

FILE COPY

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)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2005

Open to Public
Inspection

A For the 2005 calendar year, or tax year beginning July 1, 2005, and ending June 30, 2006

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

C Name of organization
Tennessee State University Foundation

Number and street (or P.O. box if mail is not delivered to street address); Room/suite
3500 John A. Merritt Blvd Box 9542

City or town, state or country, and ZIP + 4
Nashville, TN 37209-1561

D Employer identification number
23-7105693

E Telephone number
(615) 963-5481

F Accounting method: ☒ Cash ☐ Accrual
☐ Other (specify) ►

G Website: ►

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) If "Yes," enter number of affiliates: ►
H(c) Are all affiliates included? ☐ Yes ☒ No
(If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No
I Group Exemption Number: ►

J Organization type (check only one): ☒ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ If the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ►

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

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

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	1,311,694.01		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	1,000,000.00		
	d	Total (add lines 1a through 1c) (cash \$ noncash \$)	1d	2,311,694.01		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4	14,767.26		
	5	Dividends and interest from securities	5			
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe ►)	7				
Expenses	8a	Gross amount from sales of assets other than inventory	(A) Securities	9,515,528.50	8a	
	b	Less: cost or other basis and sales expenses	8b	8,674,223.26		
	c	Gain or (loss) (attach schedule)	8c	841,305.24		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	841,305.24		
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
	Net Assets	11	Other revenue (from Part VII, line 103)	11	1,349,760.61	
12		Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	4,517,527.12		
13		Program services (from line 44, column (B))	13	1,102,888.89		
14		Management and general (from line 44, column (C))	14	47,354.42		
15		Fundraising (from line 44, column (D))	15			
16		Payments to affiliates (attach schedule)	16			
17		Total expenses (add lines 13 and 14, column (A))	17	1,150,243.31		
18		Excess or (deficit) for the year (subtract line 17 from line 12)	18	3,367,283.81		
19		Net assets or fund balances at beginning of year (from line 73, column (A))	19	16,009,723.40		
20		Other changes in net assets or fund balances (attach explanation)	20			
21		Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	19,377,007.21		

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

Do not include amounts reported on line 8b, 8c, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22	605,975.24	605,975.24	
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25			
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	116,113.14	110,048.39	6,064.75
34	Telephone	34			
35	Postage and shipping	35	4,938.80	4,378.84	560.16
36	Occupancy	36			
37	Equipment rental and maintenance	37	4,011.80	4,011.80	
38	Printing and publications	38	14,081.97	13,841.77	220.20
39	Travel	39	133,613.36	133,613.36	
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42			
43	Other expenses not covered above (itemize):				
a	PROFESSIONAL/ADMINISTRATIVE SVCS	43a	191,426.03	191,426.03	
b	OTHER SERVICES & EXPENSES	43b	80,102.97	39,593.66	40,509.31
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	1,150,243.31	1,102,888.89	47,354.42

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

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

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Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► **TO SUPPORT TENNESSEE STATE UNIVERSITY**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts; not optional for others.)

a SCHOLARSHIP AID TO INDIVIDUAL STUDENTS ATTENDING TENNESSEE STATE UNIVERSITY AND OTHER ACADEMIC GIFTS AND AWARDS

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

605,975.24

b GRANTS TO TENNESSEE STATE UNIVERSITY

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

39,593.66

c FACULTY SUPPLEMENTS

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

133,613.36

d OTHER GENERAL SUPPORT TO TENNESSEE STATE UNIVERSITY

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

323,706.33

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

f Total of Program Service Expenses (should equal line 44, column (B), Program services).

1,102,888.89

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Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	6,094,318.57	45	8,196,687.51
	46 Savings and temporary cash investments		46	
	47a Accounts receivable			
	b Less: allowance for doubtful accounts	0.00	47c	189.48
	48a Pledges receivable			
	b Less: allowance for doubtful accounts	31,000	48c	0.00
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)			
	b Less: allowance for doubtful accounts		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments—securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV	9,885,164.72	54	11,185,785.27
	55a Investments—land, buildings, and equipment: basis			
	b Less: accumulated depreciation (attach schedule)		55c	
56 Investments—other (attach schedule)		56		
57a Land, buildings, and equipment: basis				
b Less: accumulated depreciation (attach schedule)		57c		
58 Other assets (describe ►)		58		
59 Total assets (must equal line 74). Add lines 45 through 58	16,010,481.29	59	19,382,662.26	
Liabilities	60 Accounts payable and accrued expenses	757.89	60	5,655.05
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ►)		65	
66 Total liabilities. Add lines 60 through 65	757.89	66	5,655.05	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted	8,369.50	68	0.00
	69 Permanently restricted	13,657,722.03	69	16,864,211.13
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	16,089,723.40	73	19,377,067.21
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73.	16,010,481.29	74	19,382,662.26

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Part VI Other Information (continued)

	Yes	No
81a 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	<input checked="" type="checkbox"/>
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	<input checked="" type="checkbox"/>
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	<input checked="" type="checkbox"/>
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	<input checked="" type="checkbox"/>
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	<input checked="" type="checkbox"/>
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	<input checked="" type="checkbox"/>
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	<input checked="" type="checkbox"/>
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	<input checked="" type="checkbox"/>
c Dues, assessments, and similar amounts from members	85c	
d Section 162(e) lobbying and political expenditures	85d	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b 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	87a	
b Gross income from other sources. (Do not net amounts due or paid to other 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 taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ; section 4912 ; section 4955		
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Enter: Amount of tax on line 89c, above, reimbursed by the organization		
90a List the states with which a copy of this return is filed		
b Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b	
91a The books are in care of Bob Hughes/Ben Northington Telephone no. (615) 963-5481 Located at 3506 John A Merritt Blvd Nashville, TN ZIP + 4 37209-1561		
a At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	<input type="checkbox"/>
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country	91c	<input type="checkbox"/>
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	<input type="checkbox"/>

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Part VII Analysis of Income-Producing Activities (See the instructions.)	
<p> <input type="checkbox"/> Unrelated business income <input type="checkbox"/> Excluded by section 512.513, or 514 <input type="checkbox"/> Related or exempt function income (e) </p>	<p> Program service revenue: a. Business code b. Amount c. Exclusion code d. Amount e. Related or exempt function income (e) </p>
<p> Net: Enter gross amounts unless otherwise indicated. 1. Dividends and interest from securities 2. Interest on savings and temporary cash investments 3. Net rental income or (loss) from real estate 4. Net rental income or (loss) from personal property 5. Net investment income 6. Gain or (loss) from sales of assets other than inventory 7. Net income or (loss) from special events 8. Gross profit or (loss) from sales of inventory 9. Other revenue: a </p>	
<p> Subtotal (add columns (b), (d), and (e)) Total (add line 10c, columns (b), (d), and (e)) </p>	
<p> Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.) </p>	
<p> Explain how each activity for which income is reported in column (c) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). </p>	
<p> Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.) </p>	
<p> (a) Name, address, and EIN of corporation, partnership, or disregarded entity (b) Percentage of ownership interest (c) Nature of activities (d) Total income (e) End-of-year assets </p>	
<p> Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.) </p>	
<p> a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input type="checkbox"/> No b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input type="checkbox"/> No c) If "Yes" to (b), the Form 8870 and Form 4720 (see instructions). </p>	
<p> Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. </p>	
<p> Part XI Signatures </p>	
<p> Preparer's signature: <i>Ben Northington / Fiscal Accounts Manager TSU Foundation</i> Date: <i>11/13/06</i> Type or print name and title: </p>	
<p> Taxpayer's signature: <i>[Signature]</i> Date: <i>11/13/06</i> Type or print name and title: </p>	
<p> Part XII Other Information </p>	
<p> 1. Other information: </p>	

SCHEDULE A
(Form 990 or 990-EZ)**Organization Exempt Under Section 501(c)(3)**(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2005Department of the Treasury
Internal Revenue Service**Supplementary Information—(See separate instructions.)**▶ **MUST** be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization

Tennessee State University Foundation

Employer identification number

Z3:7105693

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.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE	NONE	NONE	NONE	NONE

Total number of other employees paid over \$50,000 ▶

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	NONE	NONE

Total number of others receiving over \$50,000 for professional services ▶

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	NONE	NONE

Total number of other contractors receiving over \$50,000 for other services ▶

Schedule A (Form 990 or 990-EZ) 2005

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

Yes No

- 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities: \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

Organizations that made an election under section 501(n) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

- 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a Sale, exchange, or leasing of property? 2a ☒
- b Lending of money or other extension of credit? 2b ☒
- c Furnishing of goods, services, or facilities? 2c ☒
- d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? 2d ☒
- e Transfer of any part of its income or assets? 2e ☒
- 3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) 3a ☒
- b Do you have a section 403(b) annuity plan for your employees? 3b ☒
- c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? 3c ☒
- 4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? 4a ☒
- b Do you provide credit counseling, debt management, credit repair, or debt negotiation services? 4b ☒

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(iv).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(v). Enter the hospital's name, city, and state: _____
- 10 ☒ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11a ☐ 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)(vii). (Also complete the Support Schedule in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(viii). (Also complete the Support Schedule in Part IV-A.)
- 12 ☐ An organization that normally receives: (1) more than 33% 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% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 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. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2005

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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.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	3,212,545	4,899,677	5,802,875	4,125,614	18,040,711
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	449,415	118,057	(254,270)	(40,722)	272,480
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	3,661,960	5,017,733.55	5,548,605	4,084,892	18,313,191
24 Line 23 minus line 17	3,661,960	5,017,733.55	5,548,605	4,084,892	18,313,191
25 Enter 1% of line 23	36,620	50,177	55,486	40,849	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					366,264
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 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					305,805
c Total support for section 509(a)(1) test: Enter line 24, column (e)					18,313,191
d Add: Amounts from column (e) for lines: 18 272,480 19					
22 305,805 26b					578,285
a Public support (line 26c minus line 26d total)					17,734,906
f Public support percentage (line 26a (numerator) divided by line 26c (denominator))					96.0 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.					
(2004) (2003) (2002) (2001)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.					
(2004) (2003) (2002) (2001)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					
d Add: Line 27a total and line 27b total					
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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.					