## 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

OMB No 1545-0047

Internal Revenue Service

benefit trust or private foundation) Open to Public Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection 2003, and ending , 2004 For the 2003 calendar year, or tax year beginning D Employer identification number B Check if applicable ise IRS 36:3204436 Address change label or E Telephone number print or \*\*AUTO\*\*SCH 5-DIGIT 85016 Name change type CENTER FOR SCIENTIFIC CREATION (602) 955-7663 Initial return Specific 5612 N 20TH PL P 205 Final return Instruc-PHOENIX AZ 85016-3102 14 ☐ Other (specify) ▶ Amended return H and I are not applicable to section 527 organizations Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable Application pending trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(b) If "Yes." enter number of affiliates ▶ www.creationsciepce.com G Website: ▶ H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list See instructions) Organization type (check only one) ► \$\infty\$ 501(c) ( H(d) Is this a separate return filed by an Check here ▶ ☐ if the organization's gross receipts are normally not more than \$25,000 The organization covered by a group ruling? Yes No organization need not file a return with the IRS, but if the organization received a Form 990 Package Group Exemption Number ▶ in the mail, it should file a return without financial data. Some states require a complete return. Check ▶ ☐ If the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF). Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.) Part I Contributions, gifts, grants, and similar amounts received: 12,915.95 1a a Direct public support . . . . 1b **b** Indirect public support 1c c Government contributions (grants) 12,915.95 d Total (add lines 1a through 1c) (cash \$ \_\_ 2 Program service revenue including government fees and contracts (from Part VII, line 93) 2 3 3 4 755.66 4 Interest on savings and temporary cash investments Dividends and interest from securities . 6a Less: rental expenses . . . 6с Net rental income or (loss) (subtract line 6b from line 6a) Other investment income (describe > (A) Securities (B) Other Gross amount from sales of assets other 8a than inventory . . . . . . . Less: cost or other basis and sale Gain or (loss) a feeth to be be. Special events and activities (attach schedule) If any amount is from gaming, check here Gross received for the luding \$ \_\_\_\_\_\_ of contributions reported on-line 1a) Less: direct expenses other than fundraising expenses 9с Net income or floss) from special events (subtract line 9b from line 9a) Gross sales of inventory, less returns and allowances . . . Less cost of goods sold . . . . . . . . . . . . 10b 23.054.49 10c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) . 11 Other revenue (from Part VII, line 103) Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 4,781.95 13 Program services (from line 44, column (B)) 14 112,214,60 Management and general (from line 44, column (C)) . 14 15 Fundraising (from line 44, column (D)) . . . . . 15 16 16 Payments to affiliates (attach schedule) . . . 116,996.55 Total expenses (add lines 16 and 44, column (A)) 17 17 18 (55,976.32)18 Excess or (deficit) for the year (subtract line 17 from line 12) . . . . 19 <u>164.834.87</u> 19 Net assets or fund balances at beginning of year (from line 73, column (A)) .

20 Š

Other changes in net assets or fund balances (attach explanation). . .

Net assets or fund balances at end of year (combine lines 18, 19, and 20)

20

108,858,55

	Functional Expenses and section 4947(a	)(1) none	xempt charitable trusts bu	rt optional for others. (S	See page 22 of the instr	uctions.)
	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
?	Grants and allocations (attach schedule) (cash \$)	22				
}	Specific assistance to individuals (attach schedule)	23				
}	Benefits paid to or for members (attach schedule)	24				
5	Compensation of officers, directors, etc	25	97,500.00		97,500.00	)
;	Other salaries and wages	26				
'	Pension plan contributions	27				
}	Other employee benefits	28	7 450 04		E 450 04	
)	Payroll taxes	29	7,459.01		7,459.01	
	Professional fundraising fees	30				
	Accounting fees	31				
	Legal fees	32	2 745 57		2 745 51	2
	Supplies	33	2,715.57 1,017.43		2,715.57 1,017.43	
	Telephone	34		4 701 05	1,017.43	)
	Postage and shipping	35 36	4,781.95 3,522.59	4,781.95	3,522.59	<del></del>
	Occupancy	37	3,322.33		3,322.33	
	Equipment rental and maintenance	38	,,,			
	Printing and publications	39				
	Travel	40				
	Interest	41				
	Depreciation, depletion, etc. (attach schedule)	42				
	Other expenses not covered above (itemize): a	43a				
b	Other expenses not covered above (itemize). a	43b				-
		43c				
		43d				
e	***************************************	43e				
	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13—15	44	116,996.55	4,781.95	112,214.6	50
int ar Ye:	Costs. Check ► ☐ if you are following SOP y joint costs from a combined educational campaign s," enter (i) the aggregate amount of these joint costs amount allocated to Management and general \$	and fu	; (ii) the ; and (iv) the	amount allocated tamount allocated	to Program services to Fundraising \$	
	Statement of Program Service Acc					D
org clie	is the organization's primary exempt purpose? panizations must describe their exempt purpose au nts served, publications issued, etc. Discuss ach zations and 4947(a)(1) nonexempt charitable trusts	chiever ieveme	ments in a clear and ents that are not me	concise manner. asurable. (Section	State the number 501(c)(3) and (4)	Expenses (Required for 501(c)) Ind (4) orgs, and 4947 (1) trusts, but options for others)
	To study and explain the s the creation and the flood	cie				# <sub>4,781.95</sub>
	(0	Brants	and allocations	· · · · · · · · · · · · · · · · · · ·	)	
			and allocations			<del>-</del> .
	•••••••					
	•••••••••••••••••••••••••••••••••••••••					
			•••••	•••••		

(Grants and allocations

e Other program services (attach schedule) (Grants and allocations \$
f Total of Program Service Expenses (should equal line 44, column (B), Program services).

Part IV	Ralance	Shoots	(200	nage	25 of	tha	instructions.)	
	balance	Sneets	1066	paue	20 01	uie	mstructions.,	,

		<u> </u>				
Note:		Where required, attached schedules and amounts column should be for end-of-year amounts only	within the description	(A) Beginning of year		(B) End of year
	45			11,010.94	45	12,051.00
	46	Savings and temporary cash investments .		38,758.16	46	0.00
	.•	carrigo and temperary saon investments.				
	47a	Accounts receivable	47a			
		Less: allowance for doubtful accounts	47b		47c	
	48a	Pledges receivable	48a			
		Less: allowance for doubtful accounts	48b		48c	<u>-</u>
	49	Grants receivable			49	
	50	Receivables from officers, directors, truste				
		(attach schedule)			50	
	51a	Other notes and loans receivable (attach				
ş		schedule)	51a			
Assets	b	Less: allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use		115,065.77	52	96,807.55
	53	Prepaid expenses and deferred charges .			53	
	54	Investments—securities (attach schedule).	▶ ☐ Cost ☐ FMV	,	54	
	55a	Investments-land, buildings, and				
		equipment: basis	55a			
	b	Less: accumulated depreciation (attach		•		
		schedule)	55b	•	55c	
	56	Investments—other (attach schedule)	· ·		56	
		Land, buildings, and equipment basis	57a			
	Ь	Less: accumulated depreciation (attach	57b		57c	
	58	schedule)			58	
	-	Other assets (describe >	· · · · · · · · · · · · · · · · · · ·		-	<u> </u>
	59	Total assets (add lines 45 through 58) (must	t equal line 74)	164.834.87	59	108.858.55
	60	Accounts payable and accrued expenses .			60	<u> </u>
	61	Grants payable		<u> </u>	61	
	62	Deferred revenue , , , , , , , , , ,			62	
es	63	Loans from officers, directors, trustees, and	d key employees (attach			
		schedule)			63	
Ljabilities	64a	Tax-exempt bond liabilities (attach schedule)			64a	
		Mortgages and other notes payable (attach	schedule)		64b	
	65	Other liabilities (describe ►	)		65	
	66	Total liabilities (add lines 60 through 65) .			66	
		nizations that follow SFAS 117, check here	and complete lines		WWW.	
	Orga	67 through 69 and lines 73 and 74.	and complete lines			
Š	67	Unrestricted			67	
<u>a</u>	68	Temporarily restricted			68	
Ba	69	Permanently restricted			69	
Fund Balances	Orga	inizations that do not follow SFAS 117, check	there ▶ 🗌 and			
굔		complete lines 70 through 74.				
ō	70	Capital stock, trust principal, or current fund			70	
ets	71	Paid-in or capital surplus, or land, building,		164 024 07	71	100 050 55
155	72	Retained earnings, endowment, accumulated		164,834.87	72	108,858.55
Net Assets	73	Total net assets or fund balances (add line	es 67 through 69 or lines	164,834.87		108,858.55
Ž		70 through 72; column (A) must equal line 19; column (B) n		73	. 30,000,00	
	74	Total liabilities and net assets / fund balance		164,834.87	74	108,858.55
			,	·		

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.

Par	t IV-A	Reconciliation of Reversion Financial Statements we Return (See page 27 of	ith Revenue	eper	Part	F	leconciliation of inancial Stater leturn			
а		nue, gains, and other suppo			а		enses and lo		<i>a</i>	N/////////////////////////////////////
b	Amounts line 12, F	included on line <mark>a</mark> but not o orm 990:	n <b>////////////////////////////////////</b>		b		ncluded on line , Form 990:	a but not		
(1)	Net unrea	lized gains nents <b>\$</b>			(1)	Donated and use of				
(2)		services of facilities \$			(2)	Prior year acreported or	-			
(3)		es of prior ts \$			(3)	Form 990 . Losses rep	<u>\$</u>	<del></del>		
(4)	Other (sp					line 20, For Other (spe	rm 990 . <b>\$</b>	<del></del>		
	Add amou	\$ ints on lines (1) through (4) I	_				<u>\$</u>			
С	Line a mı	nus line <b>b</b> .	► c		c		nts on lines (1) th	•	b	
d		included on line 12, but not on line a:			d	Amounts i	ncluded on line but not on line	17,		
(1)		expenses			(1)	Investment not include	•			
(2)	6b, Form 9 Other (sp	990 <b>\$</b> ecify):	- \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		(2)	6b, Form 99 Other (spe	90 <u>\$</u>			
		\$					<b>\$</b>			
е		unts on lines (1) and (2) Innue per line 12, Form 99	1 1		e		nts on lines (1) nses per line 17,		d	
Par	(line <b>c</b> plu t <b>V Li</b> s	is line d)	<u> </u>	nd Key I	Employ	(line c plus	s line <b>d</b> )	<u> ▶  </u>	e atec	i; see pa
		(A) Name and address	ı			ge hours per to position	(C) Compensation (If not paid, enter	(D) Contributions employee benefit p deferred compens	lans &	(E) Ex account a
V	Walter	T. Brown, Jr.	Z 85016	Pres			.55,000			0.
.s.	Marga	ret H. Brown Pl, Phoenix, A		Secr	etar	у &	35,000 \	l	0	0.
I	Bradle	y.WAnderson e, Ottertail, M		Trus		1 hr.	0.00	0.0		0.
V	Villia ob Lan	m Ball e Dr, Indianapo 46	lis, IN	.]	tee	1 hr.	0.00	0.0	<b>)</b>	0.
		-Bauer Ave,Wheaton,I	L-60187	Trus	tee	1 hr.	0.00	0.0	0	0.
		Block								
:hes	nights sneyP.	bridge Dr. ark, IL 61115		Trus	tee	1 hr.	0.00	0.0	0	0.

Form	990 (2003) ,			age 5
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		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	,,,,,,,	X
	If "Yes," attach a conformed copy of the changes.			//////////////////////////////////////
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?.	78a		X
b	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			X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		uugi.
h	If "Yes," enter the name of the organization ▶			
	and check whether it is exempt or nonexempt.			
81a	Enter direct and indirect political expenditures. See line 81 instructions			<i>//////.</i>
	Did the organization file Form 1120-POL for this year?	81b		X
	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	1		Х
	or at substantially less than fair rental value?	82a	,,,,,,,	,,,,,,,
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]			
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b 84a	Λ	X
	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	84b		<i>'//////.</i>
05	or gifts were not tax deductible?	85a		
85 h	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization			
	received a waiver for proxy tax owed for the prior year.			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices   85e	-////		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) Last			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
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	85h		
06	year?			
86 L	501(c)(7) orgs. Enter. a Initiation fees and capital contributions included on line 12.  Gross receipts, included on line 12, for public use of club facilities			
87 87	501(c)(12) orgs. Enter: a Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other			
_	sources against amounts due or 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		l
	partnership, or an entity disregarded as separate from the organization under Regulations sections			х
	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: section 4911 ▶			
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
	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	Enter Amount of tax on line 89c, above, reimbursed by the organization			
	List the states with which a copy of this return is filed ▶ Illinois.	· • • • • • • •		
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.)  The books are in care of Proving Telephone no. (602)		766	
91	The books are in care of Located at Located	≀.⊃.⊃.÷. }	ממג	د
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here	·		<b></b> □
<i>-</i>	and enter the amount of tax-exempt interest received or accrued during the tax year   92	· ·	· · ·	

	ter gross amounts unless otherwise	Unrelated be	usiness income	Excluded by sec	tion 512, 513, or 514	(E) Related or
indicated.	•	(A) Business code	(B) Amount	(C) Exclusion code	<b>(D)</b> Amount	exempt function
<b>93</b> Prog	gram service revenue:	Dusiness code	Amount	Exclusion code	Amount	income
a		_				
ь						
c						
d						
e		<del>-</del>				<b></b>
	dicare/Medicaid payments			<u> </u>		
_	s and contracts from government agencie					<del>                                     </del>
	mbership dues and assessments		\$755.66	-		
	rest on savings and temporary cash investment	IS 0020	\$133.00			_
	dends and interest from securities					
	rental income or (loss) from real estate:					
	t-financed property		· · · · · · · · · · · · · · · · · · ·			<del> </del>
	debt-financed property		-			<del>                                     </del>
	rental income or (loss) from personal property					
	er investment income					
	income or (loss) from special events .	-				
	ss profit or (loss) from sales of inventory			<u> </u>		47.052.60
	er revenue: a					295.96
	er revenue. a					2,5.5
		_				
e						
	ototal (add columns (B), (D), and (E)) .	. /////////////////////////////////////	755.66			47,348.62
	al (add line 104, columns (B), (D), and (E)				. ▶	48,104.28
	105 plus line 1d, Part I, should equal the	e amount on line	12, Part I.			
Part VIII	Relationship of Activities to the Ac	complishment of	Exempt Purpo	oses (See pa	ge 34 of the ins	structions.)
Line No.	Explain how each activity for which income				portantly to the a	accomplishment
	of the organization's exempt purposes (oth					
102	Book sales provide pe	<u>ople with</u>	<u>the evide</u>	ence for	<u>creatio</u>	<u>n and</u>
	the flood					
_103_	Speaking engagements		teners of	<u>f the ev</u>	vidence f	or
_	creation and the floo	<u>d</u>				
Part IX	Information Regarding Taxable Subs		regarded Entitie	s (See page	34 of the instru	
Nan	(A) me, address, and EIN of corporation,	(B) Percentage of	(C) Nature of a		(D)	(E) End-of-year
j	partnership, or disregarded entity c	ownership interest		201010165	Total income	assets
	····	%			-	<u> </u>
		%				<u> </u>
		%	•			<u> </u>
D-w V	Information Regarding Transfers Asso	%	nal Panafit Can	traata (Coo no	age 24 of the inc	tructions \
Part X				····	-	
	he organization, during the year, receive any funds,					∐ Yes ∐ No
	the organization, during the year, pay pre			personal ber	efit contract?	∐ Yes ∐ No
NOTE: IT	"Yes" to (b), file Form 8870 and Form 4	<del></del>		hadules and st-t	omonte and to the l	aget of my knowled
1	Under penalties of perjury, I declare that I have examine beher it is true, corred, and complete Declare	fine of preparer (other	than officer) is based	l on all information	on of which prepare	has any knowledge
				1	40	
			7		13 May	2004
		0.7	-			

## **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.)

2003

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			Linployer identifica	aon number
Part I Compensation of the Five High (See page 1 of the instructions. L	est Paid Employees O	ther Than Office e none, enter "N	ers, Directors, a	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
N/A				
••••••				
Total number of other employees paid over \$50,000				
Part II Compensation of the Five Higher (See page 2 of the instructions. Lis				
(a) Name and address of each independent contractor	· · · · · · · · · · · · · · · · · · ·		of service	(c) Compensation
N/A				
Total number of others receiving over \$50,000 for professional services				

MAGE	

Pai	rt II	Statements About Activities (See page 2 of the instructions.)	Yes	No
1	atte or	ring the year, has the organization attempted to influence national, state, or local legislation, including any empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities   \$\Bigsim \$\text{\$\t		х
	org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other panizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of blobbying activities.		
2	sul wit	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any ostantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or h any taxable organization with which any such person is affiliated as an officer, director, trustee, majority ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)		
а	Sa	le, exchange, or leasing of property?		X
b		nding of money or other extension of credit?		Х
c		rnishing of goods, services, or facilities?		Х
d		yment of compensation (or payment or reimbursement of expenses if more than \$1,000)? 2d		X
e		unsfer of any part of its income or assets?		X
3a		you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how		X
ou		determine that recipients qualify to receive payments.)		
b	-	you have a section 403(b) annuity plan for your employees?		Х
4	Dic	you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?		х
Pa	rt I\	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)		
The	ora	anization 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	H	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)		
7	ĭ	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).		
8	$\exists$	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 and state ▶	s nam	e, city
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1 (Also complete the <b>Support Schedule</b> in Part IV-A)	70(b)(1	)(A)(iv)
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the generation 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	eneral	public
11b		A community trust. Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)		
12		An organization that normally receives: (1) more than 331/3/% of its support from contributions, membership feed receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more the its support from gross investment income and unrelated business taxable income (less section 511 tax) from business by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	an 33 ses ac	⅓% o
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 5 section 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 num from abo		
		,		
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions	١	

Pa Note	rt IV-A Support Schedule (Complete on e: You may use the worksheet in the instruction:	ly if you checked	a box on line 10,	11, or 12.) <b>Use</b> of the cash metho	cash method of	accounting.
	ndar year (or fiscal year beginning in) . >	(a) 2002	<b>(b)</b> 2001	(c) 2000	(d) 1999	(e) Total
15	Gifts, grants, and contributions received. (Do				· · · · · · · · · · · · · · · · · · ·	
	not include unusual grants. See line 28.).	11437.15	52709.18	10842.00	11208.30	86196.63
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	94476.13	103724.03	38195.67	74053.1	7 310413.00
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 by the organization after June 30, 1975.	1600.58	698.52	1393.80	4726.0	8418.93
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
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 public without charge.					
22	Other income. Attach a schedule Do not					
	include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22 1	07513.86	157131.73	50395.4	7 89987.5	405028.5
24	Line 23 minus line 17	13037.73	53407.70	12235.80	15934.3	
25	Enter 1% of line 23	130.38	1571.32		899.8	
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colum	n (e), line 24.	▶ 26a	1892.31
b	Prepare a list for your records to show the nai governmental unit or publicly supported organi amount shown in line 26a <b>Do not file this list w</b>	zation) whose tota	al gifts for 1999 th	rough 2002 exce	eded the lounts > 26b	57733.00
	Total support for section 509(a)(1) test. Enter I	ne 24, column (e)			▶ 26c	94615.56
	22	8418.93	19 26b 57733.	00	▶ <u>26d</u>	66151.93
e f	Public support (line 26c minus line 26d total)  Public support percentage (line 26e (numera	ator) divided by I	·	nator))	▶ 26f	28463.63 30%
27	Organizations described on line 12: a For person," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and	total amounts rec	eived in each yea	rere received from tr from, each "disc	m a "disqualified qualified person."
	(2002) (2001)					
b	For any amount included in line 17 that was received 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:  (2002) (2001)	year, that was mo 5 through 11, as w the larger amount	re than the larger vell as individuals.) t described in (1) o	of (1) the amount <b>Do not file this lis</b> or (2), enter the so	on line 25 for the yet with your return um of these difference.	year or (2) \$5,000.  1. After computing ences (the excess
^	Add: Amounts from column (e) for lines: 15				. (1999)	•••••
C	17 20				▶ 27c	
d		and line 27b tota				
e	Public support (line 27c total minus line 27d to					
f	Total support for section 509(a)(2) test: Enter a					
	Public support percentage (line 27e (numera					%
		, witiwid by I	(40110111111	~~VIII		/0
g h	Investment income percentage (line 18, colu					%

Fair	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	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		
32 a	Does the organization maintain the following  Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b c	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
d	with student admissions, programs, and scholarships?	32c 32d		
33	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)  Does the organization discriminate by race in any way with respect to.			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b 33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g 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		

	rt VI-A Lobbying Expenditures by El (To be completed ONLY by an	eligible organi	zation that file	ed Form 5768	3)		
Che	ck ▶ a ☐ if the organization belongs to an affilia	ated group. Che	eck ▶ b 🗌 i	f you checked "a"	and "li	mited control	" provisions apply
	Limits on Lobbyi	•			Af	(a) filiated group totals	(b) To be completed for ALL electing
	(The term "expenditures" mea	ns amounts paid	or incurred)			totais	organizations
36	Total lobbying expenditures to influence public	opinion (grassro	ots lobbying)	<u>  3</u>	<del></del>	<del> · · · · · · · · · · · · · · · · · · </del>	
37	Total lobbying expenditures to influence a legis						-
38	Total lobbying expenditures (add lines 36 and	37)					
39	· · · · · ·			4	_		<del> </del>
40	Total exempt purpose expenditures (add lines	•		4			
41	Lobbying nontaxable amount. Enter the amour		-				
		obbying nontaxa		. 4///			
	Not over \$500,000			1 4///			
	Over \$500,000 but not over \$1,000,000 \$100,000	•		1 1 .	1		
	Over \$1,000,000 but not over \$1,500,000 . \$175,00 over \$1,500,000 but not over \$17,000,000 . \$225,000 over \$17,000,000 .						
		0,000 pius 5% of the		1 1////			
42	Grassroots nontaxable amount (enter 25% of						
43	Subtract line 42 from line 36. Enter -0- if line 4			l l	3		
44	Subtract line 41 from line 38. Enter -0- if line 4			· · · · · <del>- ·</del>	1		
• •		, to more than in					
	Caution: If there is an amount on either line 43	3 or line 44, you n	nust file Form 4	720.			
	(Some organizations that made a section See the instructions for	or lines 45 throug	do not have to the 50 on page 1 bying Expendit	1 of the instruct	ions)	·····	
	Calendar year (or	(a)	(b)	(c)		(d)	(e)
	fiscal year beginning in) ▶	2003	2002	2001		2000	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						
Pa	t VI-B Lobbying Activity by Nonelec						. <b></b>
	(For reporting only by organiza	tions that did r	not complete	Part VI-A) (Se	e pag	e 12 of th	e instructions.)
	ng the year, did the organization attempt to influ		_		g any	Yes No	Amount
	npt to influence public opinion on a legislative m	natter or reference	um, through the	use of			
a	Volunteers						<i>*////////////////////////////////////</i>
b	Paid staff or management (Include compensate	•	· ·	c through n.)			
۲ 0	Media advertisements						1
d e	Publications, or published or broadcast statem					<del>                                      </del>	<del>                                     </del>
f	Grants to other organizations for lobbying purp						
g	Direct contact with legislators, their staffs, gove		or a legislative !	body			
h	Rallies, demonstrations, seminars, conventions						
i	Total lobbying expenditures (Add lines c through	ah <b>h.</b> )					
	If "Yes" to any of the above, also attach a state	ement giving a de	etailed description	on of the lobbyii	ng acti	vities.	

Par	t VI		n Regarding Toganizations (Se				Relationships	With	Nonc		able	
51	Did the reporting organization directly or indirectly engage in any of 501(c) of the Code (other than section 501(c)(3) organizations) or in s											
а	Tran	sfers from the rep	orting organization	to a noncharitat	ole exempt orga	nization of:				Yes	No	
		(i) Cash						1	51a(i)			
	• • •	(ii) Other assets							a(ii)			
h	<b>b</b> Other transactions:								•			
	(i) Sales or exchanges of assets with a		nonoharitable o	vomat organizat	ion			b(i)				
									b(ii)			
	(ii) Purchases of assets from a noncharitable			•	•				b(iii)			
	(iii) Rental of facilities, equipment, or other assets											
	(iv) Reimbursement arrangements								b(iv)			
		•	arantees						b(v)			
	(vi)	Performance of se	ervices or members	hip or fundraisir	ng solicitations				b(vi)			
С	c Sharing of facilities, equipment, mailing lists, other assets, or pa				, or paid employ	ees		!				
d	goo	ds, other assets, o	r services given by	e above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the services given by the reporting organization. If the organization received less than fair market value in any ngement, show in column (d) the value of the goods, other assets, or services received:								
	a)	(b) (c)					(d)					
Line no		Amount involved	Name of noncharitable exempt organization			Description of transfers, transactions, and sharing arrangements						
					-	· · · · · · · · · · · · · · · · · · ·						
	-						· · · · · · · · · · · · · · · · · · ·					
				<del> </del>					-			
				<del></del>								
									·			
						<del></del>						
							<del> </del>					
	des	cribed in section 5	rectly or indirectly a 01(c) of the Code (a following schedule	other than section					☐ Yes		No	
(a)			(t		(c)							
		Name of organiz	ation	Type of or	ganization		Description of re	lationship				
				•								
			-									
							**					
						<del></del>						
				,								
								· -				
						<del> · · · · · · · · · · · · · · · · · </del>						
					<u> </u>							