Form 990

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(e)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Dep	lartment of mai Rever	fithe Treasur hue Service	У	The organ	ization may h	nave to use a	copy of this return to	ication) satisty šia	te reporting requires	nents.	Open to Public Finapection
Ā				or tax year be			, and ending		to toporang raddiren	ilente.	
В		applicable:		C Name of org		-				D Em	ployer identification no.
	Address (change	use (R8)		•						3-7322143
\sqcap	Name cha	3000	label or print or	FRIEN	DS OF	RADNOR	LAKE				ephone number
H		_	type.	Number and	street (or P.O.	box If mail is r	not delivered to street #do	ress)	Rpom/sulte	_	15-256-7146
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J	Organiz	ation type	3					 : :	Are all affiliates include		Yes No
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L	Gross re	ecelots: Ad	d lines 6b.	8b, 9b, and 10	b to line 12	•	287,98		to attach Sch. B (F	-	•
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Friedrices	b c 7 8a b c d 9 a b c 10a b c 11 12 13 14 15 16 17	Less: rent Net rental Other invo Gross am than invei Less: cos Gain or (ii Net gain o Special e Gross rev contributi Less: dire Net incon Gross sa Less: cos Gross pro Other rev Total rev Program Manager Fundrais Payment Total ex	al expense income or estment income or estment incount from the count from the co	(loss) (subtractions (describe sales of assets and sales in schedule) ombine line 8c, activities (attactions) and on line 1s) as other than full from sales of a Part VII, line 1 lines 1d, 2, 3, from line 44, column as (attach schedulines 16 and or the very (subtractions).	extline 8b from the other cother coth	and (B)) If any amour pense6 act line 9b fro ences tach schedul (C)) from line 12	(A) Securities It is from gaming, che of In line 9a) (aubtract line 10b from d 11)	8a 8b 8c ck here 9a 9b 10a 10b om line 10	(B) Other 31,4 2,3	8c 7 7 8d 8d 8d 19 9c 10c 11 12 12 13 14 16 15 17 18	1,500 285,629 51,898 36,433 19,958
December Francisco	b c 7 8a b c d 9 a b c 10a b c 11 12 13 14 15 16 17 18 19	Less: rent Net rental Other inve Gross am than invei Less: cos Gain or (ii Net gain or Special e Gross rev contributi Less: dire Net incon Gross sa Less: cos Gross pro Other rev Total rev Program Manager Fundrais Payment Total ex Excess of Net asse	al expense income or estment incount from the property of the	(loss) (subtractione (describe seles of assets and seles in schedule) or	et line 8b from the other tother toth	and (B)) If any amour penses act line 9b fro ences (C)) (C)) (A)) from line 12 ar (from line	(A) Securities It is from gaming, che of In line 9a) (subtract line 10b from 11)	8a 8b 8c ck here 9a 9b 10a 10b om line 10	(B) Other 31,4 2,3	8c 7 7 8d	1,500 285,629 51,898 36,433 19,958 108,289 177,340
Friedrices	b c 7 8a b c d 9 a b c 10a b c 11 12 13 14 15 16 17 18 19 20	Less: rental Other invo Gross am than inven Less: cos Gain or (ii Net gain or Special er Gross ren contributi Less: dire Net incom Gross sa Less: cos Gross pro Other ren Total ren Program Manager Fundrais Payment Total ex Excess of Net asse Other ch	al expense income or estment income or other boss) (attactor (loss) (attactor (loss) (attactor (loss) (attactor (loss))	(loss) (subtractione (describe seles of assets and seles in schedule) or	extime 8b from the other tother tothe	and (B)) If any amour penses act line 9b fro ences (C)) (A)) from line 12 ar (from line 12 ar (from line 12 ar (from line 12)	(A) Securities It is from gaming, che of In line 9a) (aubtract line 10b from 11) (73, column (A))	8a 8b 8c ck here 9a 9b 10a 10b om line 10	(B) Other 31,4 2,3	8c 7 7 8d	1,500 285,629 51,898 36,433 19,958 108,289 177,340
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23-7322143 Part Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.) Functional Expenses Do not include amounts reported on line (B) Program (C) Management (A) Total services 6b, 8b, 9b, 10b, or 16 of Part I. 22 Grants and allocations (attach schedule) (cesh \$_ 22 If this amount includes foreign grants, check here 23 Specific assistance to Individuals (attach schedule) ,,,,, 23 24 Benefits paid to or for members (sittach schedule) 24 25 25 Compensation of officers, directors, etc. 20,728 51,819 20,728 10,363 26 Other salaries and wages 27 Pension plan contributions 27 28 Other employee benefits 28 29 Payroll taxes 29 30 Professional fundraising fees 30 4,810 4,810 31 Accounting fees 31 32 32 Lagal fees 33 33 Supplies Telephone 34 35 Postage and shipping 35 1,300 650 650 36 Occupancy 37 Equipment rental and maintenance 37 38 Printing and publications 38 39 Travel 40 Conferences, conventions, and meetings 40 41 41 Interest 4,885 4,885 42 Depreciation, depletion, etc. (attach schedule) 42 43 Other expenses not covered above (Itemize); 31,170 45,475 5,360 8,945 See Statement 1 43h b **43**c . 43d 43e 43f 44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 108,289 51,898 36,433 19,958 Joint Costs. Check | If you are following SOP 98-2. Yes X No Are any joint costs from a combined educational campaign and fundralsing solicitation reported in (B) Program services? ; and (iv) the amount allocated to Fundraising \$ (III) the amount allocated to Management and general \$

Form 990 (2005) FRIENDS OF RADNOR LAKE 23-7322143 Page 3 Statement of Program Service Accomplishments (See the instructions.) Form 990 is evallable for públic 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 Pert III, the organization's programs and accomplishments. What is the organization's primary exempt purpose? Program Service ▶ PROTECTION OF RADNOR LAKE STATE NATURAL AREA Expenses (Required for 501(c)(3) & All organizations must describe their exempt purpose echlevements in a clear and concise manner. State the number (4) orgs., & 4947(a)(1) of clients served, publications issued, etc. Discuss achievements that are not measurable, (Section 501(c)(3) and (4) trusts; but optional for organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) others.) MAINTENANCE, PROTECTION IMPROVEMENT OF NATURZAL ENVIRONMENT, HABITAT, FACILITIES ON PARK PROPERTY VIA LAND ACQUISITION OF SURROUNDING LOTS 31,203 if this amount includes foreign grants, check here (Grants and allocations EDUCATIONAL & ENVIRONMENTAL STUDIES -- DEER, COYOTE, AND EAGLE SCOUT PROJECTS, ENVIRONMENTAL ED, AND NEWSLETTER 9,284 If this amount includes foreign grants, check here (Grants and allocations CONTINUE TO SUPPORT RADNOR LAKE STATE PARK WITH PROGRAMS STATE DOES NOT FUND. JUNIOR RANGER PROGRAMS AND OTHER PARK SUPPORT 11,217 If this amount includes foreign grants, check here (Grants and allocations (Grants and allocations if this amount includes foreign grants, check here Other program services (attach schedule) 194 if this amount includes foreign grants, check here (Grants and allocations Total of Program Service Expenses (should equal line 44, column (B), Program services) 898 Form 990 (2005)

Forn	n 990 (2	2005) FRIENDS OF RADNOR LAKE		23-7	7322143	_	Page 4
P	ut IV	Balance Sheets (See the instructions.)					
	Note:	Where required, attached schedules and amounts within column should be for end-of-year amounts only.	the d	escription	(A) Beginning of year		(B) End of year
	45	Cash-non-interest-bearing			614,399	45	431,048
	46	Savings and temporary cash investments				46	
	47a	Accounts receivable Less: allowance for doubtful accounts	47a 47b	,	16,728	47c	17,905
	48a	Piedges receivable	483				
	 	Less: allowance for doubtful accounts	485		30,000	480	
	49					49	
	50	Grants receivable Receivables from officers, directors, trustees, and key of	melau	AAF		70	W
	50					50	
	P4-	(attach schedule)				648384	
			1-4.	1			
en.	٠.	schedule) Less: allowance for doubtful accounts	51B				
Assets		Less; anowance for appropri accounts	910			51c	2,350
As.	52	Inventories for sale or use				53	<u> </u>
	53	Prepaid expenses and deferred charges Investments-securities	. .			 	
	54			Cost FMV	100 Year 100 March 100 Mar	54 45 (6) Au	,
	56a	Investments-land, buildings, and	ł	1 58 46			
		equipment: basis	55a	37,140		50%	
	ь	Less: accumulated depreciation (attach		30.003	00 470		10 000
		schedule) See Statement 2	55b	·	20,478	1	18,279
	56	Investments-other (attach schedule)	. ,	~·····		56 09 (25%)	
	57a	Land, buildings, and equipment: basis	57a	1,015,437		37.2 2	
	ь	Less: accumulated depreciation (attach			60E 006	25.00	5 04 F 40 F
		schedule) See Statement 3	57b		625,926		1,015,437
	58	Other assets (describe)		58	
					+ 968 F98		1 405 040
	59	Total assets (must equal line 74), Add lines 45 throug			1,307,531		1,485,019
	80	Accounts payable and accrued expenses			1,064	-	1,212
	81	Grants payable		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		61	
	82	Deferred revenue				62	
4?	63	Loans from officers, directors, trustees, and key emplo	yees {	ettech			
≅]	schedule)		.,,,,,,,,,,,		63	
Liabilities		Tax-exempt bond liabilities (attach schedule)	,	.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		64a	
	Ь	Mortgages and other notes payable (attach schedula)				84b	
	65	Other liabilities (describe				65	
	j				7.064		1 010
	66	Total flabilities. Add lines 60 through 65			1,064	88	1,212
	Orga		end co	emplete lines			
		67 through 69 and lines 73 and 74.			851,463		1,339,954
8	87	Unrestricted			455,004	67	143,853
3	68	Temporarily restricted			433,004	-	143,653
Sa.	69	Permanently restricted anizations that do not follow SFAS 117, check here		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		69	
or Fund Balances	Org		▶ \	j and			
i i		complete lines 70 through 74.					
2	70	Capital stock, trust principal, or current funds				70	
Net Assets	71	Paid-in or capital surplus, or land, building, and equipr				71	
- S	72	Retained earnings, endowment, accumulated income				72	
\$	73	Total net assets or fund balances (add lines 67 thro	սցի 6։	or lines		5 Z	
_		70 through 72;	.1 II		1,306,46	7 72	1,483,807
	1	column (A) must equal line 19; column (B) must equa			1,307,53		1,485,019
	74	Total liabilities and net assets/fund balances. Add	ines t	ор апо 73,		- , , -	Form 990 (2005)

Total revenue (Part I, line 12). Add lines c and d Sb bas tb senil bbA ZP S Other (specify): Investment expenses not included on Part I, line 6b Amounts included on Part I, line 12, but not on line a: 285,629 Subtract line to from line a Ad figuratif to sent bbA 9 10 4 Other (specify): Recovenes of prior year grants £ά Donated services and use of facilities 29 atnemisevni no snisg bezisennu teN Amounts included on line a but not on Part I, line 12: Total revenue, galne, and other support per audited financial statements 582,629 instructions.) Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the A-VI haq **₹ 908**₽ 23-7322143 Form 990 (2005) FRIENDS OF RADNOR LAKE 08/30/500e 13:0t 16153705228 SAMOHT MIC PAGE 80

	P		Sb bns fb senii bbA	
		45		
			Other (specify):	2
		LP .	investment expenses not included on Part I, Ime 6b	Ļ
		, , , , , , , , , , , , , , , , , , ,	Amounts included on Part I, line 17, but not on line a:	p
108,289	3		Subtract fine b from fine	9
	9		bd dguorth td serill bbA	
		5 q		
			Other (specify):	7
		£d	Losses reported on Part I, line 20	3
		Zq	Prior year adjustments reported on Part I, line 20	Z
		ŀd	Donated services and use of facilities	L
		• •	:\tau Insq for ine a but not Part I, line	q
108,289			strametsta islonenit betibue teq sazzoi bne sasnegxa isto.	E
	плизеЯ т	Financial Statements With Expenses pe	Reconcilistion of Expenses per Audited	ਕ
582 25	•	4	Total revenue (Part I, line 12). Add lines c and d	-
	r Return *	1 1	At.IV-54-174 Reconcilistion of Expenses per Audited Total expenses and losses per audited finencial statements Amounts included on line a but not Part I, line 17: Donated services and use of facilities	۱ و

		or key employee at any time during the year even if they were not compensated.) (See the instructions.)
director, trustee,	,reoffic	文配式 公配業 Current Officers, Directors, Trustees, and Key Employees (List each person who was an
108,289	0	● Total expenses (Part I, line 17), Add lines c and d
	P	Sb bng fb zenii bbA

Form 990 (2005)				
			-	
		·		
		·	10.77	
0	0	0	SECRETARY 0	KAREN DAVIS KAREN DAVIS
)	0	0	AEAUSAEAT 0	3009 TRIMBLE RD WASHVILLE TW 37215
)	0	0	0 AICE BEES	4209 SWEED ROAD WASHVILLE TW 37205
)	o	0	0 PRESIDENT	306 MOUNTAINELL THE STRING BUSHVILLE TH 37215
eccount and other account and other allowences	at dintro (G) the district of the control of the c	(C) Compensation (1) (If not paid, enter (-0-	(B) Title and everage hours per nouls position	assibbs brie emsM (A)

$\overline{}$	990 (2005) FRIENDS OF RADNOR LAKE		-7322143		Page 6
	rt V-A Current Officers, Directors, Trustees, and	Key Employees (c	ontinued)		Yes No
75 a	Enter the total number of officers, directors, and trustees permitted to	vote on organization bus	iness et board		以第一步为此。
	meetings				
D	Are any officers, directors, trustees, or key employees listed in Form	990, Part V-A, or highest	compensated		2 312 4 705
	employees listed in Schedule A, Part I, or highest compensated profe	essional and other Indepa	ndent		
	contractors listed in Schedule A, Part II-A or II-B, related to each other				
	relationships? If "Yes," attach a statement that identifies the individual	le and explains the relatio	nshtp(s)		75b X
			***********		7.3
c	Do any officers, directors, trustees, or key employees listed in Form 8	990, Part V-A, or highest	compansated		
	employees listed in Schedule A, Part I, or highest compensated profe				
	contractors listed in Schedule A, Part II-A or II-B, receive compensation				
	tax exempt or taxable, that are related to this organization through co				75c X
	Note. Related organizations include section 509(a)(3) supporting organizations			*************	X260 21 21 20 25
	(), (,				
	If "Yes," attach a statement that identifies the individuals, explains the	relationship between this	2		
	organization and the other organization(s), and describes the comper		_		
	Including amounts paid to each individual by each related organization				
d	Does the organization have a written confilct of interest policy?				75d X
	rt.V-B: Former Officers, Directors, Trustees, and I		at Received Co.	manasian as Ast	7.74
	(If any former officer, director, trustee, or key employee of the year, list that person below and enter the amount of c instructions.)	eceived compensation or	other benefits (desc	ribed below) during	
	(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contrib. to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
N/J					
					
``Pa	it V Other Information (See 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 to				77 X
	If "Yes," attach a conformed copy of the changes.				
78 e	Did the organization have unrelated business gross income of \$1,000				78a X
ь	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 contra	action during the year? If	'Yes," attach		题材料200
	a statement		* * * * * * * * * * * * * * * * * * * *		79 🗶
8 0a	is the organization related (other than by association with a statewish	e or nationwide organizat	lon) through		200 p. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
-	common membership, governing bodies, trustees, officers, etc., to a				80a X
b	Market Ma	,,			
		and check whether it is	s in exemption	nonexempt	
81 e	Enter direct and indirect political expenditures. (See line 81 instruction	ons.)	81a		SEA STAN
b					81b X
DAA	THE STATE OF THE S				Form 990 (2005)

Form	990 (2005) FRIENDS OF RADNOR LAKE	23-7322143		F	age 7
	t.VI Other Information (continued)			Yes	No
82 z	Did the organization receive donated services or the use of materials, equipment, or facili	ties et 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		1	100	
	amount as revenue in Part I or as an expense in Part II.			EX.	
	(See Instructions in Part III.)	82b			
83a	Did the organization comply with the public inspection requirements for returns and exem	ption applications?	83a	X	
b	Did the organization comply with the public inspection requirements for returns and exem Did the organization comply with the disclosure requirements relating to quid pro quo con	tributions?	N/A 83b		
848	Did the organization solicit any contributions or gifts that were not tax deductible?				X
b_	if "Yes," did the organization include with every solicitation an express statement that suc			2 2 3 3	
	gifts were not tax deductible?		N/A B4b		
85	501(c)(4), (5), or (6) organizations, a Were substantially all dues nondeductible by memb	ers?	N/A 85a		
ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		N/A 85b		
	if "Yes" was answered to either 85s or 85b, do not complete 85c through 85h below unle				200
	received a waiver for proxy tax owed for the prior year.			1.03	
c	Dues, assessments, and similar amounts from members	85c			
d	Section 162(e) lobbying and political expenditures	l oeal		北京	100
•	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices				
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	l l		1	
0	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A 859		<u> </u>
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the a			1	
	to its reasonable estimate of dues allocable to nondeductible lobbying and political exper			}	
	following tax year?		N/A 85H		L
88	501(c)(7) orgs. Enter: a initiation fees and capital contributions included on			4877	G 30"
-	line 12	86a			
ь	Gross receipts, included on line 12, for public use of club facilities	86b			
87	501(c)(12) orgs. Enter: a Gross Income from members or shareholders				1
ь	Gross income from other sources. (Do not net amounts due or paid to other			1600	
•	sources against amounts due or received from them.)	87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxet	ole corporation or			
UU	partnership, or an entity disregarded as separate from the organization under Regulation	ns sections 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 ye	ar under;		7 1/2 A	A/40-
000	section 4911 ► 0 ; section 4912 ► 0	; section 4955	0		26.
h	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess b	enefit transaction			
	during the year or did it become aware of an excess benefit transaction from a prior year	r? if "Yes," attach			
	a statement explaining each transaction		891	s	X
	Enter; Amount of tax Imposed on the organization managers or disqualified persons dur	no the vear			
٠	sections 4912, 4955, and 4958		>		0
d	and the same of th		·· •		0
902					
b	Number of employees employed in the pay period that includes March 12, 2005 (See				
_	Instructions.)	<u>_</u>	90b		
91a	The books are in care of	Telephona no.	> ,		. . .
-					
	Located at	ZIP+4 ▶			
ь	At any time during the calendar year, did the organization have an interest in or a signal	ture or other authority			
_	over a financial account in a foreign country (such as a bank account, securities account	st, or other financial		Yes	
	account)?		91	ь	X
	If " Yes," enter the name of the foreign country			1	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Rep	ort of Foreign Bank		图图	1
	and Financial Accounts.	-		關於	
	At any time during the calendar year, did the organization maintain an office outside of	the United States?	91	c	X
c	and the second s				_
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041-C	heck here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year	>			
	The state of the s		F	5 ma	0 (2005)

n 990 (200)	A to - ' Classic D			ingtructions \			
art VII®	Analysis of Income-Pro	ducing Activities					1
-	ass amounts unless otherwise	<u> -</u>		d bualness income	1	by sec. 512, 513, or 514	(E) Related or
ated. Program	service revenue:		(A) Business code	(B) Amount	Exclusion code	(D) Amount	exempt function income
OTH	ER SERVIES				 		
					 		
Medicare	/Medicaid payments						
Fees and	contracts from government agenc	cles					
Members	atnemasesses bne seub qida				 		10 51
	on savings and temporary cash love and interest from securities		110000	18	3 1		12,51
	il income or (loss) from real estate:						An employed
debt-finar	nced property						
not debt-	financed property				 		
	il income or (ioss) from personal pr					· · · · · · · · · · · · · · · · · · ·	
Gain or //	estment income	in Inventory			 		
	ne or (loss) from special events				1	29,060	
	offit or (loss) from sales of inventor						
Other rev							
See	Statement 4						1,50
							
							
Total (ad: Line 105	Explain how each activity for whi	E)) he amount on line 12, files to the Accom	Part I. pli shment in column (E)	of Exempt Purp	0808 (8	See the instruction	43,09: ns.)
Total (ad: : Line 105 ir! VIII ae No. ▼	id line 104, columns (B), (D), and (plus line 1d, Part I, should equal to Relationship of Activit	E)) he amount on line 12, files to the Accom	Part I. pli shment in column (E)	of Exempt Purp	2) 8080	See the instruction	43,099 ns.)
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Total (ac :: Line 105 art VIII na No. V A Art IX Name, add partners N/A Art X (a) Did the (b) Did the Note: If "Y ase n'e d parrer's	Information Regarding (A) Iress, and EIN of corporation, ship, or disregarded entity Information, during the year, rece organization, during the year, pa (es' to (b), file Form 8870 and Formation belief, it is true, correct, and corporation, and belief, it is true, correct, and corporation belief, it is true, correct, and title.	he amount on line 12, Files to the Accommendation of the Accommend	Part I. plishment in column (E) roydling funds iaries and % % % % % clated with y or Indirectly, on is). eturn, including arer (other than STAX	of Exempt Purposes of Part VII contributed for such purposes). Disregarded En (C) Nature of activities Personal Bene, to pay premiums on a personal benefit con accompanying scheduler officer) is based on all integrated for the contributed for t	fit Contantantantantantantantantantantantantan	See the instruction tity to the accomplishments the instruction (D) Total income racts (See the instruction in benefit contract? Thents, and to the best of more than the instruction in the instruction	A3,092 Ins.) Ins.) (E) End-of-year assets Structions.) Yes X No Yes X No my knowledge showledge. 8/3/06 Preparers SSN or PTIN
Total (ac :: Line 105 art VIII na No. V A Art IX Name, add partners N/A art X (a) Did th (b) Did th Note: If "Y ase "e	Information Regarding or organization, during the year, pa e organization, during the year, pa desire to (b), file Form 8870 and Formation Bellef, it is true, correct, and composition or print name and title Preparer's signature Firm's name (or yours if self-employed).	he amount on line 12, Files to the Accommendation of the Accommend	Part I. plishment in column (E) roydling funds laries and % % % % % % % clated with y or indirectly, on ins). eturn, including arer (other then discounts) ME TAX A AVE	of Exempt Purposes of Part VII contributed for such purposes). Disregarded En (C) Nature of activities Personal Benefit con a personal benefit con a personal benefit conficer) is based on all information of the part of t	fit Contantantantantantantantantantantantantan	See the instruction that to the accomplishment of the instruction (D) Total income racts (See the instruction of the instructi	A3,09; ns.) ent (E) End-of-year assets structions.) Yes X No Yes X No Yes X No Yes X No (See Gen. Instr. W)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ OMB No. 1545-0047 2005

Name of the orga	FRIENDS OF	RADNOR LAKE		Employer identification	
Part I	Compensation of the Five Highest Paid Employees (See page 1 of the instructions. List each one. If the	o Other Than Officer ere are none, enter "I	s, Directors, a	nd Trustees	
	(a) Name and address of each employee paid more than \$50,000	(b) Title and average hou per week devoted to positi	rs (a) Cama	(d) Contrib. to empl. ban, plans & deferred.comp	(e) Expense account & other
NONE					IIQWIII IOLIG
,					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	f other employees paid over \$50,000	0		4.77 ST	
Part II-A	Compensation of the Five Highest Paid Independe				
	(See page 2 of the instructions. List each one (whe	ther individuals or fire	ns), if there ar	e none, enter	"None.")
	(a) Name and address of each independent contractor paid more than \$50	0,000	(b) Type of	service (c) Compensation
NONE					
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		, , . , , , , , , , , , , , , ,			
Total number o	f others receiving over \$50,000 for		NAME OF THE PARTY OF		
professional se	rvices	<u> </u>			1
Part II-B	Compensation of the Five Highest Paid Independ (List each contractor who performed services other firms. If there are none, enter "None." See page 2.0	than professional se	Other Services	s er individuals	or
	(a) Name and address of each independent contractor paid more than \$5	0,000	(b) Type of	service (c	Compensation
NONE					
. , , , , , , , , , , , , , , , , , , ,					
					N. 1-2
Total number o	of other contractors receiving over				
\$50,000 for off		<u> </u>	经验证的人类的关系	4年中华	CEOK & TO THE STATE OF
	k Reduction Act Notice, see the instructions for Form 990 and F	orm 990-EZ.	Sched	ule A (Form 990	or 990-EZ) 20

		A (Form 990 or 990-EZ) 2005 FRIENDS OF RADNOR LAKE 23-7322143		1	Page 2
<u> </u>	art j	(Coc page 2 of the manufactoris.)		Yes	No
1	Du	ring the year, has the organization attempted to influence national, state, or local legislation, including any	7	 	
	Or i	ampt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid			Į
	Pa	incurred in connection with the lobbying activities > \$ [Must equal amounts on line 38, rt VI-A, or line 1 of Part VI-B.)	•	1	
	Org	rt VI-A, or line I of Part VI-B.) ganizations that made an election under section 501(h) by filling Form 5768 must complete Part VI-A, Other	1	1900	X
	org	panizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of	1		
	the	liobbying activities.			
2	Du	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
	But	ostantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or		2.00	
	wit	h any taxable organization with which any such person is affiliated as an officer, director, trustee, majority		1	
		ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the		N. F	
	tra	nsactions,)	1		
1	Şa)	e, exchange, or leasing of property?	2a		X
D.	Ler	nding of money or other extension of credit?	2b		X
c d		The said of Books' del Arces' or rechines t	2c_	<u> </u>	X
u	газ	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	26		X
	Tra	nafer of any part of its income or assets?		}	х
3a		you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	20	 	^
		determine that recipients qualify to receive payments.)	3a		x
ь	Do	you have a section 403(b) annuity plan for your employees?	3b		X
¢		ring the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		X
42		you maintain any separate account for participating donors where donors have the right to provide advice on			
	the	use or distribution of funds?	48		X
_b	Do	you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X
P	rt l	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			•
The	2000	nization 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)(l).			
6	H	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	П	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).	•		
8	П	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(III). Enter the hospital's name, city,			
	_	The second of th			
	_	and state >			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv).			
		(Also complete the Support Schedule in Part IV-A.)			
11=	Ш	An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section			
	\Box	170(b)(1)(A)(vi), (Also complete the Support Schedule in Part IV-A.)			
11b	H	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12	Ш	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts	į.		
		from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the			
		organization after June 30, 1975. See section 509(a)(2), (Also complete the Support Schedule in Part IV-A.)			
13	X	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). Check			
		the box that describes the type of supporting organization: Type 1 Type 2 Type 3			
		Provide the following information about the supported organizations. (Sae page 6 of the instructions.)			
		(a) Name(s) of supported organization(s)) Line r	nuupe	Γ
		(w) regulated of anything of Squarespounds	from al	evod	
		RADNOR LAKE NATURAL AREA	8		
		VURNOV THUS MATOVATI VVEV	_ 0		
14		An organization organized and operated to test for public safety. Section 509(a)(4), (See page 6 of the instructions.)			
		m t	AA		200#

aler	: You may use the worksheet in the instruction	is for converting ti	rom the accrual to the ca	sh method of accounting.		
	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
i	Gifts, grants, and contributions received. (Do					
	not include unusual grants. See line 28.)				4P 1.00 (A. 10.5)	
	Membership fees received				VI 1870	
•	Gross receipts from edmissions, merchandise			1		Í
	sold or services performed, or furnishing of					
	facilities in any activity that is related to the			-		
	organization's charitable, etc., purpose					
3	Gross income from interest, dividends,		İ			
	amounts received from payments on securities loans (section 512(a)(5)), rents, royalities, and					
	unrelated business taxable income (less		i i			
	section 511 texes) from businesses acquired					1
	by the organization after June 30, 1975					
1	Net income from unrelated business					
	activities not included in line 18	· · · · · · · · · · · · · · · · · · ·				
)	Tax revenues levied for the organization's			1		
	benefit and either paid to it or expended on		1	1		
	Ite behalf					
Ī	The value of services or facilities furnished to	•				
	the organization by a governmental unit			1		
	withous charge. Do not include the value of services or facilities generally furnished to the					
	public without charge					
2	Other income. Attach a schedule. Do not	•				
	Include gain or (loss) from sale of capital assets					
	Total of lines 15 through 22					
<u> </u>	Line 23 minus line 17					
;	Enter 1% of line 23					
3	Organizations described on lines 10 or 1	1; a Enter 2%	of amount in column (e),	line 24		6a
ь	Prepare a list for your records to show the n				æ	
	governmental unit or publicly supported orga					
	amount shown in line 26a. Do not file this I	ist with your retu	um. Enter the total of all t	hese excess amounts	> 2	6b
C	Total support for section 509(a)(1) test: Ente	er line 24, column	(a)		> 2	6c
đ		18				
		22			▶ 2	6d
•	Public support (line 26c minus line 26d total))	• • • • • • • • • • • • • • • • • • • •			6e
1	Public support percentage (line 25e (num	erator) divided i				6f
7	Organizations described on line 12:					
	person," prepare a list for your records to sh	low the name of, a	and total amounts receive	ed in each year from, each	h "disqualified pers	on."
	Do not file this list with your return. Ente					n/
	(2004) (200	3)	(200	2)	(2001)	
		received from ea	ch person (other than "di			
b						
b		each year, that w	as more than the larger	THE STUDGETT OF THE TO THE		
b	show the name of, and amount received for					ter computing
b	show the name of, and amount received for (Include in the list organizations described in	n lines 5 through 1	I1b, as weil as individual	s.) Do not file this list wi	ith your return. Af	
b	show the name of, and amount received for (Include in the list organizations described in the difference between the emount received	n lines 5 through 1	I1b, as weil as individual	s.) Do not file this list wi	ith your return. Af	excess
b	show the name of, and amount received for (Include in the list organizations described in the difference between the amount received amounts) for each year:	n lines 5 through 1 I and the larger at	I1b, as well as individual nount described in (1) or	s.) Do not file this list wi (2), enter the sum of thes	ith your return. Af se differences (the	excess N/
	show the name of, and amount received for (Include in the list organizations described in the difference between the amount received amounts) for each year: (2004) (200	n lines 5 through 1 I and the larger at 03)	I1b, as well as individual nount described in (1) or (200	s.) Do not file this list wi	ith your return. Af se differences (the	excess N/
	show the name of, and amount received for (Include in the list organizations described in the difference between the amount received amounts) for each year: (2004) (2004) (2004) Add: Amounts from column (e) for lines;	n lines 5 through 1 d and the larger at 03) 15	I1b, as well as individuals nount described in (1) or (200	s.) Do not file this list wi (2), enter the sum of thes (2)	th your return. Af se differences (the (2001)	excess N/.
C	show the name of, and amount received for (Include in the list organizations described in the difference between the amount received amounts) for each year: (2004) (2004) (2004) (3004) (4004) (4004)	n lines 5 through 1 d and the larger ar 03) 15 20	11b, as well as individuals nount described in (1) or (200 16	s.) Do not file this list wi (2), enter the sum of thes (2)	ith your return. Af se differences (the	excess N/
C	show the name of, and amount received for (Include in the list organizations described in the difference between the amount received amounts) for each year: (2004) (2004) (2004) (4005) Add: Amounts from column (e) for lines: 17 Add: Line 27s total.	n lines 5 through 1 and the larger ar 03)	11b, as well as individuals nount described in (1) or (200 16 21 27b total	s.) Do not file this list w (2), enter the sum of thes (2)	ith your return. Af se differences (the (2001)	7c
C d	show the name of, and amount received for (Include in the list organizations described in the difference between the amount received amounts) for each year. (2004) (2004	n lines 5 through 1 and the larger ar 23) 15 20 and line l total)	I1b, as well as individuals nount described in (1) or (200 16 21 27b total	s.) Do not file this list w (2), enter the sum of thes (2)	th your return. Af se differences (the (2001)	7c
c d	show the name of, and amount received for (Include in the list organizations described in the difference between the amount received amounts) for each year: (2004) (2004) (2004) Add: Amounts from column (e) for lines: 17 Add: Line 27s total Public support (line 27c total minus line 27d Total support for section 509(a)(2) test: Ent	n lines 5 through 1 and the larger and 13) 15 20 and line I total)	I1b, as well as individuals nount described in (1) or (200 16	s.) Do not file this list wi (2), enter the sum of thes (2)	ith your return. Af se differences (the (2001)	7c
C d	show the name of, and amount received for (Include in the list organizations described in the difference between the amount received amounts) for each year: (2004) (2004) (2004) Add: Amounts from column (e) for lines: 17 Add: Line 27s total. Public support (line 27c total minus line 27d Total support percentage (line 27s (nur 1945)).	n lines 5 through 1 and the larger and 13	I1b, as well as individuals nount described in (1) or (200 16 21 27b total es 23, column (a) by line 27f (denominate	s.) Do not file this list wi (2), enter the sum of thes (2) 2) 27f	th your return. Af se differences (the (2001)	7c

23-7322143

	e A (Form 990 or 990-EZ) 2005 FRIENDS OF RADNOR LAKE 23-732	22143	F	age 4
Part	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)		,	
	pes the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	N/A_	Yes	No
	ner governing instrument, or in a resolution of its governing body?	29	(a) (7 - N - N)	Section Control
	pes the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	ochures, catalogues, and other written communications with the public dealing with student admissions,			1.4
	ograms, and scholarships?	30	S. Jana San Sa	<u>स्वराज्य</u>
	as the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during			
	e period of solicitation for students, or during the registration period if it has no solicitation program, in a way			CAL SE
	at makes the policy known to all parts of the general community it serves? Yes,* please describe; if "No," please explain. (if you need more space, attach a separate statement.)	31 2000	4 80 5 200	-A285-13
"				V ∩-1 *
• •		1000000	ni di it	
• •		10907.5		
• •		2		
Do	pes the organization maintain the following:			100
	ecords Indicating the racial composition of the student body, faculty, and administrative staff?	32a	######################################	REKE,T
	ecords documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	····· 328	+	
		32b		1
	isis? pies of all catalogues, brochures, announcements, and other written communications to the public dealing		╁╌	
	About Justinal and Control and	320		
	on student admissions, programs, and scholarships? pries of all material used by the organization or on its behalf to solicit contributions?			
	shop of the street many of six differential at all in pourse to produce and illustration.	¥.	9 1/10 C	200
Hf v	you answered "No" to any of the above, please explain, (if you need more space, attach a separate statement.)			
		3.5		
• •		127/99987		282.5
Do	pes the organization discriminate by race in any way with respect to:			
				1
a St	udents' rights or privileges?	33a		
				Ţ
b Ac	dmlasions policies?	331	,	<u> </u>
¢ Er	nployment of faculty or administrative staff?	33c		
				}
d So	cholarships or other financial assistance?	330	<u> </u>	L
• E	ducational policies?	334		
			1	1
f U	se of facilities?	33f		
				1
g At	thletic programs?	330	Ц	ļ
	•			
h O	ther extracurricular activities?	33h) 10 (1) (1) (1) (1)	107 000
				15.5
lf	you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			2.5
		THE 188		34. 3
			製造	
	·		3000	1.00
			1	
la D	oes the organization receive any finencial aid or assistance from a governmental agency?	341	\	
			-	
	les the organization's right to auch aid ever been revoked or suspended?	341	A (金)(A)	
If	you answered "Yes" to either 34a or b, please explain using an attached statement.		4.	1
	the standard of the state of the state of the second of th	1800 1800		
5 D	loes the organization cartify that it has compiled with the applicable requirements of sections 4,01 through 4,05 f Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	VIII 2 27576 V.	Apple Cyrlor
0	I Rev. F100, 13-50, 1815-2 C.B. 501, covering facial nonlined infiniteriors in 140, attach an explanation	dule A (Form 990 or		\

JIM THOMAS

	nedule A (Form 990 or 990-EZ) 2005 E	RIENDS OF F	ADNOR LAKE			23-7	732	214	3	Page 5
Şİ.	Part VI-A Lobbying Expend	litures by Electing	g Public Charities	(See page 9	of th	e instru				-
<u></u>		ONLY by an eligi					A\F			
<u>Un</u>	eck a If the organization belo	ngs to an affiliated grou	p. Check	. p it vor⊓cl	necked		'limite	q cou	troi" provisions appi	Y
	Limits or	ւ Lobbying Exper	ıditures		1	(a) Affiliated (anour		(b)	ad
	(The term to vocati	tures" means amounts	noid at Incomed \			totals			To be complete for ALL electin organizations	S
38	Total lobbying expenditures to influence			36	 			-		
37	_			37	 					
38	Total lobbying expenditures (add lines 3	s programme body (uniq se and 27)	ccioobying)							
	Other exempt purpose expenditures	o and or j		39	 					
40	Other exempt purpose expenditures (ad	d lines 38 and 39)	<u> </u>	40			· ·	**************************************		
	41 Lobbying nontaxable amount. Enter the amount from the following table-					A Carrol	53562	Kara a	FAR MELLY COLONIA COM	1 6 E F
	If the amount on line 40 is- The lobbying nontaxable amount is-				155					
	Not over \$500,000		on line 40							
	Over \$500,000 but not over \$1,000,000				1		45			
	Over \$1,000,000 but not over \$1,500,000		of the excess over \$1,000	L (**************************************	BULLERE	M. M	and the second s	(AMARIAN YA
	Over \$1,500,000 but not over \$17,000,000	•		14.3 mm s 2	2 33	The Table				
	Over \$17,000,000	·		1708373	18 3			A Dry		
42	Grassroots nontaxable amount (enter 2	11. 11. 11. 11. 11. 11. 11. 11. 11. 11.	· · · · · · · · · · · · · · · · · · ·			20,217:00001	~ J		er a de la company and the same and the same of the same and same	440 X 100
43	Subtract line 42 from line 38. Enter -0-1									
44	Subtract line 41 from line 38. Enter -0- i	fline 41 is more than Ilr		_44	1					
	·,		***************************************				1.134	P		200
	Caution: If there is an amount on either				会を	N. W. S.	*C**	A P		
		4-Year Aver	aging Period Und	er Section 501	1(h)					
	(Some organization	ons that made a section	1 501(h) election do not	have to complete	all of t	he five col	ստոե	below	٧,	
		See the instructions for	r lines 45 through 50 or	n page 11 of the In	structio	ona.)		_		
			I obbylna Fyna	enditures During	LYaar	Averagin	ıa Þe	riori		
_			Epopying Expe	montares suring -						
	Calendar year (or	(a)	(b)	(c)		•	q)		(⊕)	
	fiscal year beginning in)	2005	2004	2003		20	02		Total	
									ļ	
	Lobbying nontaxable amount	VIII.	1. 118 har - 6 de la 1. 18 de la 18 de la 18 de la 18 de la 18 de la 18 de la 18 de la 18 de la 18 de la 18 de	A CANADA AND AND AND AND AND AND AND AND AN	La de la constante	00.518. WHY.	90 - 30	228.5		
46	Lobbying ceiling amount (150% of	1 F 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S								
	line 45(e))	26.00	A Committee of the second seco	Control of the second	48 (S. 17)	Chicago and Chica	72.20			
					-					
4/	Total lobbying expenditures									
4.0	Constitution of the boundary		1		1					
	Grassroots nontaxable amount		CATALON SONORIAN VAL	SECTION STATES		nancia.	₹ % G			
48	Grassroots calling amount (150% of					t for a	SOLE E	4.3		
_	line 48(e))	100000000000000000000000000000000000000	And the second s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ORGA AND	A. 19	A.F. 741a			
50	Grassroots lobbying expenditures		}	Ì						
	Lobbying Activit	v by Nonejecting	Public Charitles	<u> </u>					· · · · · · · · · · · · · · · · · · ·	
***		y by organization		plete Part VI-A	A) (Se	e page	11 0	of the	instructions.)	N/A
Du	ring the year, dld the organization attemp				7 \				1	
	empt to influence public opinion on a legi						Yes	No	Amount	
ŧ	· · · · · · · · · · · · · · · · · · ·		•			Ī			Parties and the	
E		ansoxe ni noitsaneomo	as reported on lines thr	ough c h.)						9.4
-										serve a mysterial c
Č	1 *** * * * * * * * * * * * * * * * * *									
	Publications, or published or proader	et statements		• • • • • • • • • • • • • • • • • • • •						
		ying purposes	a Minia a a aren errenen errene errene erre	6 a 6 a 356 \ 4 ንግራን (ሮንግሞፎዝሞ	-1-4-2-1-1-4					
•		taffa, government offici	als, or a legislative bod	y						
ł										
1	Total lobbying expenditures (Add line	s through c h.)						¥		
_	If "Yes" to any of the above, also atta	ch a statement giving a	detailed description of	the lobbying activi	ties.				_	
						\$ -	.bade	Ja A /	Form 990 At 990.F	Z1 200E

Schedule A (Forr	m 990 or 990-EZ) 2005	FRIEND	S OF RADNOR LA	KE	23-7322143		P	age 6
Part VIII	Information Reg	arding Tra ations (Se	nsfers To and Transac e page 12 of the instruc	tions and Rela	tionships With Noncharitable	l		-
1 Did the rep					ganization described in section			
501(c) of ti	he Code (other than sec	tion 501(c)(3)	organizations) or in section 52	27, relating to politic				
			ncheritable exempt organizeti				Yes	No
(ii) Othe	" Brasats		•••••••	• • • • • • • • • • • • • • • • • • • •		51a(i)	\longrightarrow	X
b Other trans	sactions;				***************************************	a(ii)		X
(f) Sale	s or exchanges of asset	ts with a nonc	haritable exempt organization		***************************************	b(i)	, [X
(ii) Purc	hases of assets from a	noncharitable	exempt organization			b(II)		Х
(m) Len	rei oi ischinezi ednibiuei	IL, OF OTHER ES	5 0 15			Þ(III)		X
(iv) Rein (v) Loar	noorsement arrangemer 19 or loan guarantees					b(iv)		X
		membership o	r fundreising solicitations		***************************************	b(y)		X
c Sharing of	taciilles, equipment, ma	alling lists, oth	er assets, or paid employees		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	С		X
d If the answ	er to any of the above it	s "Yes," comp	lete the following schedule, Co	olumn (b) should al v	vays show the fair market value of the			
			porting organization. If the organization is the goods		ess than fair market value in any			
(2)	(b)	IL SHOW ITS COM	(c)	, uner assers, or se	(d)			
Line no.	Amount Involved	Name of	noncharitable exempt organization	Descri	iption of transfers, transactions, and sharing	arrengem	ents	
N/A								
								
						•		
					· · · · · · · · · · · · · · · · · · ·			
		+						

		_						
	<u> </u>	 	·-·					
		+						
		1	VACCOUNT IN CO., IN CO. C.					
_	•	-	with, or related to, one or more		Izations			
	in section 501(c) of the o emplete the following sci		nan section 501(c)(3)) or in sec	ation 5277		☐ Y•	ıs X	No
D II TBS, CC	endere trie tollowing sci	necule:	(b)		(c)			—
	Name of organization		Type of organization		Description of relationship			
N/A								
V							···	
	An area				····			
		·						
	· · · · · · · · · · · · · · · · · · ·							
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08/30/2006	5 13:04	16153705228	JIM .	THOMAS		PAGE 18
Form 990	For calend	Sp dar year 2005, or tax year beg	ecial Events Sci	hedule , and ending		2005
Name		744, 2000, 5		,		ntification Number
FRIENDS C	F RADNOF	R LAKE	•		23-7322	2143
		(A)	(B)	(C) .	Others	Tota!
Gross receipts Less contribution	па	31,419	0 0	0 0	0	31,419 0
Gross revenue		31,419	0	0	0	31,419
Less direct expe	enses	2,359	0	0	0	2,359
Net income (loss)		29,060	0	0	0	29,060
•		NDRAISING				

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FYE: 12/31/2005

Statement 1 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
Evranea	\$	\$	\$	\$
Expenses GIFTS & AWARDS				
	387	194		193
DUES & SUBSCRIPTIONS INSURANCE	152		152	
BANK FEES	1,130		1,130	
· · — · · · · · · · · · · · · · · · · ·	923		138	785
DEER & COYOTE STUDY	3,618	3,618		Ì
JUNIOR RANGER PROGRAM	4,130	4,130		
CONTRACT LABOR				
EAGLE SCOUT PROJECTS				
ENVIRONMENTAL EDUCATION	1,712	1,712		_
EVENTS	3,750	1,875		1,875
FEES	314		314	
HOSPITALITY	433			433
NEWSLETTER	6,855	5,809		1,046
FRIST TECHNOLOGY GRANT	1,748	699	1,049	
GRANT FOR LAND PURCHASES	2,517	2,517		
LAND ACQUISITION GRANTS				
MEMBERSHIP OUTREACH				
NETHERTON VIDEO	287	86		201
PROPERTY TAX	394		394	
PARK SUPPORT	6,388	6,388		
POSTAGE & HANDLING	1,088		544	544
PRINTING & PUBLICATIONS	386		386	
SUPPLIES	656		328	328
PHONE	1,407		704	703
WEB SITE MAINTENANCE	375	188		187
COMPUTER EXPENSE	221		221	
ORAL HISTORY PROJECT	1,037	1,037		
WATER QUALITY STUDY	2,917	2,917		
CALENDAR EXPENSE	2,359			2,359
CALENDAR EXPENSE-PROMOTIONAL	2,650			2,650
LESS EXP IN REVENUE AS COGS	-2,359			-2,359
Total	\$ 45,475	\$ 31,170	\$ 5,360	\$ 8,945

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23-7322143

FYE: 12/31/2005

Federal Statements

Statement 2 - Form 990, Part IV, Line 55 - Investments In Land, Buildings, and Equipment

Description				•	
•		inning Year	Accum Deprec	End of Year	Accum Deprec
LAND	A1 .177 - A121 - AMELINE				A.
CHEEK 2 PROPERTY	\$	\$		\$	\$
MCCUBBIN PROPERTY					
FURNITURE					
CHEEK 1 PROPERTY				•	
DAVIS PROPERTY		•			
FURNITURE & EQUIPMENT					
_		36,454	15,976	37,140	• ————
Total	\$	36,454 \$	15,976	\$ 37,140	\$ 18,861

Statement 3 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description				
	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
	\$ 625,926 \$		\$ 1,015,437	\$
Total	\$ 625, 92 6 \$. 0	\$ 1,015,437	\$ 0

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JIM THOMAS

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RADNOR FRIENDS OF RADNOR LAKE

23-7322143

Federal Statements

FYE: 12/31/2005

Statement 4 - Form 990, Part VII, Line 103 - Other Revenue

Description	Business Code	Unrelated Amount	Exclusion Code	Exclusion Amount	Related Income
REVENUE FROM RADNOR REVELRY _GRANT INCOME		\$		\$	\$
GENERAL CONTRIBUTIONS SALES OF MERCHANDISE				·	
LICENSE PLATE INCOME			ı		
NETHERTON VIDEO INCOME UNREALIZED LOSS ON SECURITI					
MISCELLANEOUS INCOME			•		1,500
Total		\$ 0		\$ 0	\$ 1,500