## 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)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Α	For th	e 2003 c	alendar	year, or tax year begin	ning	JULY 1	, 2003,	and	ending t	JUNE	<del></del>
$\overline{}$		applicable:	Please use IRS label or	C Name of organization COMMUNITY HO	USIN	G PARTNERS	SHIP				ver identification number 572386
		change	print or	Number and street (or P.	O. box if	mail is not delivered	to street ac	ddress	Room/suite	E Teleph	one number
	Name cl Initial ref	•	type. See	129 W. FOWLK	ES S	TREET, SUI	TE 12	28		615.	790.5556
=	Final ret		Specific Instruc-	City or town, state or con	untry, and	I ZIP + 4				F Accounting	ng method: Cash X Accrual
Amended return tions. FRANKLIN, TN. TN 37064								Ot	her (specify) ►		
$\equiv$		on pending	• Se	ction 501(c)(3) organization	ons and	4947(a)(1) nonexem	pt charita	ble			to section 527 organizations.
	•		tru	sts must attach a complet	ted Sched	dule A (Form 990 or	990 <b>-</b> EZ).		H(a) Is this a (		n for affiliates? Yes XNo per of affiliates ►
_	Website Organiz		check	only one) ► X 501(c)( 3	3 ) <b>►</b> (in	sert no.) 4947(a)	(1) or [] :	527	H(c) Are all af (If *No,*		uded? Yes XNo t. See instructions.)
<u>к</u>	Check I	here ▶ □	if the	organization's gross receipts	s are non	mally not more than	\$25,000.	The	H(d) Is this a s	eparate retur	n filed by an
	organiza	tion need	not file a	return with the IRS; but if the	e organiz	ation received a Form	990 Packa	age		on covered be kemption N	y a group ruling? Yes XNo umber ►
	Gross	racaints.	Add line	es 6b, 8b, 9b, and 10b to	line 12	<b>&gt;</b> 2	21,42	26	M Check I		the organization is not required form 990, 990-EZ, or 990-PF).
	art I	Revei	nue, E	xpenses, and Chan	ges in						
	1			gifts, grants, and sim					· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	1			upport			1a		17,96	7	
	1	•		support			1b		58,00	00	
	C		•	ontributions (grants)			1c		52,53	37	
	d			s 1a through 1c) (cash			ash \$		)	1d	128,504
	2			e revenue including gov				Part	t VII. line 93)	2	92,687
	3	•		ues and assessments			-				
	4			vings and temporary o							
	5	Dividends and interest from securities									235
	6a	Gross r	ents .				6a				
	b	Less: re	ental ex	penses			6b				
	С	Net ren	ital inco	ome or (loss) (subtract	line 6b	from line 6a)				. <u>6c</u>	
ě	7	Other in	nvestm	ent income (describe	▶ _					) 7	
Revenue	8a	Gross a	amount	from sales of assets	other 📙	(A) Securities	-		(B) Other		
Ŗ		than inv	ventory		· · · ·  -		8a				
	þ	Less: co	st or oth	ner basis and sales expe	nses _		8b			<b></b>   i	
	С			(attach schedule)		<del></del>	8c		<del></del>	⊢	
	d	_		ss) (combine line 8c, co					_	- 1 1	
	9	•		nd activities (attach sche	-	=	gaming,	chec	k here 🕨 🗀	J	
	а			(not including \$			9a				
	١.			reported on line 1a)			9b				
				openses other than full		- '	<u> </u>				
	1			(loss) from special ev	-		om line s  10a	a).		.   30	
				inventory, less returns goods sold			10b				
				loss) from sales of inven				10h f	rom line 10al	10c	
á	11	•		(from Part VII, line 10	• •	, ,			,		
	12			(add lines 1d, 2, 3, 4, 5							221,426
	13			ces (from line 44, colu							242,006
ses	14			and general (from line							28,886
Expenses	15			rom line 44, column (C							
丒	16	Paymer	nts to a	ffiliates (attach schedu	ule)					. 16	
	17	Total e	xpense	es (add lines 16 and 4	4, colur	nn (A))		<u></u>		. 17	270,892
ets	18	Excess	or (def	ficit) for the year (subt	ract line	17 from line 12	)			. 18	(49,466)
Net Assets	19	Net ass	sets or	fund balances at begi	nning o	f year (from line	73, colui	mn (	A))	. 19	698,659
et	20			s in net assets or fund							
Z	21	Net ass	ets or f	und balances at end of	year (c	ombine lines 18.	19. and 2	20)		. 21	649.193

Page 2 Form 990 (2003) All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations Statement of Part II and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.) **Functional Expenses** (C) Management and general (B) Program Do not include amounts reported on line (A) Total (D) Fundraising services 6b, 8b, 9b, 10b, or 16 of Part I. 22 Grants and allocations (attach schedule) . . . . 22 (cash \$ \_\_\_\_\_ noncash \$ \_\_ 23 23 Specific assistance to individuals (attach schedule) 24 Benefits paid to or for members (attach schedule) 24 25 25 Compensation of officers, directors, etc. . . . . 26 18,000 77,240 59,240 26 27 2,5171,073 3,590 27 28 28 29 4,531 1,377 5,908 Payroll taxes ..... 29 30 30 31 1,875 1,875 31

<b>)</b>	Accounting lees	~~					
32	Legal fees	32		- 488			-
33	Supplies	33	7,477	7,477			
34	Telephone	34					
35	Postage and shipping	35					
36	Occupancy	36	27,120	27,120			
37	Equipment rental and maintenance	37	67,511	67,511			
38	Printing and publications	38					
39	Travel	39					
40	Conferences, conventions, and meetings	40					
41	Interest	41	27,393	27,393		<u> </u>	
42	Depreciation, depletion, etc. (attach schedule)	42	41,532	38,971	2,561		
43	Other expenses not covered above (itemize): a	43a					
b	INSURANCE	43b	5,358	3,358	2,000		
C	MISCELLANEOUS	43c	5,888	3,888	2,000		
d		43d			•		
	·	43e					
е 44	Total functional expenses (add lines 22 through 43). Organizations						
+-+	completing columns (B) - (D), carry these totals to lines 13 - 15	44	270,892	242,006	28,886	ĺ	
Are a f "Yo (iii) tl		and for	undraising solicitation ; (ii) th ; and (iv) th	e amount allocated e amount allocated	to Program service to Fundraising \$	►	N 🗵
Par	t III Statement of Program Service Acco	ompl	ishments (See p	page 25 of the in	nstructions.)		
All o	t is the organization's primary exempt purpose?  ganizations must describe their exempt purpose acents served, publications issued, etc. Discuss achienizations and 4947(a)(1) nonexempt charitable trusts	chieve eveme	ements in a clear ar ents that are not m	nd concise manner easurable. (Section	State the number of 501(c)(3) and (4)	(4) orgs., and 4	ses 1(c)(3) an 947(a)(1) ional for
	REHABILITATION OF HOUSES FOR AFFORDABLE HOUSING TO LOW TO						
	(0	Grants	and allocations	\$	······	242	006
_ _	· · · · · · · · · · · · · · · · · · ·		·	<del> </del>		272	, 000
D.						l	
			• • • • • • • • • • • • • • • • • • • •	•••••			
		rants	and allocations	• • • • • • • • • • • • • • • • • • •			
-					/	<del>                                     </del>	
С			• • • • • • • • • • • • • • • • • • • •	•••••		1	
				• • • • • • • • • • • • • • • • • • • •			
	ir	ronto	and allocations				
		oranics	and allocations	<b>Ф</b>	)		
d .			• • • • • • • • • • • • • • • • • • • •				
		<u> </u>					
-			and allocations	\$	)		
			and allocations	\$	)	<u> </u>	
f ]	otal of Program Service Expenses (should equ	ıal lin	e 44, column (B),	Program services	<u></u> ▶	242	
						Form 99	0 (200
STF F	ED1923F.2						
	•						

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

Note:		Where required, attached schedules and amounts column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year		
	45	Cash — non-interest-bearing			37,471	45	26,929
	46	Savings and temporary cash investments				46	
		, ,			·		
	47a	Accounts receivable	47a	25,466			
	b	Less: allowance for doubtful accounts	47b	11,930	12,053	47c	13,536
		Pledges receivable	48a	58,000	65 000		F0 000
	b	Less: allowance for doubtful accounts	48b	0	65,000		58,000
	49	Grants receivable			49		
	50	Receivables from officers, directors, truster				50	
		(attach schedule)				30	
S	51a	Other notes and loans receivable (attach	51a	5,549			
Assets	L	schedule)	51b		5,931	51c	5,549
As	52	Inventories for sale or use			37731	52	3,323
	53	Prepaid expenses and deferred charges				53	
	54	Investments — securities (attach schedule)		Cost DEMV		54	
		Investments — land, buildings, and					
	554	equipment: basis	55a				
	b	Less: accumulated depreciation (attach					
		schedule)	55b			55c	
	56	investments — other (attach schedule)		1 004 600		56	
	57a	Land, buildings, and equipment: basis	57a	1,234,638			
	b	Less: accumulated depreciation (attach	57b	225,226	1,049,443	57c	1,009,412
	EO	Schedule)			1,040,440	58	1,000,412
	58	Other assets (describe ►		/		30	
	59	Total assets (add lines 45 through 58) (must	t equal	line 74)	1,169,898	59	1,113,426
	60	Accounts payable and accrued expenses			13,527	60	13,619
	61	Grants payable			61		
	62	Deferred revenue				62	
es	63	Loans from officers, directors, trustees, and					
Liabilities		schedule)				63	
iab	64a	Tax-exempt bond liabilities (attach schedule)	)			64a	
_	b	Mortgages and other notes payable (attach	schedu	le)	454,222	1	445,824
	65	Other liabilities (describe ► <u>TENANT</u> <u>DE</u>	POSI	<u>TS)</u>	3,490	65	4,790
	66	Total liabilities (add lines 60 through 65)			471,239	66	464,233
		anizations that follow SFAS 117, check here			1,1,235	1 30	101,233
	orga	67 through 69 and lines 73 and 74.	- LOUI a	na complete lines			
ces	67	Unrestricted			633,659	67	591,193
an	68	Temporarily restricted			65,000	68	58,000
Ba	69	Permanently restricted				69	
nd	Orga	anizations that do not follow SFAS 117, check		:			·
Ŧ		complete lines 70 through 74.					
ō	70	Capital stock, trust principal, or current fund				70	
ets	71	Paid-in or capital surplus, or land, building,				71	
4SS	72	Retained earnings, endowment, accumulated				72	
Net Assets or Fund Balances	73	Total net assets or fund balances (add line	es 67 th	nrough 69 <b>or</b> lines			
Z		70 through 72; column (A) must equal line 19; column (B) n	698,659	73	649,193		
_	74	Total liabilities and net assets / fund balance		•	1,169,898	74	1,113,426

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.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)				per	Part IV-B  Reconciliation of Expenses per Audited Financial Statements with Expenses per Return							
а		enue, gains, and other support	a	-	N/A	a	Total exp				a	N/A
b	Amounts	ed financial statements included on line a but not on Form 990:	a			ь	audited fin Amounts i on line 17,	ncluded	on line		·	
(1)	Net unre	alized gains ments \$				(1)	Donated and use of	services	\$			
(2)	Donated	services of facilities \$				(2)	Prior year acreported on	ljustments line 20,				
(3)		ies of prior nts \$				(3)	Form 990 . Losses rep			<del></del>		
(4)	Other (s						line 20, For Other (spe	rm 990 .				
		\$				` ′			c.			
	Add amo	unts on lines (1) through (4) ►	b		<del></del>	}	Add amour	nts on line	<u>⊅</u> s (1) thro	nugh (4) ▶	ь	
С	Line a m	ninus line b	С		0	c	Line a min				С	0
d		included on line 12, 0 but not on line a:				d	Amounts i Form 990	ncluded	on line	17,		
(1)		nt expenses				(1)	Investment					
		ded on line 990 \$					not include 6b, Form 9		_			
(2)	Other (s					(2)	Other (spe	ecify):				
		s							\$			
	Add amo	ounts on lines (1) and (2)	d				Add amou		nes (1) a	and (2) ▶	d	¥
е	Total rev	venue per line 12, Form 990			,	e	Total expe	nses per	line 17,	Form 990		
Par		us line d)	ust	ees ar		) Emplo	(line c plus				l e ated	see page 27 o
		e instructions.)			· · · · · · · ·							
		(A) Name and address			(B) Title week	and aver devoted	age hours per to position		ensation id, enter )	(D) Contributions employee benefit pl deferred compens	ans &	(E) Expense account and other allowances
SEE	ATTA	CHED LISTING							0		0	0
	<del></del>											
									-			
						· · · · · · · · · · · · · · · · · · ·						
								ļ				
	·											
75	organizati	officer, director, trustee, or key en on and all related organizations, of attach schedule — see page 2	f wh	ich more	e than \$1	0,000 v	mpensation as provided	of more the by the re	nan \$100 lated orga	,000 from yo anizations?	ur ►	☐ Yes ☒ No

Par	t VI Other Information (See page 28 of the instructions.)		Yes	No		
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X		
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X		
	If "Yes," attach a conformed copy of the changes.			37		
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a 78b		X		
	If "Yes," has it filed a tax return on Form 990-T for this year?	79	-	X		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	13	-			
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		Х		
h	If "Yes," enter the name of the organization ►					
	and check whether it is exempt or nonexempt.					
81a	Enter direct and indirect political expenditures. See line 81 instructions					
b	Did the organization file Form 1120-POL for this year?	81b				
82a		00-		v		
	or at substantially less than fair rental value?	82a		X		
b	If "Yes," you may indicate the valueof 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.)			1		
020	as revenue in Part I or as an expense in Part II. (See instructions in Part III.) [82b]  Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Х			
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X			
84a		84a		X		
	If "Yes," did the organization include with every solicitation an express statement that such contributions					
	or gifts were not tax deductible?	84b		<u> </u>		
85	501(c)(4),(5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		<u> </u>		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b				
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.					
_	Dues, assessments, and similar amounts from members					
c C	Section 162(e) lobbying and political expenditures	1	}			
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)	4				
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		ļ		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its					
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax	85h	]			
86	year?	0011		<del> </del>		
	Gross receipts, included on line 12, for public use of club facilities	1	•			
87	501(c)(12)orgs. Enter: a Gross income from members or shareholders	]				
	Gross income from other sources. (Do not net amounts due or paid to other		}			
	sources against amounts due or received from them.)	_				
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	1				
	partnership, or an entity disregarded as separate from the organization under Regulations sections	88		X		
00	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	-			
вуа	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	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		X		
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under					
_	sections 4912, 4955, and 4958					
d nn-	MONTO					
	0a List the states with which a copy of this return is filed ► NONE.  b Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) 90b 9					
91	The books are in care of ► DANA NELMS  Telephone no ► 615.790.5556					
-	The books are in care of ► DANA NELMS  Located at ► 129 W. FOWLKES SUITE 128  Telephone no. ► 615.7  ZIP + 4 ► 37064					
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					
		For	n 990	(2003)		

Part	VII	Analysis of Income-Producing A					
Note:	Ente	er gross amounts unless otherwise	Unrelated b	ousiness income	Excluded by sec	tion 512, 513, or 514	(E)
indica	ited.	-	(A) Business code	(B) Amount	(C) Exclusion code	( <b>D)</b> Amount	Related or exempt function income
		ram service revenue: NTAL INCOME				92,687	IIICOITIE
_							
d							
e						· · · · · · · · · · · · · · · · · · ·	
f	Med	icare/Medicaid payments					
g	Fees	sand contracts from government agencie	es				
94	Men	nbership dues and assessments			-		
95	Inter	est on savings and temporary cash investmer	its			235	_
96	Divid	dends and interest from securities					<del> </del>
		rental income or (loss) from real estate:				· · · · · · · · · · · · · · · · · · ·	
		-financed property inventory	[		-		
		debt-financed property	1	<del> </del>	<del> </del>		
		ental income or (loss) from personal propert	1	<del></del>	-		
		er investment income			<del></del>		
		or (loss) from sales of assets other than inventor		<del> </del>	<del> </del>		
		income or (loss) from special events		<del> </del>	<del> </del>		-
		ss profit or (loss) from sales of inventory					
103 b		er revenue: a					
				1	<u> </u>		
e							
	Sub	total (add columns (B), (D), and (E))				92,922	
		al (add line 104, columns (B), (D), and (E					92,922
		105 plus line 1d, Part I, should equal th	ne amount on line	12, Part I.			
Part	VIII	Relationship of Activities to the Ac	complishment of	of Exempt Purp	oses (See pa	ge 34 of the ins	structions.)
Line l	No.	Explain how each activity for which incom				portantly to the a	ccomplishment
		of the organization's exempt purposes (o					
932	A	RENTAL INCOME FOR LOWE	R INCOME I	NDIVIDUALS	· .		
		TAMEDECE ON CACH DALAN	ana -				
95	·	INTEREST ON CASH BALAN	CES.				
Part	TV	Information Regarding Taxable Sub	sidiaries and Die	rogarded Entiti	05 /200 0000	34 of the instru	etions \
rail	IA	(A)	(B)		<del></del>		(E)
	Nam	ne, address, and EIN of corporation,	Percentage of ownership interest	(C) Nature of a	ctivities	(D) Total income	End-of-year
		darthership, or disregarded entity	.%				assets
			%		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
			%				
			%	<del></del>			
<b>Part</b>	X	Information Regarding Transfers Ass		onal Benefit Con	tracts (See pa	age 34 of the ins	tructions.)
(a)	Did th	ne organization, during the year, receive any funds,	directly or indirectly t	n nav premiums on a	nersonal benefit	contract?	Yes X No
		the organization, during the year, pay pr					Yes X No
		"Yes" to (b), file Form 8870 and Form			•		
		Under penalties of perjury, I declare that I have exart and belief, it is true, correct, and complete. Declare	nined this return, included the control of property (other	ling accompanying so	chedules and state	ements, and to the b	est of my knowledge
Pleas	1	and belief, it is true, correct, and complete. Declare	ation of preparer (other	man unicer) is baser		in or which preparer	nas any knowledge.
Sign			<del></del>				
Here		Signature of officer				ate	
		Type or sight seems and fills					<del> </del>
		Type or print name and title.		Date	Check if	Proposar's CCN	DTIN /Con Con Inst 1999
Paid		Preparer's signature	e, CPA	Date 9/08/2004	self-	_1 '	PTIN (See Gen. Inst. W)
Preparei	r's		OLE, CPA	12,00,200	employed ► L2	<u> </u>	
Use Onl		if self-employed).				no. ► 615.82	2 4177
000 0,		address, and ZIP + 4 / 134 NORTHL	TRE IDIOE		IPhone		

## 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

2003

OMB No. 1545-0047

Department 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 Employer identification number Name of the organization 62-1572386 COMMUNITY HOUSING PARTNERSHIP 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 (e) Expense (b) Title and average hours (a) Name and address of each employee paid more employee benefit plans & (c) Compensation account and other per week devoted to position than \$50,000 deferred compensation allowances NONE Total number of other employees paid over 0 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

0

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

L GII	t III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	attempor inco	the year, has the organization attempted to influence national, state, or local legislation, including any of to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid urred in connection with the lobbying activities   (Must equal amounts on line 38 l-A, or line i of Part VI-B.)			Х
	organi	izations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other izations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description obyging activities.			
2	substa with a owner	the year, has the organization, either directly or indirectly, engaged in any of the following acts with any antial contributors, trustees, directors, officers, creators, key employees, or members of their families, or ny taxable organization with which any such person is affiliated as an officer, director, trustee, majority, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the ctions.)			
а	Sale.	exchange, or leasing of property?	2a		X
b		ng of money or other extension of credit?			Х
С		hing of goods, services, or facilities?			X
d		ent of compensation (or payment or reimbursement of expenses if more than \$1,000)?			X
е	Transf	fer of any part of its income or assets?	2e		X
3a		u make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how etermine that recipients qualify to receive payments.)			X
b	-	u have a section 403(b) annuity plan for your employees?	1		X
4	Did yo	ou maintain any separate account for participating donors where donors have the right to provide advice	.		
	on the	use or distribution of funds?	4	<u> </u>	X
Par	t IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions	.)		
he o	organiz	ation is not a private foundation because it is: (Please check only ONE applicable box.)			
5	<u> </u>	church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6		school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7		hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8		Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).	•		
9	□ A	medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hold state ►	spital's	name	e, city
0		organization operated for the benefit of a college or university owned or operated by a governmental unit. Se lso complete the Support Schedule in Part IV-A.)	ction 170	(b)(1)	(A)(iv
1a		organization that normally receives a substantial part of its support from a governmental unit or from a cition 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	the ge	ner <u>a</u> l į	public
1b	$\overline{}$	community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
2	red its	organization that normally receives: (1) more than 331/3% of its support from contributions, members beingts from activities related to its charitable, etc., functions — subject to certain exceptions, and (2) no support from gross investment income and unrelated business taxable income (less section 511 tax) from the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Pa	more the	an 331	/3% C
3	de	organization that is not controlled by any disqualified persons (other than foundation managers) and suscribed 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)(3).)			
		Provide the following information about the supported organizations. (See page 5 of the instruction	s.)	_	
		· (a) Name(s) of supported organization(s)	ne numb om abovo		
	_				
4	<b>Π</b> Δ2	organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instru	ctions \		

	e: You may use the worksheet in the instructions endar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 19		(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	234,266	232,707	235,687	265,		968,038
16	Membership fees received	234,200	232,101	233,007	200,	3/6	900,030
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	818	1,305	465			2,588
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	235,084	234,012	236,152	265,		970,626
24	Line 23 minus line 17	235,084	234,012	236,152	265,	378	970,626
25	Enter 1% of line 23	2,351	2,340	2,362	2,	654	
26	Organizations described on lines 10 or 11:	a Enter 2% of a	amount in columr	n (e), line 24	▶	26a	19,413
b	Prepare a list for your records to show the nam governmental unit or publicly supported organizamount shown in line 26a. Do not file this list wi	ation) whose total	l gifts for 1999 the	rough 2002 excee	eded the	26b	
С	Total support for section 509(a)(1)test: Enter lin	ne 24, column (e)				26c	970,626
d	Add: Amounts from column (e) for lines: 18 . 22 .		19 26b		<b>&gt;</b>	26d	2,588
e f	Public support (line 26c minus line 26d total) .  Public support percentage (line 26e (numera					26e 26f	968,038 99.73 %
27	Organizations described on line 12: a For person," prepare alist for your records to show to Do not file this list with your return. Enter the	he name of, and t	lotal amounts rec	eived in each yea			
	(2002) (2001)		(2000)		(1999)		•••••
b	For any amount included in line 17 that was received show the name of, and amount received for each y (Include in the list organizations described in lines the difference between the amount received and amounts) for each year:	ved from each personer, that was more of through 11, as we the larger amount	son (other than "d e than the larger of ell as individuals.) described in (1) of	isqualified persons of (1) the amount of Do not file this list or (2), enter the su	s"), prepare on line 25 t st with you um of thes	e a list for the y ar returned e differe	or your records to year or (2) \$5,000 n. After computing ences (the excess
	(2002) (2001)				(1999)		
С	Add: Amounts from column (e) for lines: 15 _ 20 _		21		▶	27c	
d	Add: Line 27a total a	and line 27b total			▶		·
e f	Public support (line 27c total minus line 27d tot Total support for section 509(a)(2) test: Enter an					27e	·
g h	Public support percentage (line 27e (numera: Investment income percentage (line 18, colu					27g 27h	%
	por contago (mio 10, conta	(=) (airioi at	,	, (461101111111		16/11	70

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

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)

	(To be completed ONET by schools that thecked the box of the on Fait W)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,			i
	programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
s∠ a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	20.		
	with student admissions, programs, and scholarships?	32c 32d		
d	Copies of all material used by the organization of on its behalf to solicit contributions?			
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		
а		33b		
b	Admissions policies?	330		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d	-	
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		<del> </del>
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		-
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
25	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		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) (To be completed **ONLY** by an eligible organization that filed Form 5768) if you checked "a" and "limited control" provisions apply. Check ► a if the organization belongs to an affiliated group. Check ▶ b (a) Affiliated group Limits on Lobbying Expenditures To be completed for ALL electing totals (The term "expenditures" means amounts paid or incurred.) organizations 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . . . . 36 37 Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . . . . . 37 38 38 Total lobbying expenditures (add lines 36 and 37) ...... 39 39 Other exempt purpose expenditures ...... 40 Total exempt purpose expenditures (add lines 38 and 39) ..... 40 Lobbying nontaxable amount. Enter the amount from the following table — If the amount on line 40 is -The lobbying nontaxable amount is -Not over \$500,000 . . . . . . . . . . . . 20% of the amount on line 40 . . . . . . . . . Over \$500,000 but not over \$1,000,000 . . . . \$100,000 plus 15% of the excess over \$500,000 41 Over \$1,000,000 but not over \$1,500,000 . . \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 . \$225,000 plus 5% of the excess over \$1,500,000 42 42 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36...... 43 44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 . . . . . . . . . . . . . Caution: If there is an amount on either line 43 or line 44, you must file Form 4720. 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or (a) (b) (c) (d) (e) fiscal year beginning in) 2003 2002 2001 2000 Total 45 Lobbying nontaxable amount ...... Lobbying ceiling amount (150% of line 45(e)) 46 47 48 Grassroots nontaxable amount ...... 49 Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures ..... Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.) During the year, did the organization attempt to influence national, state or local legislation, including any Yes No Amount attempt to influence public opinion on a legislative matter or referendum, through the use of: b Paid staff or management (Include compensation in expenses reported on lines c through h.)...... Publications, or published or broadcast statements..... g Direct contact with legislators, their staffs, government officials, or a legislative body..... Total lobbying expenditures (Add lines c through h.) .....

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

Part \	/II Information Exempt Or	Regarding Transfers To and Transa ganizations (See page 12 of the instruction	ctions and	Relationships With	Nonc		<sub>age</sub> 6		
		nization directly or indirectly engage in any of the er than section 501(c)(3)organizations) or in secti				d in se	ection		
	• •	orting organization to a noncharitable exempt organization		ig to pointour organization		Yes	No		
	•				51a(i)		X		
	(ii) Other assets								
	ther transactions:								
(	i) Sales or exchange	es of assets with a noncharitable exempt organiza	tion		b(i)		X		
		ets from a noncharitable exempt organization			b(ii)	L	X		
		equipment, or other assets			b(iii)		X		
(i)	v) Reimbursement ar	rangements			b(iv)		X		
(\	<ul><li>Loans or loan gua</li></ul>	rantees			b(v)		X		
(v	(vi) Performance of services or membership or fundraising solicitations								
		uipment, mailing lists, other assets, or paid emplo	-		С		<u>X</u>		
go	ods, other assets, or	the above is "Yes," complete the following schedule services given by the reporting organization. If transpersent, show in column (d) the value of the good	he organizatioi	n received less than fair					
(a) Line no							ents		
				,					
					:				
de		ectly or indirectly affiliated with, or related to, o			Ye	s [	X No		

b If "Yes," complete the following schedule		in section 527? Fes A No
(a) Name of organization	(b) Type of organization	(c) Description of relationship
<del></del>		
	<u> </u>	
	<del> </del>	