Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Note: The organization may have to use a copy of this return to satisfy state reporting requirements

4	For th	ne 1996 c <u>al</u>	lendar	year, OR tax year per	iod beginning		, 19	96, and end	ing		, 19
В	Check	L	Please use IRS	C Name of organization					D Employe	er identific	cation number
	Initial re	turn	abel or print or type.	Number and street (or F	P.O. box if mail is n	ot delivered to stre	et address)	Room/suite	E State re	gistration	number
]	(required	ed return	See Specific nstruc- tions.	City, town, or post office	e, state, and ZIP+4				F Check ▶		exemption application pending
G	Туре о	f organizati		Exempt under sect							npt charitable trust
H(a)	Is this	a group retu	ırn filed	for affiliates?		. Yes N	lo I				enter four-digit group
				of affiliates for which this ed by an organization cover				Accounting m Other (sp	ethod:	_	Accrual
<u>(U)</u>	Check	here □	if the or	ganization's gross receipts	s are normally not i	more than \$25,000	The organ	ization need n	ot file a retur	n with the	IRS; but if it received
			-	e mail, it should file a retur			-	-			
				used by organizations							
Pa	art I	Revenu	ıe, Ex	penses, and Chan	ges in Net A	ssets or Fund	Baland	ces (See S	specific In:	structio	ns on page 9.)
	1	Contribut	tions,	gifts, grants, and sim	nilar amounts re	eceived:					
	a	Direct pu	ıblic sı	ıpport		<u>1</u> a	1				
	b	Indirect p	oublic :	support							
	С	Governm	ent co	ntributions (grants)		10	;				
	d	Total (add	d lines	1a through 1c) (attacl	n schedule of co	ontributors)					
				noncash		•			1d		
	2	•		revenue including go		•					
	3	Ü		ies and assessments		•		•	1 - 1		
	4			ngs and temporary of							
	5			interest from securition					5		
		Gross rer				1./-					
	6a		-								
	b			penses			_		40		
nue	7			me or (loss) (subtract nt income (describe	-	·			. 6c) 7		
Revenue	8a	Gross an		from sale of assets	otner — · ·	Securities 8a	+	Other			
	b		,	er basis and sales expe		8b)				
				attach schedule)	1	80	;				
	1			s) (combine line 8c, co		B))			8d		
	9	-		and activities (attach		2,,			•		
		•		(not including \$	i serieddie,	of					
	a			eported on line 1a).			. 1				
	h			penses other than fu							
	1			(loss) from special ev					9c		
				inventory, less return		4			. /		
	10a			•							
	b			oods sold			•	om lina 10a)	10c		
	C			oss) from sales of inver							
	11 12	Total rev	/enue /anua /	(from Part VII, line 10 add lines 1d, 2, 3, 4,	13) 5 6c 7 8d 9c				. 12		
									40		
S	13	-		es (from line 44, colu							
Expenses	14	_		nd general (from line					4-		
хbе	15			om line 44, column (E							
Û	16	Payment	s to af	filiates (attach sched	lule)				. 16		
	17			s (add lines 16 and 4							
ets	18			cit) for the year (subt							
4ss	19			und balances at beg							
Net Assets	20			in net assets or fund							
z	21	Net asset	ts or fu	nd balances at end o	f year (combine	lines 18, 19, ar	d 20) .		. 21		
For	Paper	rwork Red	uction	Act Notice, see page	1 of the separat	te instructions.		Cat. No.	. 11282Y		Form 990 (1996)

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 Specific Instructions on page 13.)

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)					
	(cash \$ noncash \$)	22				
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				
34	Telephone	34				
35	Postage and shipping	35				
36	Occupancy	36				
37	Equipment rental and maintenance	37				
38	Printing and publications	38				
39	Travel	39				
40	Conferences, conventions, and meetings	40				
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule)	42				
43	Other expenses (itemize): a	43a				
b		43b				
c		43c				
d		43d				
e		43e				
44	Total functional expenses (add lines 22 through 43) Organizations					
	completing columns (B)-(D), carry these totals to lines 13-15 .	44				
	orting of Joint Costs.—Did you report in column	1 (B) (Program services)	any joint costs fr	om a combined	□ v □ N-
	cational campaign and fundraising solicitation?					☐ Yes ☐ No
	es," enter (i) the aggregate amount of these joint cost he amount allocated to Management and general \$, ,
	t III Statement of Program Service Acco					1
) Program Service
	t is the organization's primary exempt purpose?					Evnances
All (organizations must describe their exempt purp ications issued, etc. Discuss achievements that a	ose a	achievements. Sta	te the number of	of clients served,	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1)
pubi and	4947(a)(1) nonexempt charitable trusts must also	ne no ente	r the amount of a	ants and allocation	ons to others)	trusts; but optional for others.)
	Tr (a)(tr) tremenent ename a determinent dies		. tilo allioant or g	arra arra arra	5.10 10 01.10.0.9	outers.)
а						
	(C	rants	and allocations	\$)	
_ h	(0		44 4	*	,	
b						
	(C	rants	and allocations	\$)	
	(-			*	,	
C						
	(C	rants	and allocations	\$	······	
- لم	(C			T	,	
d						
	IC.	rante	and allocations	\$	······	
ر م			and allocations	\$)	
		(11)	and anocations	w		
_	Total of Program Service Expenses (should equ			<u> </u>	<i>)</i>	

Part IV Balance Sheets (See Specific Instructions on page 16.)

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	45		
	46	Savings and temporary cash investments	46		
		g py			
	47a	Accounts receivable	47a		
		Less: allowance for doubtful accounts	47b	47c	
	48a	Pledges receivable	48a		
	b	Less: allowance for doubtful accounts	48b	48c	
	49	Grants receivable		49	
	50	Receivables from officers, directors, truste			
		(attach schedule)	50		
S	51a	Other notes and loans receivable (attach	51a		
Assets	L	schedule)	51a	51c	
As	52	Less: allowance for doubtful accounts		52	
	52 53	Inventories for sale or use		53	
	54	Investments—securities (attach schedule)		54	
		Investments—land, buildings, and			
	55 a	equipment: basis	55a		
	b	Less: accumulated depreciation (attach			
		schedule)	55b	55c	
	56	Investments—other (attach schedule)	, , , , , , , , ,	56	
	57a	Land, buildings, and equipment: basis	57a		
	b	Less: accumulated depreciation (attach			
		schedule)	57b	57c	
	58	Other assets (describe ►)	36	
	59	Total assets (add lines 45 through 58) (must	equal line 74)	59	
	60	Accounts payable and accrued expenses .		60	
	61	Grants payable			
	62	Deferred revenue	62		
Liabilities	63	Loans from officers, directors, trustees, and			
þili		schedule)	63		
Lia	64a	Tax-exempt bond liabilities (attach schedule)	64a		
		Mortgages and other notes payable (attach s	64b		
	65	Other liabilities (describe ►)	65	
		Total liabilities (add lines 40 through 45)			
	66	Total liabilities (add lines 60 through 65) .		66	
	Orga	anizations that follow SFAS 117, check here ► 67 through 69 and lines 73 and 74.	► □ and complete lines		
ses	67	Unrestricted		67	
anc	68	Temporarily restricted			
Bal	69	Permanently restricted	69		
þ		nizations that do not follow SFAS 117, check			
Ful	9-	complete lines 70 through 74.			
o	70	Capital stock, trust principal, or current fund	s	70	
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, a		71	
SS	72	Retained earnings, endowment, accumulated		72	
et A	73	Total net assets or fund balances (add line			
ž		70 through 72; column (A) must equal line	73		
	74	equal line 21)	ces (add lines 66 and 73)	73	
		and the second s	,		1

Par	t IV-A	Reconciliation of I Financial Stateme Return (See Specif	nts with Re	venue per	8.) Part	F	econciliation o inancial Staten eturn			
а		nue, gains, and other s			а		enses and lo			
b	Amounts	ed financial statements included on line a but			b	Amounts i	ancial statemen ncluded on line		а	
(1)		lized gains			(1)	on line 17, Donated				
(0)		ments \$			(5)	and use of				
	and use	services of facilities \$			(2)	Prior year ad reported on Form 990.	line 20,			
	year gran	es of prior ts \$			(3)	Losses rep	orted on			
(4)	Other (sp	-			(4)	line 20, For Other (spe				
		\$			(4)	Other (spe	•			
		unts on lines (1) throug	h (4) ▶ b				<u>\$</u>			
С	line a mi	nus line b	▶ c		с		nts on lines (1) thous line b		b c	
d	Amounts	included on line 12, but not on line a :			d	Amounts in	ncluded on line but not on line a	17,		
(1)		t expenses			(1)	Investment				
		led on line 990 \$				not include 6b, Form 99				
(2)	Other (sp				(2)	Other (spe				
		\$ \$.			
		unts on lines (1) and	(2) ▶ d				nts on lines (1)	and (2) ▶	d	
е	Total reve	enue per line 12, For	m 990		е		nses per line 17,			
Par	t V Lis	us line d)		ees, and I	Key Emplo		each one even		ensate	ed; see Specific
		(A) Name and address	5	(B)	Title and avera	ge hours per o position	(C) Compensation (If not paid, enter -0)	(D) Contributions employee benefit pl deferred compens	ans &	(E) Expense account and other allowances
							·			
75	organization	fficer, director, trustee, con and all related organia attach schedule—see	zations, of whi	ch more tha	n \$10,000 w	mpensation of as provided	of more than \$100 by the related org),000 from you anizations? I	ur ▶ [☐ Yes ☐ No

Par	t VI Other Information (See Specific Instructions on page 19.)		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 .							
77	Were any changes made in the organizing or governing documents but not reported to the IRS?							
	If "Yes," attach a conformed copy of the changes.							
	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?.							
	o If "Yes," has it filed a tax return on Form 990-T for this year?							
79								
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?							
b	If "Yes," enter the name of the organization ▶							
_	and check whether it is exempt OR nonexempt.							
81a	Enter the amount of political expenditures, direct or indirect, as described in the							
	instructions for line 81							
	Did the organization file Form 1120-POL for this year?	81b						
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a						
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 for reporting in Part III.)							
832	Part III.)	83a						
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b						
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a						
	If "Yes," did the organization include with every solicitation an express statement that such contributions							
	or gifts were not tax deductible?	84b						
85	501(c)(4), (5), or (6) organizations.—a Were substantially all dues nondeductible by members?	85a						
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							
	Section 162(e) lobbying and political expenditures							
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e							
	Taxable amount of lobbying and political expenditures (line 85d less 85e) <u>85f</u>							
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g						
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h						
86	501(c)(7) organizations.—Enter: a Initiation fees and capital contributions included on							
	line 12	-						
	Gross receipts, included on line 12, for public use of club facilities. 501(c)(12) organizations — Enter: a Gross income from members or shareholders. 87a	-						
87	The first of gamzations.							
D	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 partnership? If "Yes," complete Part IX	88						
89a	501(c)(3) organizations.—Enter: Amount of tax paid during the year under: section 4911 ▶; section 4912 ▶; section 4955 ▶							
b	501(c)(3) and 501(c)(4) organizations.—Did the organization engage in any section 4958 excess benefit transaction during the year? If "Yes," attach a statement explaining each transaction	89b						
С	Enter: Amount of tax paid by the organization managers or disqualified persons during the year under section 4958		·					
d	Enter: Amount of tax in 89c , above, reimbursed by the organization							
90	List the states with which a copy of this return is filed ▶							
91	The books are in care of ▶							
•	Located at ► ZIP + 4 ►							
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.							

Part \	VII	Analysis of Income-Producing Acti			ctions on pa	ige 22.)		
	_	s amounts unless otherwise		siness income	Excluded by sec	T		(E) Related or
indicat			(A) Business code	(B) Amount	(C) Exclusion cod		D) ount	exempt function income
	_	ram service revenue:						income
_								
_								
_								
е_								
f_								
•		and contracts from government agencies						
		bership dues and assessments						
		est on savings and temporary cash investments ends and interest from securities						
		rental income or (loss) from real estate:						
		-financed property						
		lebt-financed property						
		ental income or (loss) from personal property						
99 (Othe	r investment income						
		or (loss) from sales of assets other than inventory						
		ncome or (loss) from special events						
		s profit or (loss) from sales of inventory .						
		r revenue: a						
е_								
		al (add columns (B), (D), and (E)) add line 104, columns (B), (D), and (E)) .				▶		
Note: (Line	105 plus line 1d, Part I, should equal the a	amount on line	12, Part I.)				
Part \	VIII	Relationship of Activities to the Accor	mplishment of	Exempt Purp	poses (See S	Specific Ir	istructio	ns on page 23.)
Line N	lo.	Explain how each activity for which income is				importantly	, to the a	ccomplishment
		of the organization's exempt purposes (other	than by providing	g runds for sucr	n purposes).			
							-	
Part I	X	Information Regarding Taxable Subs	idiaries (Com	plete this Pa	rt if the "Ye	s" box o	n line 8	8 is checked.)
		address, and employer identification Pe	ercentage of	Natur			otal	End-of-year
	nun	nber of corporation or partnership own	ership interest	business	activities		ome	assets
			%					
			%					
			%					
		Under penalties of perjury, I declare that I have examin-	% ed this return, includ	ling accompanying	r schedules and s	tatements s	and to the k	est of my knowledge
Pleas	se	and belief, it is true, correct, and complete. Declaratio (See General Instructions on page 8.)	n of preparer (other	than officer) is ba	sed on all informa	ation of which	h preparer	has any knowledge.
Sign		(555 Scholar manachons on page 6.)		L				
Here		Signature of officer	Date	>	Type or print nar	ne and title.		
D.::	\neg	Preparer's		Date	Check	if F	reparer's	SSN
Paid Prepare	ar'e	signature			self- emplo	yed ▶ 🔲		
Use On		Firm's name (or yours if self-employed)			EIN	•		
	'	and address			ZIP +	4 ▶		