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)

2004 Open to Public

-Inter	nal Reve	nue Service	► The organization may h	ave to use a copy of this return to	satisfy state rep	orting requirements		Inspection
			year, or tax year beginning	, and ending				
В		applicable Plea					D Emp	oloyer identification no.
Г	7	use 1	RS					-1521697
ı	7	change print	THE CONTROL THE	ITUTE		İ		phone number
	Initial r	4		mail is not delivered to street addr	ess)	Room/suite		priorio mantipor
-	Final re	, e.	Transportant on cor (or 1 or box ii		C33)	808	F Acc	ounting method: Casi
\vdash	7	Spec					X Accr	
-	1	linstri	uc-l	WA 9810	1		ACCI	ual Other (specify)
_] Applica	ation pending tion	Section 501(c)(3) organizations and 494			not applicable to sec	tion 527 or	
			, , , , ,			* *		·
G	Moboit		trusts must attach a completed Schedu DISCOVERY . ORG	ie A (Form 950 or 950-EZ).	1 ''	nis a group return for		Yes 🔼 No
			DIBCOVERT : ORG	 _	7`'	es," enter number of		
J	-	ization type	X 501(c) (3) ≤ (insert no)	☐ 4047(a)(4) or ☐ 537	` '	all affiliates included		Yes No
_			- '	4947(a)(1) or 527	_	No," att a list See in		
K		_	the organization's gross receipts are no			nis a separate return i	•	. n. m.
			not file a return with the IRS, but if the o	-		anization covered by		ng? Yes No
		-	ne mail, it should file a return without fin	ancial data. Some states		oup Exemption Nu		
		e a complete ret		2 504 06	=1	_	_	tion is not required
<u>_</u>			es 6b, 8b, 9b, and 10b to line 12	3,524,06		attach Sch B (Forr		
	art I		e, Expenses, and Changes in		liances (See page 18 o	tne ins	structions.)
	1		gifts, grants, and similar amounts receiv	red	1.1	2 260 054		
	а	Direct public su	• •		1a	3,260,85	<u> </u>	
) b	Indirect public s	* *		1b		-	
	С		ontributions (grants)	045 050	1c	15 000	-	2 060 050
	d	,	<u> </u>	245,059 noncash \$		15,800)	1d	3,260,859
	2	•	e revenue including government fees a	ind contracts (from Part VII, lir	ne 93)		2	149,861
	3	•	ues and assessments				3	61,600
	4		ings and temporary cash investments				4	14,073
	5		interest from securities	1	1 - 1		5	 <u>-</u>
,	6a	Gross rents			6a		-{ [
7	b	Less rental exp	·	\ \-\	6b		ا ۵۰ ا	
	, c		me or (loss) (subtract line 6b from line 6	oa)			6c	
≓R ≘e - v	7		ent income (describe	(4) 0		(D) OIL :	7	
v e	8a		from sales of assets other	(A) Securities	00	(B) Other	-	
n		than inventory	the a beauty and release access		8a	90:	<u> </u>	
u e	b		ther basis and sales expenses		8b		(
	C	, , ,	attach schedule)	D.V.	8c SEI		⊣ !	-903
	d		ss) (combine line 8c, columns (A) and (I			SIMI	8d	-903
	9	•	and activities (attach schedule) If any		k here		1 1	
	a		(not including \$	of	ا ـه ا			
			eported on line 1a)	_	9a		-	
	b	•	penses other than fundraising expense		9b		ا ۔ ا	
	C 40:		(loss) from special events (subtract line		ا ما	27 67	9c	
	10a		mventory, less returns and allowances		10a	37,672 19,10		
	b		© E₩ED	-h	10b	STMT 2	7 1	10 572
	C		(toss) from sales of pyentory (attach so	chedule) (subtract line 10b tro	m line 10a)	SIMI Z	10c	18,572
	11		(Fog Part 211 dipe 103)	10 140			11	2 504 062
_	12		(add lines 1d, 2, 3, 4,5, 6c, 7, 8d, 9c, 1	iuc, and 11)			12	3,504,062
E	13		ces (from line 44_col Mir (B))				13	2,811,285
p e	14		nd general (tramline 44 column (C))				14	561,079
n	15		om line 44, solumn (D))				15	166,864
s e	16	-	ffiliates (attach schedule)				16	2 500 000
<u>_s</u>	17		es (add lines 16 and 44, column (A))				17	3,539,228
\$		*	icit) for the year (subtract line 17 from li	•			18	-35,166
N s	· I		und balances at beginning of year (fron				19	3,554,031
ťŧ		•	in net assets or fund balances (attach	,			20	0 -10
5	1 24	Not accete or f	fund halances at and of year (combine I	ings 18 10 and 20\			24	3 518 865

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

DAA

Form **990** (2004)

Part II

Form 990 (2004) DISCOVERY INSTITUTE 91-1521697 Statement of

All organizations must complete column (A) Columns (B), (C) and (D) are required for section 501(c)(3) and (4) organizations

Functional Expenses and section 4947(a)(1) non	exempt charitable trusts by	it optional for others (See	page 22 of the instructions	<u>)</u>
Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Eundrosung
6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	services	and general	(D) Fundraising
22 Grants and allocations (attach schedule)					
(cash \$)	22				
23 Specific assistance to individuals	23				
24 Benefits paid to or for members	24				
25 Compensation of officers, directors, etc	25	354,000	125,625	162,975	65,400
26 Other salaries and wages	26	947,479	844,380	53,099	50,000
27 Pension plan contributions	27				
28 Other employee benefits	28	129,096	95,912	23,118	10,066
29 Payroll taxes	29	151,734	113,123	25,775	12,836
30 Professional fundraising fees	30	28,562			28,562
31 Accounting fees	31	16,944	5,000	11,944	
32 Legal fees	32				
33 Supplies	33	36,072	33,150	2,922	
34 Telephone	34	25,084	13,737	11,347	
•	35	28,954	22,536		
75 Postage and shipping	_	94,397	13,040	81,357	
36 Occupancy	36	94,391	13,040	01,337	
37 Equipment rental and maintenance	37	EE EOE	01 054	24 221	
38 Printing and publications	38	55,585	21,254		
39 Travel	_39	186,028	159,866	26,162	
40 Conferences, conventions, and meetings	40				
41 Interest	41	45.045			
42 Depreciation, depletion, etc. (attach schedule)	42	45,247	14,074	31,173	-
43 Other expenses not covered above (itemize) a	43a				
b SEE STATEMENT 3	43b	1,440,046	1,349,588	90,458	
C	43c				
d	43d				
е	43e				
44 Total functional expenses (add lines 22 - 43) Organizations			i		
completing columns (B)-(D), carry these totals to lines 13-15	44	3,539,228	2,811,285	561,079	166,864
Joint Costs. Check ▶ 📗 if you are following SOP 98-2					
Are any joint costs from a combined educational campaign and	fundrais	sing solicitation reported	l in (B) Program servic	es?	▶ 🗌 Yes 🗓 No
If "Yes," enter (i) the aggregate amount of these joint costs \$, (II) the amou	int allocated to Program se	ervices \$	<u> </u>
(iii) the amount allocated to Management and general \$, and (IV) the amou	int allocated to Fundraising	ş \$	
Part III Statement of Program Service Acc	omplis	shments (See pa	ge 25 of the instru	uctions.)	
What is the organization's primary exempt purpose?					Program Service
▶ SEE STATEMENT 4					Expenses (Required for 501(c)(3) &
All organizations must describe their exempt purpose achievem of clients served, publications issued, etc. Discuss achievemen	ents in a	a clear and concise ma	nner State the number	·	(4) orgs , & 4947(a)(1)
organizations and 4947(a)(1) nonexempt charitable trusts must	also en	ter the amount of grant	s and allocations to oth	ers)	trusts, but optional for others)
a SEE STATEMENT 5					
		(Grants and all	ocations \$	١ ,	1,207,067
b SEE STATEMENT 6			·		
		(Grants and all	ocations \$,	1,157,883
c SEE STATEMENT 7		(Grants and an	ocations \$		1,137,003
C DEE STATEMENT /				j	
		(0)		,	270 240
DECEMENT OF DURING CERVIC	E BO	(Grants and all	ocations \$)	378,248
d PRODUCTION OF PUBLIC SERVIC	טם ם	CAO.			
					0 500
ATE ATE	VOID O	(Grants and al		}	2,568
e Other program services (attach schedule) SEE ST					65,519
f Total of Program Service Expenses (should equal line 44 DAA	, colum	n (B), Program services	s)	<u> </u>	2,811,285 Form 990 (2004)

Form 990 (2004)

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

-	Note:	Where required, attached schedules and amounts with	nin the description	(A)		(B)
—		column should be for end-of-year amounts only		Beginning of year		End of year
- }	45	Cash-non-interest-bearing		1,087,100		910,553
	46	Savings and temporary cash investments		467,628	46	1,296,692
	47a	Accounts receivable	47a 57,289			
	b	Less allowance for doubtful accounts	47b	6,682	47c	57,289
ļ		Less anowarise for doubtful accounts	7.0		7.0	
ł	48a	Pledges receivable	48a 1,142,500			
l	b	Less allowance for doubtful accounts	48b	1,850,000	48c	1,142,500
1	49	Grants receivable			49	
ļ	50	Receivables from officers, directors, trustees, and key	employees			
A		(attach schedule)			50	
s	51a	Other notes and loans receivable (attach				
s		schedule)	51a			
e	b	Less: allowance for doubtful accounts	51b		51c	
t	52	Inventories for sale or use		9,017	52	17,764
s	53	Prepaid expenses and deferred charges			53	
}	54	Investments-securities	► Cost FMV		54	
	55a	Investments-land, buildings, and				
ł		equipment basis	55a		l i	
ļ	b	Less, accumulated depreciation (attach	1		'	
ĺ		schedule)	55b		55c	· · · · · · · · · · · · · · · · · · ·
	56	Investments-other (attach schedule)			56	
İ	57a	Land, buildings, and equipment basis	57a 323,875			
ì	b	Less. accumulated depreciation (attach			ł	
		schedule) SEE STATEMENT 9	57b 153,138			170,737
ĺ	58	Other assets (describe SEE STATEME)	<u>(T_10</u>)	18,917	58_	16,817
	50	Total accepts (add large 45 through 50) (much accept large	- 74)	3,621,998	50	3,612,352
	59 60	Total assets (add lines 45 through 58) (must equal lines 45 through 58) (must equal lines 45 through 58)	ne /4)	67,967		93,487
L	61	Accounts payable and accrued expenses Grants payable	07,507	61	93,407	
i a	62	Deferred revenue			62	
b	63	Loans from officers, directors, trustees, and key employed	ovees (attach		- 02	
i	03	schedule)	byees (attach		63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
t	b	Mortgages and other notes payable (attach schedule)		 	64b	
i	65	Other liabilities (describe)		65	
e s		Other habilities (describe +			00	
-	66	Total liabilities (add lines 60 through 65)	67,967	66	93,487	
\neg		anizations that follow SFAS 117, check here	and complete lines		1	
		67 through 69 and lines 73 and 74	•	ł		
NF	67	Unrestricted		397,797	67	479,224
еu	68	Temporarily restricted		3,156,234		3,039,641
t n	69	Permanently restricted			69	
A	Orga	anizations that do not follow SFAS 117, check here	▶ and			
s B		complete lines 70 through 74	_	1	1	
s a	70	Capital stock, trust principal, or current funds			70	
e l	71	Paid-in or capital surplus, or land, building, and equip	ment fund		71	
t a	72	Retained earnings, endowment, accumulated income			72	
С	73	Total net assets or fund balances (add lines 67 thro				
0 e]	70 through 72,				
rs	ļ	column (A) must equal line 19, column (B) must equal	al line 21)	3,554,031	73	3,518,865 3,612,352
	74	Total liabilities and net assets / fund balances (ad	d lines 66 and 73)	3,621,998	74	3,612,352

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.

Form 990 (2004) DISCOVERY INSTITUTE						91-1	521697			_	Page 4	
	t IV-A	Reconciliation of Rev	enu	e per Audited		Pa	rt IV-B R	econciliation of	Exp	enses	per /	Audited
		Financial Statements	wit	h Revenue per	Ì		F	inancial Stateme	ents	with Ex	cper	ises per
•	Return (See page 27 of the instructions)						R	eturn				
:a	Total revenue	e, gains, and other support	}		а	2	Total expenses a	and losses per				
	per audited fi	nancial statements	a	3,504,06	2		audited financial	statements		a	3	,539,228
b	Amounts incl	uded on line a but not on			þ	•	Amounts include	d on line a but not				
	line 12, Form	990					on line 17, Form	990				
(1)	Net unrealize	ed gains on				(1)	Donated service	s and use				
	investments	\$	4		1		of facilities \$					
(2)		vices and use	ļ			(2)	Prior year adjust					
	of facilities	\$	┨				reported on line	20,				
	Recoveries of	of prior	1				Form 990 \$					
	year grants	<u>, \$</u>	-			(3)	Losses reported	on line 20,				
(4)	Other (specif	λ).					Form 990 \$					
		•				(4)	Other (specify)					
	A -l -l	\$	┨.									
	Add amounts	s on lines (1) through (4)	<u>-</u> b		\dashv		<u>₹</u>	lines (4) through (4)	_			
_	Line a minus	lino h		3,504,06	2		Line a minus line	lines (1) through (4)		<u> </u>		,539,228
c d		luded on line 12,	<u>-</u>	3,304,00		j j	Amounts include			<u> </u>		,339,220
u		t not on line a:			1	J	Form 990 but no	,				
(1)	Investment e				ļ	(1)	Investment expe					
(1)	not included	•			İ	('')	not included on l					
	6b, Form 99				-		6b, Form 990 \$	ii ic				
	Other (speci		1			(2)	Other (specify)					
(-/	owier (open	• • • • • • • • • • • • • • • • • • • •	ł		l	(-/	outer (opcomy)					
		\$					\$					
	Add amounts	s on lines (1) and (2)	d	1			Add amounts on	lines (1) and (2)		a		
е		e per line 12, Form 990			٦,	9		per line 17, Form 990				_
	(line c plus li		e	3,504,06	2		(line c plus line c		•	e	3	,539,228
Pa		ist of Officers, Director	s, T			loy			ensate	ed, see p		
	th	e instructions)								_	_	
		(A) Name and address		Ì	(E	3) T	itle and average r week devoted to	(C) Compensation (If not paid, enter	(D) empl	Contrib to oyee bene s & deferre	o fit	(E) Expense
			, 				position	-0)	plan	s & deferre mpensatio	ed e	allowances
	EVEN P			1	_		C. DIR.					
	WCASTI				40	_		80,000			_이	13,814
	RUCE CH			J			SIDENT		!			
	EATTLE				40			132,000			0	9,042
	RIC GAR						ASURER					
	CATTLE				40			39,000			0	3,595
	Y RICH				VI			60.00				
	LLEVUE				40		2552	63,000			0	<u> 11,068</u>
	ARSHALI						RETARY	40.000				2 607
	EATTLE				40 VI	_		40,000			의	3,607
	CEVEN M				40			102,500				11 260
		LLE WA RS-SEE ATTACHED	- -	rem			ECTORS	102,500			0	11,260
נע	LRECIOF	S-SEE ALIACRED	11.	131	4(ECTORS	o			o	0
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	 _									_	\dashv	
75	Did and are	or director trictes as less as	nla	20 100000 2777777			on of more than f	100 000 from			L	
75	-	er, director, trustee, or key em	-								⊾ г	Yes X No
	-	and all related organizations,			as p	i OVI	ueu by the related	a organizations?				_ res <u>r</u> ∧ No
	ii res, atta	ch schedule-see page 28 of th	e ins	tructions								

Form	990 (2004) DISCOVERY INSTITUTE 91-1521697		F	Page 5
	rt 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		Х
	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		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			l
	statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common	·		l
	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	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			l
þ	Did the organization file Form 1120-POL for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge			
	or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as			
	revenue in Part I or as an expense in Part II (See instructions in Part III) SEE STMT 11 82b 15,800	1		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b		X
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions			
	or gifts were not tax deductible?	84b	ļ	↓
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		ļ
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	<u> </u>	ļ
	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			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	1		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f	1		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	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	l		1
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax			Ì
	year? N/A	85h	<u> </u>	↓
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12]		
b	Gross receipts, included on line 12, for public use of club facilities]		
87	501(c)(12) orgs Enter a Gross income from members or shareholders 87a	1		
b	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		
	partnership, or an entity disregarded as separate from the organization under Regulations sections	1		
	301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under			
	section 4911 ▶ 0 ; section 4912 ▶ 0 , section 4955 ▶ 0		1	
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			
	a statement explaining each transaction	89b	<u> </u>	X
С	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization			0
90a	List the states with which a copy of this return is filed WA			
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions)			24
91	The books are in care of ► ERIC GARCIA Telephone no ► 206-	-292	2-04	401
	Located at ► SEATTLE, WA ZIP+4 ► 98101			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here			ightharpoons
	and enter the amount of tax-exempt interest received or accrued during the tax year 92			
		Fori	n 99 ((2004)

Form 990 (2004) DISCOVERY INSTITUTE 91-1521697

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

B ROYALTY INCOME If Medicare/Medicaid payments If Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a debt-financed property Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a debt-financed property Interest on savings and temporary cash investments Divident set in the saving and temporary cash investments Divident set in the saving and temporary cash investments Divident set in the saving and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Interest on savings and temporary cash investors Interest on savings and temporary cash investors and interest constitutions. Interest on savings and temporary cash investors and interest constitutions. Interest on savings and temporary cash investors and interest constitutions. Interest on savings a	Ity Income Idedical payments Idedical payments Income property Income or (loss) from real estate Income or (loss) from personal property Income or (loss) from personal property Income or (loss) from personal property Income or (loss) from personal property Income or (loss) from personal property Income or (loss) from personal property Income or (loss) from personal property Income or (loss) from personal property Income or (loss) from sales of assets other that it or (loss) from sales of inventor income a	cies vestments vroperty an inventory	Business code	(B) Amount	Exclusion code	(D) Amount	exempt function
Program service revenue code necome S 4 , 5 4	Ity Income Idedicaid payments contracts from government agence p dues and assessments savings and temporary cash invented income or (loss) from real estate ed property anced property an	cies vestments vroperty an inventory	Business code	Amount	code		61,60
B ROYALTY INCOME Indecate the decade and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a debt-financed property bit rental income or (loss) from personal property Other investment income Gain or (loss) from special events Gross profit or (loss) from special events Gross profit or (loss) from special events Cross profit or (loss) from spec	dedicaid payments ontracts from government agence p dues and assessments savings and temporary cash invented in the rest from securities income or (loss) from real estate ed property anced property anced property anceme or (loss) from personal property stiment income es) from sales of assets other the er or (loss) from special events t or (loss) from sales of inventor and a	cies vestments vroperty an inventory			14	14,073	65,32
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(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, byts true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge in the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the product of the p	" to (b), file Form 8870 and Form Under penalties of perjury, I declare t			A 1			
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	or	ganization, during the year, r ganization, during the year, r o (b), file Form 8870 and For	ganization, during the year, receive any funds, d ganization, during the year, pay premiums, direc (b), file Form 8870 and Form 4720 (see instruc ler penalties of perjuy. I declare that I have examined th	ganization, during the year, receive any funds, directly or indirectly ganization, during the year, pay premiums, directly or indirectly, or (b), file Form 8870 and Form 4720 (see instructions) ler penalties of perjuy, I declare that I have examined this return, including	ganization, during the year, receive any funds, directly or indirectly, to pay premium ganization, during the year, pay premiums, directly or indirectly, on a personal bene (b), file Form 8870 and Form 4720 (see instructions) ler penalties of perjury, I declare that I have examined this return, including accompanying sched	ganization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal ganization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? (b), file Form 8870 and Form 4720 (see instructions) er penalties of perjury. I declare that I have examined this return, including accompanying schedules and statemen belief, this true, correct, and complete Declaration of preparer (other than officer) is based on all information of whether the personal programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of the programment of th	ganization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ganization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? (b), file Form 8870 and Form 4720 (see instructions) ler penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kindle belief, this true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any know the preparer to the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the c

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

OMB No 1545-0047

2004

Department of the Treasury Internal Revenue Service Name of the organization Supplementary Information-(See separate instructions.)

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

Employer identification number

DISCOVERY INSTITUTE 91-1521697 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (b) Title and average hours (e) Expense (a) Name and address of each employee paid more (c) Compensation empl ben plans & account and other than \$50,000 per week devoted to position deferred comp allowances BRUCE AGNEW PROGRAM POLICY DIR. MERCER ISLAND 0 WA 105,000 8,817 TOM TILL PROGRAM DIRECTOR 0 WASHINGTON DC 40 105,000 1,800 JOHN DRESCHER PROGRAM DIRECTOR WA 85,000 0 SEATTLE 40 3,595 TERESA GONZALES PROGRAM MANAGER 60,000 ORTING 0 WA 40 7,810 Total number of other employees paid over 7 \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services

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

Schedule A (Form 990 or 990-EZ) 2004

Sched	ule A	(Form 990 or 990-EZ) 2004 DISCOVERT INSTITUTE 91-1321697			age
Pa	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	atter or in	ing the year, has the organization attempted to influence national, state, or local legislation, including any mpt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities \$ 6,186 (Must equal amounts on line 38, tVI-A, or line i of Part VI-B)	1	x	
	Orga	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other	ł		
	orga	anizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of			^
		lobbying activities			
2		ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
		stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or I 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			
		sactions)			
3	Sale	e, exchange, or leasing of property?	2a		x
a b		ding of money or other extension of credit?	2b		X
c		nishing of goods, services, or facilities?	2c		X
d		rment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
е	Trai	nsfer 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	- }		ا
	-	determine that recipients qualify to receive payments)	3a	77	X
b 4a		you have a section 403(b) annuity plan for your employees? you maintain any separate account for participating donors where donors have the right to provide advice	3b_	X	├
4a		the use or distribution of funds?	4a	1	x
b		you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	<u> </u>	X
	rt I\				
		Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
	rgan	nization is not a private foundation because it is. (Please check only ONE applicable box)			
5	H	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)			
6	Н	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7 8	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii) A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)			
9	H	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city			
•		The control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the co	,		
		and state ▶			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)((Also complete the Support Schedule in Part IV-A)	IV)		
11a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)	1		
11b		A community trust. Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
		receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of			
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired			
13	\Box	by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13	Ш	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See			
		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	numbe	er
		(W) Hame(a) of supported organization(a)	from a	bove	
					_
14		An organization organized and operated to test for public safety. Section 509(a)(A). (See page 5 of the instructions.)			

91-1521697

Page 3 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting \triangleright (b) 2002 (a) 2003 (d) 2000 (e) Total Calendar year (or fiscal year beginning in) Gifts, grants, and contributions received (Do 1,357,531 9,137,893 3,063,151 2,083,948 2,633,263 not include unusual grants. See line 28.) 45,621 51,880 35,480 34,017 166,998 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 190,914 69,532 115,631 110,301 486,378 organization's charitable, etc., purpose 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 6,672 13,611 31,341 19,205 70,829 by the organization after June 30, 1975 19 Net income from unrelated business 0 activities not included in line 18 20 Tax revenues levied for the organization's benefit and either paid to it or expended on 0 its behalf 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 public without charge Other income Attach a schedule Do not include gain or (loss) from sale of capital assets 2,901,139 9,862,098 3,174,835 2,247,207 1,538,917 23 Total of lines 15 through 22 3,105,303 2,131,576 2,710,225 1,428,616 9,375,720 Line 23 minus line 17 31,748 22,472 29.011 15,389 25 Enter 1% of line 23 187,514 26a Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the 5,662,370 amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts 26b 9,375,720 c Total support for section 509(a)(1) test Enter line 24, column (e) 26c d Add Amounts from column (e) for lines 18 _____ 5,662,370 26d 5,733,199 3,642,521 26e Public support (line 26c minus line 26d total) 38.8506% Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." N/A Do not file this list with your return. Enter the sum of such amounts for each year (2002)(2001)(2000) b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess N/A amounts) for each year (2003)(2002)(2000)c Add Amounts from column (e) for lines 27c 27d d Add Line 27a total and line 27b total 27e Public support (line 27c total minus line 27d total) ▶ 27f Total support for section 509(a)(2) test Enter amount from line 23, column (e) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h % Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15

Page 4

Part V 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)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, N	/A	Yes	No
."	other governing instrument, or in a resolution of its governing body?	29	ļ	<u> </u>
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		<u> </u>
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	}	ŀ
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31		
	The root process soon as, in root process experience (in your roots many a coparatio statement)			
32	Does the organization maintain the following			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	ļ	<u> </u>
þ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	201		
_	basis? Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32b	-	
С	with student admissions, programs, and scholarships?	32c	,	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	 	
_				
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to.			
_	Students' rights or privileges?	33a		
а	Clodelits lights of phylicges	33 <u>a</u>	 	
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c	<u> </u>	<u></u>
		ļ	1	
d	Scholarships or other financial assistance?	33d	ļ	 -
	Ethanton Land			
е	Educational policies?	33e	 	
f	Use of facilities?	33f	Ì	
•	OSC OF Identifies.	331		
g	Athletic programs?	33g	ĺ	
_				
h	Other extracurricular activities?	33h	ļ	ļ
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
			1	
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		L
b	Has the organization's right to such aid ever been revoked or suspended?	34b	<u> </u>	<u> </u>
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
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		<u> </u>

Schedule A (Form 990 or 990-EZ) 2004 DISC	COVERY INSTI	TUTE				91-15	5216	97	Page 5
Part VI-A Lobbying Expendi	itures by Electing ONLY by an eligib						ructio	าร.)	
.Check ▶ a If the organization belon							d "limite	d contro	ol" provisions apply
Limits on	Lobbying Expend	litures				(; Affiliate	a)		(b) To be completed for ALL electing organizations
	ures" means amounts pa				36				
36 Total lobbying expenditures to influence37 Total lobbying expenditures to influence				 	37				6,186
38 Total lobbying expenditures (add lines 36		(lobbying)		F	38				6,186
39 Other exempt purpose expenditures	o and or)				39				3,533,042
40 Total exempt purpose expenditures (add	Llines 38 and 39)			F	40				3,539,228
41 Lobbying nontaxable amount Enter the	•	a table-		r		·			
If the amount on line 40 is-	The lobbying nor		S-						
Not over \$500,000	20% of the amount or								
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	f the excess over \$50	0,000						
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	f the excess over \$1,0	000,000	▶	41			Ì	326,961
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1,50	00,000						
Over \$17,000,000	\$1,000,000								
42 Grassroots nontaxable amount (enter 25	5% of line 41)		_		42				81,740
43 Subtract line 42 from line 36 Enter -0- if	line 42 is more than line	36			43				0
44 Subtract line 41 from line 38 Enter -0- if	line 41 is more than line	38			44				0
Caution: If there is an amount on either	line 43 or line 44, you m	ust file Form 4720		\perp					
	4-Year Avera	ging Period U	nder Sect	ion	501	(h)			
(Some organizatio	ns that made a section 5	501(h) election do i	not have to c	comp	olete a	all of the five o	columns	below	
	See the instructions for	lines 45 through 50	on page 11	of th	he <u>ins</u>	tructions)	SEE	STA	ATEMENT 12
		Lobbying Ex	penditures	Dur	ing 4	-Year Avera	ging Pe	riod	
Calendar year (or	(a)	(b)	1	(c)	_		(d)		(e)
fiscal year beginning in)	2004	2003		2002	2		2001		Total
45 Lobbying nontaxable amount	326,961								326,961
46 Lobbying ceiling amount (150% of								1	
line 45(e))									490,442
47 Total lobbying expenditures	6,186								6,186
_	01 740								01 740
48 Grassroots nontaxable amount	81,740								81,740
49 Grassroots ceiling amount (150% of									100 610
Ine 48(e))									122,610
50 Grassroots lobbying expenditures Part VI-B Lobbying Activity	hu Nanalastina D	ublia Charitias	!						
	by Nonelecting P by organizations			ort \	\/I ^) (Soo poo	. 11	of tha	instructions.) N/I
During the year, did the organization attempt) (See pay][ilistructions.) 11/2
attempt to influence public opinion on a legis		•		y an	у		Yes	No	Amount
	liative matter or reference	uiri, tiirougii tile us	E 01				-		
a Volunteersb Paid staff or management (include cor	mnoneation in ovnonesse	reported on lines	through h					 	
	imperisation in experises	reported or lines (, unough ii.)	,					
c Media advertisementsd Mailings to members, legislators, or th	ae nublic							 - 	
	·						-	 	
e Publications, or published or broadcasf Grants to other organizations for lobby								 	
		or a legislative he	ndv					 	
g Direct contact with legislators, their standardh Rallies, demonstrations, seminars, con	=	=	-					 	
i Total lobbying expenditures (Add lines	·	Action, or ally other	HICUHO					'	· · · · · · · · · · · · · · · · · · ·
							·		

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

Schedule A (Form 99	00 or 990-EZ) 2004 DIS	COVERY	INSTITUTE	91-1521697		F	Page 6
Part VII	Information Regard	_	sfers To and Transact of the instructions.)	ons and Relationships With Noncharitab	le Exem		
51 Did the repo				g with any other organization described in section			
501(c) of the	e Code (other than section	n 501(c)(3) c	organizations) or in section 52	7, relating to political organizations?			
a Transfers fr	om the reporting organiza	ition to a non	icharitable exempt organizatio	n of		Yes	No
(i) Cash					51a(i)		X
(ii) Other	assets				a(ii)		Х
b Other transa	actions						
	-		arıtable exempt organization		<u>b(i)</u>	 	X
	nases of assets from a no				b(ii)	 	X
	al of facilities, equipment,		ets		b(iii)	<u> </u>	X
	bursement arrangements				b(iv)	<u> </u>	X
• •	s or loan guarantees		fordering policitations		b(v)	\vdash	X
	rmance of services or me	-	=		b(vi)	 	X
_		_	r assets, or paid employees	umn (b) should always show the fair market value of the	<u>c_</u>	<u> </u>	1 2
			-	nization received less than fair market value in any	5		
				other assets, or services received			
(a)	(b)	<u> </u>	(c)	(d)			
Line no	Amount involved	Name of r	noncharitable exempt organization	Description of transfers, transactions, and sharin	g arrangem	nents	
37 / 3	 						
<u> N/A</u>							
	 				——		
	 						
	 			- 			
	-						
	 						
							
			· · · · · · · · · · · · · · · · · · ·			_	
described ii	= = = = = = = = = = = = = = = = = = =	de (other tha	with, or related to, one or more an section 501(c)(3)) or in sect		► 🗌 Y	es 2	X No
b ii tes, co	(a)	dule	(b)	(c)			
	Name of organization		Type of organization	Description of relationship			
N/A							
							
							
							
							
						-	
							
		1					

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. Attach to your tax return.

OMB No 1545-0172

2004

Attachment Sequence No 67

Department of the Treasury Internal Revenue Service Identifying number Name(s) shown on return DISCOVERY INSTITUTE 91-1521697 Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 102,000 1 Maximum amount. See page 2 of the instructions for a higher limit for certain businesses 1 2 2 Total cost of section 179 property placed in service (see page 3 of the instructions) 410,000 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see page 3 of the instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2003 Form 4562 10 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 ▶ 13 Carryover of disallowed deduction to 2005 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) Part II Special depreciation allowance for qualified prop (other than listed prop) placed in service during the tax year (see pg 3 of the instructions) 14 15 Property subject to section 168(f)(1) election (see page 4 of the instructions) 15 45.249 16 Other depreciation (including ACRS) (see page 4 of the instructions) 16 Part III MACRS Depreciation (Do not include listed property.) (See page 5 of the instructions.) Section A 17 Ō MACRS deductions for assets placed in service in tax years beginning before 2004 18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2004 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (f) Method (g) Depreciation deduction (e) Convention (a) Classification of property year placed in (business/investment use period only-see instructions) service 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property 20-year property S/L 25-year property 25 yrs Residential rental 27 5 yrs S/L MM property 27 5 yrs MM S/L MM Nonresidential real 39 yrs S/L property MM Section C-Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12 yrs 12-year c 40-year S/L 40 yrs MM Summary (see page 8 of the instructions) Part IV

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21

Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr

Listed property Enter amount from line 28

45,249

23

21

22

Form 4562 (2004)
Part V L

4)	Page 2
Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and	
property used for entertainment, recreation, or amusement.)	
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable	

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40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See page 10 of the instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI Amortization (a) (b) (c) (d) Amortization period or period or period or period or this year. 42 Amortization of costs that begins during your 2004 tax year (see page 11 of the instructions). 43 Amortization of costs that began before your 2004 tax year.		See pag	ge 10 of the instruc	tions for vehicles	used by cor	porate of	ficers, d	lirectors,	or 1% o	r more ov	vners					<u> </u>	
the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See page 10 of the instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI Amortization (a) (b) (c) (d) Amortization period or period or period or this year. 42 Amortization of costs that begins during your 2004 tax year (see page 11 of the instructions) 43 Amortization of costs that began before your 2004 tax year.	39	•			•											ļ	
Anortization of costs that began before your 2004 tax year Do you meet the requirements concerning qualified automobile demonstration use? (See page 10 of the instructions) Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI Amortization (a) Description of costs (b) Date amortization begins Amortizable amount Amortizable amount Section Period or period or period or period or this year 42 Amortization of costs that begins during your 2004 tax year (see page 11 of the instructions)	40			-			n inform	ation fro	m your e	mployee	s about					ĺ	
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(a) Date amortization begins	P	art Vi	Amortizatio	n			-, -										
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Amortization of costs that begins during your 2004 tax year (see page 11 of the instructions) 43 Amortization of costs that began before your 2004 tax year 43 C				e .	Date amo	rtization			ortizable		Co	de	period	or	Am	ortization	f or
43 Amortization of costs that began before your 2004 tax year 43 C					<u>-</u>						sect	non	_percent	age		ınıs year	
·	42	Amortiz	auon of costs that	pegins auring you	r ∠uu4 tax y	ear (see	page 1	or the ii	nstructio	ns)		— т		—т			
·																	
·	43	Amortiz	ration of costs that	hegan hefore you	r 2004 tay w		ш.				L			12			
				-	-		s for wh	ere to re	nort								

1356 Discovery Institute 91-1521697 FYE: 12/31/2004		Federal Statements	tements			11/7/2005	11:38 Aฟ Page 1
Staten	Statement 1 - Form 990, Part	rt I, Line 8c - Sale of Assets Other Than Inventory - Other	of Assets Ot	her Than In	ventory - Other		
Desc		5	<u>,</u>	<u>0</u>	ά 10 0		/cie '
Rec'd	Sold	Acquired	Sold	Price	Expense	Deprec	-Loss
MODEMS PURCHASE		1/16/97	12/31/04 \$		\$ 683 \$	\$ 683 \$	•
COMPUTER PURCHASE		1/16/97	12/31/04		1,599	1,599	
COMPUTER PURCHASE		5/13/97	12/31/04		1,938	1,938	
		5/13/97	12/31/04		2,133	2,133	
COMPUTER (FOWER BOOK) PURCHASE		6/11/97	12/31/04		4,514	4,514	
COMPUTER PURCHASE		86/60/9	12/31/04		2,806	2,806	
COMPUTER MONITOR PURCHASE		8/04/98	12/31/04		140	140	
POWER FAX PURCHASE		8/10/98	12/31/04		587	587	
COMPUTER PURCHASE		8/25/98	12/31/04		1,520	1,520	
COMPUTER MEMORY PURCHASE		10/27/98	12/31/04		109	109	_
COMPAQ PURCHASE		3/26/99	12/31/04		2,500	2,500	-
LAPTOP PURCHASE		4/30/99	12/31/04		2,114	2,114	
IMAC PURCHASE		10/21/99	12/31/04		1,199	1,199	
MICKOSOF1 PURCHASE		12/31/99	12/31/04		19,259	19,259	
LAFIUE PURCHASE		3/04/99	12/31/04		2,024	2,024	<u>-</u>
		3/22/99	12/31/04		200	200	•
AFFLE FOWERBOOR PURCHASE		3/31/99	12/31/04		125	125	-
AFFLE MONITOR PURCHASE		3/31/99	12/31/04		219	219	
							7 -

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Statement	Statement 1 - Form 990, Part	tl, Line 8c - Sale of Assets Other Than Inventory - Other (continued)	e of Assets O	ther Than In	ventory - Other		
Desc How Rec'd	Whom	- Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
FIREWALL & 2 WORKSTATIONS PURCHASE LAPTOP PURCHASE DESTINATION		3/14/00	12/31/04 \$		l o o	\$ 3,161 \$	-109
DESKIOF CONFOLEN PURCHASE TOTAL		4/05/01	12/31/04	0	2,178	1,743	-435
							-

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Federal Statements

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FYE: 12/31/2004

Statement 2 - Form 990, Line 10c - Sales of Inventory

Description	 Gross Sales	 cogs	 Gross Profit
BOOK SALES	\$ 37,672	\$ 19,100	\$ 18,572
TOTAL	\$ 37,672	\$ 19,100	\$ 18,572

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Federal Statements

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Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
EXPENSES				
ADVERTISING/PROMOTION	700	700		
BANK CHARGES	4,191	1,812	2,379	
COMPUTER EXPENSES	23,031	7,660	15,371	
CONSULTANTS	600,846	518,618	82,228	
DUES & SUBSCRIPTIONS	13,049	8,443	4,606	
EVENTS / PROGRAMS	88,785	38,055	50,730	
FELLOWSHIPS / RESEARCH	581,355	573,355	8,000	
INSURANCE	11,598	340	11,258	
MEALS & ENTERTAINMENT	27,472	21,207	6,265	
MISCELLANEOUS	303	-468	771	
OFFICE EXPENSE	32,071	18,445	13,626	
PROGRAM DEVELOPMENT	56,645	56,421	224	
DC PROJECT		105,000	-105,000	
TOTAL	\$ 1,440,046	\$ 1,349,588	\$ 90,458	\$ 0

Statement 4 - Form 990, Part III - Organization's Primary Exempt Purpose

TO PROMOTE THOUGHTFUL ANALYSIS AND EFFECTIVE ACTION ON LOCAL, REGIONAL, NATIONAL, AND INTERNATIONAL ISSUES.

Statement 5 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

DEVELOPMENT OF A BALANCED, SEAMLESS, AND EXPANDED TRANSPORTATION SYSTEM BETWEEN WASHINGTON, OREGON, AND BRITISH COLUMBIA THROUGH PUBLICE PRIVATE PARTNERSHIPS AND INNOVATIVE FINANCING.

Statement 6 - Form 990, Part III, Line b - Statement of Program Service Accomplishments

PRODUCTION OF PUBLIC SERVICE REPORTS, LEGISLATIVE TESTIMONY, ARTICLES, PUBLIC CONFERENCES AND DEBATES, PLUS MEDIA COVERANGE AND THE INSTITUTES OWN PUBLICATIONS IN THE FIELD OF SCIENCE AND CULTURE.

Statement 7 - Form 990, Part III, Line c - Statement of Program Service Accomplishments

PRODUCTION OF PUBLIC SERVICE REPORTS, LEGISLATIVE TESTIMONY, ARTICLES, PUBLIC CONFERENCES AND DEBATES, PLUS MEDIA COVERANGE AND THE INSTITUTES OWN PUBLICATIONS IN THE FIELD OF TECHNOLOGY.

Federal Statements

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Statement 8 - Form 990, Part III, Line e - Other Program Services

PRODUCTION OF PUBLIC SERVICE REPORTS, LEGISLATIVE TESTIMONY, ARTICLES, PUBLIC CONFERENCES AND DEBATES, PLUS MEDIA COVERANGE AND THE INSTITUTES OWN PUBLICATIONS IN THE FIELD OF BIOETHICS, RELIGION, LIBERTY & CIVIC LIFE, LAW & JUSTICE AND THE ENVIROMENT.

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Federal Statements

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Statement 9 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description					
		Beginning of Year	Accum Deprec	End of Year	Accum Deprec
EQUIPMENT	_	240.052.6	150 100 6	222 075 6	152 120
		340,853 \$	158,199 \$	323,875 \$	153,138
TOTAL	\$_	340,853 \$	158,199 \$	323,875 \$	153,138

Statement 10 - Form 990, Part IV, Line 58 - Other Assets

Description	I	Beginning of Year	 End of Year
PREPAID EXPENSES DEPOSITS	\$	7,194 11,723	\$ 714 16,103
TOTAL	\$ <u></u>	18,917	\$ 16,817

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Statement 11 - Form 990, Part VI, Line 82b - Donated Services

		Description		Ar	nount
PROMO/ADVERTISING,	RADIO	INTERVIEWS	\$_		15,800
TOTAL			\$		15,800

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Statement 12 - Schedule A, Part VI-A - Explanation for Not Completing All Columns

2004 IS THE FIRST YEAR IN WHICH THE ORGANIZATION HAS FILED UNDER SCHEDULE A, PART VI-A.

		1356 08/02/2005 2 17 PM F
Form 8868 (R	, , , , , , , , , , , , , , , , , , , 	Page 2
• •	filing for an Additional (not automatic) 3-Month Extension, complete only Part II and che	· · · · · · · · —
	mplete Part II if you have already been granted an automatic 3-month extension on a previou	usly filed Form 8868.
	filing for an Automatic 3-Month Extension, complete only Part I (on page 1) Additional (not automatic) 3-Month Extension of Time-Must File Ori	ginal and One Conv
Part II		
Type or	Name of Exempt Organization	Employer identification number
print	DISCOVERY INSTITUTE	91-1521697
File by the extended	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
due date for	1511 3RD AVENUE 808	1 of the add offing
filing the return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SEATTLE WA 98101	
Check type o	f return to be filed (File a separate application for each return):	L
X Form 99		Form 5227
Form 99		Form 6069
Form 99		Form 8870
Form 99		
	t complete Part II if you were not already granted an automatic 3-month extension on	a previously filed Form 8868.
	s are in the care of	
Telephone	***************************************	
	nization does not have an office or place of business in the United States, check this box	▶ □
	r a Group Return, enter the organization's four digit Group Exemption Number (GEN)	
	group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🔲 and atta	
names and El	Ns of all members the extension is for.	
4 I reques	t an additional 3-month extension of time until 11/15/05	
5 For cale	indar year 2004 , or other tax year beginning , and ending	
6 If this ta	x year is for less than 12 months, check reason:	Change in accounting period
	detail why you need the extension	
	TIONAL TIME IS REQUESTED TO GATHER INFORMATI ACCURATE RETURN.	ON TO PREPARE A COMPLETE
8a If this ap	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefu	ndable credits. See instructions	<u>\$</u>
b If this ap	oplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimate	ted
tax payr	nents made. Include any prior year overpayment allowed as a credit and any amount paid	
previous	sly with Form 8868	<u>\$</u>
	Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, depo	
with FTI	O coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See ins	tructions \$
	Signature and Verification	
Under penalties	of perjury, I declare that I have examined this form, including accompanying schedules and statements, an and complete, and that I am authorized to prepare this form	d to the best of my knowledge and belief,
ייין אייין אייין אייין אייין אייין אייין	SO(1) $CO(1)$	> 0/00/0
Signature 🗾	Title Total In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the North In the	Date ▶ 8/02/05
	Notice to Applicant-To Be Completed by the	3 IK2
	approved this application. Please attach this form to the organization's return.	and the date of a section of
	not approved this application. However, we have granted a 10-day grace period from the late	
	e organization's return (including any prior extensions). This grace period is considered to be	a valid extension of time for elections
$\overline{}$	required to be made on a timely return. Please attach this form to the organization's return.	A
_	not approved this application. After considering the reasons stated in item 7, we cannot gran	it your request for an extension of time
	are not granting a 10-day grace period.	which are reduced to the second
\Box	ot consider this application because it was filed after the extended due date of the return for	which an extension was requested.
Other _		
	By	EXTENSION APPROVED
Director Mail	ing Address Enterthe address from most the constitution for a different A	Date LATEROOFF AT TROVE
	ing Address - Enter the address if you want the copy of this application for an additional 3-raddress different than the copy of this application for an additional 3-raddress different than the copy of the copy of this application for an additional 3-raddress different than the copy of this application for an additional 3-raddress different than the copy of this application for an additional 3-raddress different than the copy of this application for an additional 3-raddress different than the copy of this application for an additional 3-raddress different than the copy of this application for an additional 3-raddress different than the copy of this application for an additional 3-raddress different than the copy of this application for an additional 3-raddress different than the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of the copy of	META & ONDE
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Tuna * ::	SHANNON & ASSOCIATES, LLP	S! JON PROCESSING, UGUEN
Type or print	Number and street (include suite, room, or apt. no.) or a P.O. box number 1851 CENTRAL PLACE SOUTH, SUITE 225	5. CIOI4 PROGESSING, OSDEI4
-	City or town, province or state, and country (including postal or ZIP code) KENT WA 98030-7507	

(Rev December 2004)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

,	·	
Department of the Treasury Internal Revenue Service	► File a separate application for each return	
	n Automatic 3-Month Extension, complete only Part I and check this box	▶ X
	n Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form).	
•	unless you have already been granted an automatic 3-month extension on a previously filed Form 8	3868
	natic 3-Month Extension of Time- Only submit original (no copies needed)	_
Form 990-T corporatio	ns requesting an automatic 6-month extension-check this box and complete Part I only	▶ 🗌
All other corporations (ir	cluding Form 990-C filers) must use Form 7004 to request an extension of time to file income tax re	turns.
Partnerships, REMICs,	and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.	
Electronic Filing (e-fil	e). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one	e of the
returns noted below (6 r	nonths for corporate Form 990-T filers). However, you cannot file it electronically if you want the add	itional
(not automatic) 3-month	extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868 For m	ore
details on the electronic	filing of this form, visit www irs gov/efile	<u> </u>
Type or Name	of Exempt Organization	Employer identification number
print		
File by the DIS	COVERY INSTITUTE	91-1521697
due date for Numbe	er, street, and room or suite no. If a P.O. box, see instructions.	
filing your return See 151	1 3RD AVENUE 808	
instructions City, to	wn or post office, state, and ZIP code For a foreign address, see instructions	
SEA	TTLE WA 98101	
Check type of return to	be filed (file a separate application for each return)	_
X Form 990	Form 990-T (corporation)	Form 4720
Form 990-BL	Form 990-T (sec 401(a) or 408(a) trust)	Form 5227
Form 990-EZ	Form 990-T (trust other than above)	Form 6069
Form 990-PF	Form 1041-A	Form 8870
 If this is for a Group, is for the whole group, names and EINs of all r I request an autor to file the exempt 	FAX No. loes not have an office or place of business in the United States, check this box p Return, enter the organization's four digit Group Exemption Number (GEN) If this check this box If this for part of the group, check this box and attach a list with the members the extension will cover matic 3-month (6-months for a Form 990-T corporation) extension of time until 8/15/05 organization return for the organization named above. The extension is for the organization's return year 2004 or	,
	peginning , and ending	
, Lax your	, and enaming	
2 If this tax year is	for less than 12 months, check reason.	in accounting period
nonrefundable cr b If this application made Include an c Balance Due, St	is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any edits. See instructions is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments by prior year overpayment allowed as a credit subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit or, if required, by using EFTPS (Electronic Federal Tax Payment System). See	<u>\$</u> \$
	ig to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-E	0
for payment instructions		-
	aperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev 12-2004)
		,

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