi Did yo | etermine that recipients qualify to receive payments) | | | <u> </u> |
| | Do yoi Did yo | u have a section 403(b) annuity plan for your employees? | 3b | | |
| | Did yo | u maintain any separate account for participating donors where donors have the right to provide advice | | | ✓ |
| | on the | use or distribution of funds? | | | 1 |
| | | use of distribution of funds: | 4 | | |
| Part | IV | Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions) | | | |
| The o | rganiz | ation is not a private foundation because it is: (Please check only ONE applicable box.) | | | |
| 5 | _ | church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). | | | |
| 6 | _ | school. Section 170(b)(1)(A)(ii) (Also complete Part V.) | | | |
| 7 L | | nospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). | | | |
| 8 L | | Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hos p | _:A_W_ | | |
| 9 Į | | d state ▶ | | | |
| 10 [| ☐ An | organization operated for the benefit of a college or university owned or operated by a governmental unit. Sect so complete the Support Schedule in Part IV-A.) | | | |
| 11a (| | organization that normally receives a substantial part of its support from a governmental unit or from the ction 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) | he gen | eral p | ublic |
| 11b [| □ A 0 | community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A) | | | |
| 12 | rec its | organization that normally receives. (1) more than 331/14% of its support from contributions, membership ceipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no mo support from gross investment income and unrelated business taxable income (less section 511 tax) from buthe organization after June 30, 1975. See section 509(a)(2) (Also complete the Support Schedule in Part I | re tha | n 337 | 5% of |
| 13 (| de | organization that is not controlled by any disqualified persons (other than foundation managers) and supp scribed in. (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of secti ction 509(a)(3)) | | | |
| | | Provide the following information about the supported organizations. (See page 5 of the instructions |) | | |
| | | (a) Name(s) of supported organization(s) (b) Line from | numb abov | | |
| | | | | | |
| 14 [| ☐ An | organization organized and operated to test for public safety. Section 509(a)(4) (See page 6 of the instruct | | | |

75-2075799

| | t IV-A Support Schedule (Complete only: You may use the worksheet in the instructions | | | | | accounting. |
|----------|---------------------------------------------------------------------------------------------------------|---------------------|---------------------|---------------------|---------------------|-----------------------------------------|
| Cale | ndar year (or fiscal year beginning in) . > | (a) 2002 | (b) 2001 | (c) 2000 | (d) 1999 | (e) Total |
| 15 | Gifts, grants, and contributions received (Do | | | | | |
| | not include unusual grants See line 28) | 363,683 | 377,556 | 361,288 | 591,614 | 1,694,141 |
| 16 | Membership fees received | 0 | 0 | 0 | 0 | 0 |
| 17 | Gross receipts from admissions, merchandise | | | | | |
| | sold or services performed, or furnishing of facilities in any activity that is related to the | | | | 004.400 | |
| | organization's charitable, etc., purpose | 176,056 | 217,150 | 206,222 | 234,460 | 833,888 |
| 18 | Gross income from interest, dividends, | | | | | |
| | amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and | | | | | |
| | unrelated business taxable income (less | | | | | |
| | section 511 taxes) from businesses acquired | | 40 | 40 | 404 | 054 |
| | by the organization after June 30, 1975 | 36 | 48 | 46 | 124 | 254 |
| 19 | Net income from unrelated business | | | _ | _ | 0 |
| | activities not included in line 18 | 0 | 0 | 0 | 0 | |
| 20 | Tax revenues levied for the organization's | | | | | |
| | benefit and either paid to it or expended on | o | o | 0 | o | 0 |
| | rts behalf | U | | • | | |
| 21 | The value of services or facilities furnished to the organization by a governmental unit | | | | | |
| | without charge Do not include the value of | | | | | - |
| | services or facilities generally furnished to the | 0 | o | 0 | o | 0 |
| | public without charge | | | | | <u> </u> |
| 22 | Other income. Attach a schedule. Do not | 41,580 | 37,256 | 50,298 | 156,491 | 285,625 |
| 22 | Include gain or (loss) from sale of capital assets | 581,355 | 632,010 | 617,854 | 982,649 | + · · · - · - · - · - · - · - · - · - · |
| 23 24 | Total of lines 15 through 22 | 405,299 | 414,860 | 411,632 | 748,229 | 1,980,020 |
| 25 | Enter 1% of line 23 | 5814 | 6320 | 6179 | 9826 | ammannamina a |
| | | | l | | ≥ 26a | N/A |
| 26 | Organizations described on lines 10 or 11: | | | | | |
| b | Prepare a list for your records to show the nar | me of and amoun | t contributed by | each person (oth | er than a | |
| | governmental unit or publicly supported organizamount shown in line 26a Do not file this list w | | | | | N/A |
| _ | Total support for section 509(a)(1) test: Enter li | • | | | iounes - | N/A |
| ر م | • • | | 19 | | | |
| · | • • | | | | ▶ 26d | N/A |
| е | Public support (line 26c minus line 26d total) | | | | 1 | N/A |
| f | | ator) divided by I | ine 26c (denomi | nator)) | ▶ 261 | N/A % |
| 27 | Organizations described on line 12: a Fo | or amounts includ | ded in lines 15. 1 | 6. and 17 that w | vere received fro | m a "disqualified |
| | person," prepare a list for your records to show | the name of, and | total amounts red | ceived in each yea | ar from, each "dis | qualified person ' |
| | Do not file this list with your return. Enter th | e sum of such ar | nounts for each y | year | | |
| | (2002) | | . (2000) | 0 | (1999) | 126,800 |
| b | For any amount included in line 17 that was recei | ived from each per | rson (other than "o | disqualified person | s"), prepare a list | for your records to |
| | show the name of, and amount received for each | | | | | |
| | (Include in the list organizations described in lines the difference between the amount received and | | | | | |
| | amounts) for each year: | J | • • • | * ** | | · |
| | (2002) 47,621 (2001) | 57,59 | . (2000) | 88,326 | (1999) | 974 |
| | | | | _ | | |
| C | Add: Amounts from column (e) for lines: 15 | 1,694,141 | 16 | 0 | 1 | 2 520 020 |
| | Add Amounts from column (e) for lines 15 17 833,888 20 Add Line 27a total . 126,800 | | 21 | <u> </u> | ▶ 27c | |
| d | Add Line 27a total126,800 | and line 27b tota | il 194, | 316 | ▶ 27d | · · · · · · · · · · · · · · · · · · · |
| е | Public support (line 27c total minus line 27d to | otal) | | | ▶ 27e | |
| f | Total support for section 509(a)(2) test: Enter a | | | | | |
| g h | Public support percentage (line 27e (numera Investment income percentage (line 18, coli | | | | | |
| 28 | Unusual Grants: For an organization describe | | | | | • |
| 40 | omusuar Grants: For an organization describe | ser in mile IV, II, | טו וב נוומנ ופנפול | rea any unusudi | granic during 18 | oo anough 2002 |

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Schedule A (Form 990 or 990-EZ) 2003

| Pai | Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV) | N/A |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 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? | Yes No |
| 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? | 31 |
| | If "Yes," please describe; if "No," please explain (If you need more space, attach a separate statement.) | |
| | | |
| 32 | Does the organization maintain the following: | |
| а | 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 |
| | 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? | |
| | 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 | |
| а | Students' rights or privileges? | 33a |
| b | Admissions policies? | 33b |
| С | Employment of faculty or administrative staff? | 33c |
| d | Scholarships or other financial assistance? | 33d |
| e | Educational policies? | 33e |
| f | Use of facilities? | 33f |
| 9 | 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.) | |
| | | |
| 34a | 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? | 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 |

| Pa | rt VI-A Lobbying Expenditures by E To be completed ONLY by an | | | | instructions.) | |
|------------------|---------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------|--------------------|-------------------------------------------------------|----------------------------------------------------|
| Che | ck ▶ a ☐ if the organization belongs to an affili | | | you checked "a" ar | nd "limited control" | provisions apply |
| | Limits on Lobby | • | | | (a) Affiliated group totals | (b) To be completed for ALL electing organizations |
| 36 | Total lobbying expenditures to influence public | | | 36 | N/A | N/A |
| 37 | Total lobbying expenditures to influence a legi | | | 37 | N/A | N/A |
| 38 | Total lobbying expenditures (add lines 36 and | - | | 38 | N/A | N/A |
| 39 | Other exempt purpose expenditures | | | | N/A | N/A |
| 40 | Total exempt purpose expenditures (add lines | | | | N/A | N/A |
| 41 | Lobbying nontaxable amount Enter the amou | | | | | |
| | | lobbying nontaxa | - | | | |
| | Not over \$500,000 20% | of the amount on | line 40 | 1 | | |
| | Over \$500,000 but not over \$1,000,000 \$100 | ,000 plus 15% of t | he excess over \$5 | 00,000 | | |
| | Over \$1,000,000 but not over \$1,500,000 . \$175 | ,000 plus 10% of th | e excess over \$1,0 | 000,000 } 41 | N/A | N/A |
| | Over \$1,500,000 but not over \$17,000,000 . \$225 | ,000 plus 5% of the | e excess over \$1,5 | 500,000 | | |
| | Over \$17,000,000 | 00,000 | | | | |
| 42 | Grassroots nontaxable amount (enter 25% of | line 41) | | | N/A | N/A |
| 43 | Subtract line 42 from line 36 Enter -0- if line | 42 is more than lir | ne 36 | | N/A | N/A |
| 44 | Subtract line 41 from line 38. Enter -0- if line | 41 is more than lır | ne 38 | 44 | N/A | N/A |
| | Caution: If there is an amount on either line 4 | 3 or line AA voil | must file Form A7 | 20 | | |
| | | | | | | |
| | (Some organizations that made a section | reraging Period | | | fivo ookumma ba | .lo.u |
| | See the instructions | | | | | :IOW |
| | | Lob | bying Expenditu | res During 4-Ye | ar Averaging Pe | riod |
| | Calendar year (or | (a) | (b) | (c) | (d) | (e) |
| | fiscal year beginning in) ▶ | 2003 | 2002 | 2001 | 2000 | Total |
| 45 | Lobbying nontaxable amount | | | | | N/A |
| 46 | Lobbying ceiling amount (150% of line 45(e)). | | | | | N/A |
| 47 | Total lobbying expenditures | | | | | N/A |
| 48 | Grassroots nontaxable amount | | | | | N/A |
| 49 | Grassroots ceiling amount (150% of line 48(e)) | | | | | N/A |
| 50 | Grassroots lobbying expenditures | | | | | N/A |
| Pa | rt VI-B Lobbying Activity by Nonele (For reporting only by organization) | | | Part VI-A) (See | page 12 of the | e instructions.) |
| | ng the year, did the organization attempt to infl mpt to influence public opinion on a legislative i | | | | Yes No | Amount |
| а | Volunteers | | | | | |
| | Paid staff or management (Include compensat | uon in expenses re | eported on lines | c through h.) | | |
| b | i did stati di management (include compensat | | | | | |
| b c | | · · | • | | | |
| b c d | Mandra advanta | | • | · · · · · | <i>.</i> | |
| b c d e | Media advertisements | · · · · · · · · · · · · · · · · · · · | • | | · · · / | |
| | Media advertisements | nents | • | | <i>y y y y y y</i> | |
| | Media advertisements | nents poses | | | · · - - - - - - - - - | |
| e f | Media advertisements | nents | or a legislative b | | · · - - - - - - - - - | N/A |

| Sche | dule A | A (Form 990 or 990-EZ) | | REATION EVIDENCE IN | IOSEOM | 75- 3 | 2075 | 799 | 9 . | age 6 |
|------|--------|------------------------|---------------------|-----------------------------------------------------------------------|-----------------|-------------------------|-------------|------------|--------|--------|
| | t VI | Information | n Regarding T | ransfers To and Transace page 12 of the instruction | | | | | | |
| 51 | | | | indirectly engage in any of the (1(c)(3) organizations) or in section | | | | | d in s | ection |
| а | | | | to a noncharitable exempt orga | | g to political orga | mzadoni | , | Yes | No |
| | | Cash | • • | to a nonchantable exempt orga | inzadon or. | | | 51a(i) | | 1 |
| | | Other assets . | | | | | • | a(ii) | | 1 |
| ь | | er transactions. | | | | | • | | | |
| | | | as of assots with a | noncharitable exempt organizat | uon | | | b(i) | | ✓ |
| | (ii) | • | | itable exempt organization | | | | b(ii) | | 1 |
| | (iii) | | | ner assets | | | • • | b(iii) | | 1 |
| | (iv) | | • • | | | | | b(iv) | | 1 |
| | (v) | | _ | · · · · · · · · · · · · · · · · · · · | | | • • | b(v) | | 1 |
| | | | | | | | | b(vi) | | 1 |
| _ | | | | sts, other assets, or paid emplo | | | • • | C | 1 | 1 |
| 4 | | | | complete the following schedule | | | the fair | market | value | of the |
| • | goo | ds, other assets, o | r services given by | the reporting organization. If the | ne organization | received less th | an fair n | | | |
| | tran | isaction or shanng a | rrangement, show in | column (d) the value of the good | s, other assets | , or services receiv | red | | | _ |
| - (| a) | (b) | | (c) | | (d) | | | | |
| Line | no | Amount involved | Name of none | charitable exempt organization | Description o | f transfers, transactio | ns, and sh | narıng arr | angem | ents |
| | | | N/A | | N/A | | | | | |
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| | des | | 01(c) of the Code (| affiliated with, or related to, on other than section 501(c)(3)) or i | | | | ☐ Yes | ; [| No No |
| | | (a) | | (b) | | (c) | | | | |
| | | Name of organiz | zation | Type of organization | | Description of r | elationship | | | |
| | | | | N/A | N/A | | | | | |
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3102 FM 205 at Paluxy Bridge P O Box 309, Glen Rose, Texas 76043 EIN# 75-2075799 (254) 897-3200 FAX (254) 897-3100

SUPPORTING SCHEDULES FORM 990 Fiscal year August 1, 2003 - July 31, 2004

LINE 9 C: Special event and activities

Public excavation event held July 5th through 16th, 2004

 Gross Receipts
 \$ 5907.50

 Less Expenses
 3029.23

Net Income 2878.27

LINE 10 C: Fundraising Event – continuation of sale of Bronze Statuettes

Gross Receipts \$ 10,500.00
Contributions portion (reported on Line 1A) (600.00)
Net Receipts 9,900.00
Expenses – production of Bronze pieces 10,790.00

Net Loss (890.00)

There is still an amount due in accounts receivable for these Bronzes. This fund raising event was started for the purpose of raising funds for the completion of the new Museum building.

мемо:

Distribution of educational materials income through Creation lectures, tours of museum, and phone and mail requests for information on Creation science is now listed on line 43c.

LINE 42: Depreciation

Please see attached Supporting Schedules for Depreciation information.

LINE 56: Land owned in Colombia, South America which was purchased in 2002

These 41 acres of land contain numerous fossils, ammonites and various other fossils which are extremely important paleontalogical finds, emphasizing the educational and scientific research as outlined in Part III-b of the Museum's Program Service Purposes.

LINE 57c: Land, buildings and equipment basis.

See attached supporting schedules for Equipment, Buildings, Furniture and Fixtures, and Autos as well as basis for land and depreciation of assets.

LINE 58: See attached supporting schedule of Fossils and Artifacts.

. LINE 64 B Liabilities

| Purpose | Name | Original Amt | Balance | Note Date | Maturity | Terms | Int. Rate |
|----------------------------------------------|----------------------------------|--------------|-----------|--------------|-------------|---------|-----------|
| Vehicle | Ford Motor Credit | 49,893.99 | 23,413.59 | 12/01 | 12/06 | Monthly | 9% |
| Vacuum System for Hyperbaric Biosphere | 1 st National Bank | 11,589.00 | 11,589.00 | 7/31/04 | 8/06 | Monthly | 8.75% |
| Private Note | Carl & Martha Baugh | 1,124.33 | 1,124.33 | 7/31/0 | 4 8/05 | Monthly | 0% |

3102 FM 205 at Paluxy Bridge P O Box 309, Glen Rose, Texas 76043 EIN# 75-2075799 (254) 897-3200 FAX (254) 897-3100

SUPPORTING SCHEDULES FORM 990 Fiscal year August 1, 2001 – July 31, 2002

PART IV Schedule A LINE 22

| Year 1997 | 48,125.00 | Building Fund Contributions |
|-----------|------------|------------------------------------|
| Year 1998 | 70,219.54 | Building Fund Contributions |
| Year 1999 | 156,491.25 | Building Fund Contributions |
| Year 2000 | 50,298.00 | Building Fund Contributions |
| Year 2001 | 37,256.00 | Building Fund Contributions |
| Year 2002 | 41,580.00 | Building Fund Contributions |

| DEPRECIATION SUMMAR | RY | 2003-2004 | | |
|---------------------------------|----------------------------------------|----------------|-------------------------------|--------------|
| | ······································ | | | |
| DESCRIPTION | | ACCUMULATED | DESCRIPTION | FY 2003-200 |
| | | DEPRECIATION | | DEPRECIATION |
| | | LINE 57B | | LINE 42 |
| VEHICLES | | 48410 00 | VEHICLES | 2950 |
| FURNITURE & FIXTURES | | 10497 47 | FURNITURE & FIXTURES | 2452 |
| BUILDING IMPROVEMENT | rs | 202457.76 | (Error found in previous Yrs) | -1713 |
| Old Building | | | Total 738 38 | |
| New Bldg, Prep Lab | | | MOBILE OFFICE | 150 |
| Portable Office | | | PREP LAB/RESTROOM | 1912 |
| EQUIPMENT | | 273041.40 | BUILDING IMPROVEMENTS | 23791 |
| | | | EQUIPMENT | 22319 |
| ACCUM. DEPRECIATION | | \$534,406 63 | TOTAL DEPRECIATION | \$51,861. |
| | | | FOR THIS YEAR | |
| | ASSET VALUES | TOTAL VALUE | | |
| | | | | |
| VEHICLES | | \$83,388 79 | | |
| FURNITURE & FIXTURES | | \$21,526.89 | | |
| BUILDING IMPROVEMEN | ГS | \$456,306 02 | | |
| OLD BUILDINGS | 98000 00 | | | |
| NEW BUILDING | 321870.84 | | | |
| PREP LAB | 27685 18 | | | |
| PORTABLE OFFICE | 8750 00 | | | |
| EQUIPMENT | | \$341,055.35 | | <u> </u> |
| SMALL EQUIPMENT (unde | 31852 85 | | | |
| EQUIPMENT (over \$100 | | | | |
| | | | | |
| | | | | |
| | | | | |
| TOTAL FIXED ASSETS | | \$902,277 05 | | |
| LAND | | 131000.00 | | |
| ARTIFACTS | | 670837.12 | | |
| TOTAL ASSETS | , , , , , , , , , , , , , , , , , , , | \$1,704,114 17 | | |