Form	990-T	E>		anization Bu					turn	1	OMB No	1545	-0687
Depar	tment of the Treasury	For cale	•	proxy tax un other tax year beginnir	ng	, 2003	•	•••	,2				3
	Al Revenue Service		Name of organizati	See separ on (check box if na			inctruction	20)		Employe	r identificatio		
	Check box if address changed	-			ine chang	jeu anu see	Instruction	15)		(Employees	' trust, see instruc		
B Exe	empt under section	Please	Number, street, and	d room or suite no. (If a	P.O. box	, see page 7	of instruc	ctions.)	- '	on page 7.)	i		
닏	501()()	Print or				, 5		,	E	New unr	elated bus. ad	tivity	codes
F	408(e) 220(e) 408A 530(a)	Туре	City or town, state,	and ZIP code					(See instructions for Block E on pa				
	529(a)												
C Bo	ok value of all assets	F Grou	p exemption nu	mber (see instruc	tions for	Block F	on page	e 7) 🕨					
at e	end of year			type 🕨 🗌 501(c)			7 501(c)		401	(a) trus	st 🗌 O	her	trust
Η	Describe the orga		•	ed business activi									
1 0	During the tax year,	was the c	corporation a subs	idiary in an affiliated	group o	r a parent-	subsidia	ry controlled	grou	o?.	. 🕨 🗌 Ye	s	No
				of the parent corpo					0.				
JI	The books are in						Telep	hone numl	ber 🕨	• ()		
	Unrelate	ed Trade	e or Business	Income		(A) Inc	come	(B) E	xpense	es	(C) I	Vet	
1a	Gross receipts o	r sales											
b	Less returns and	allowance	S	 c Balance ►	1c								
2	Cost of goods s	sold (Sch	edule A, line 7) .									////X	
3	Gross profit (su	btract line	e 2 from line 1c)		3								
4a	Capital gain net	income (a	ttach Schedule))	4a								
b	Net gain (loss) (F	orm 4797	, Part II, line 18)	(attach Form 4797)	4b								
С	Capital loss dec	duction fo	or trusts		4c								
5				ons (attach statement)									
6													
7	Unrelated debt-	financed	income (Schedu	ule E)	7								
8				s from controlled	8								
9	organizations (S Investment inc			c)(7), (9), or (17)									
	organization (So	hedule G	G)										
10				lule I)									
11													
12				-attach schedule)									
13	Total (combine		rough 12)		13					1			
Pa				ere (See page 9 d tions must be dir									
14	Compensation (of officers	s, directors, and	trustees (Schedul	еК).					14			
15	Salaries and wa	iges .								15			
16	Repairs and ma	intenance	e							16			
17	Bad debts .									17			
18										18			
19										19			
20				the instructions for						20			
21	Depreciation (at	tach Forr	m 4562)		• •	2							
22				A and elsewhere c						22b			
23	Depletion				• •					23			
24				plans						24 25			
25	Employee bene	fit progra	ms		• •				• •				
26										26 27			
27										27		-+	
28 20				· · · · · · ·						20			
29 30				28)						30			
30 31										31			
31 32				re specific deduct						32			
32 33				it see line 33 instru						33			
34		ness tax	able income (su	Ibtract line 33 from						34			

Form	990-T	(2003)
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Par		Tax Computation							
35	Control	zations Taxable as Corp led group members (sectio	ns 1561 and 1563)-	-check	here 🗌 . 🕯	See instructi	ons and:		
а	Enter y	our share of the \$50,000, \$			ble incom	e brackets (in 	that order):		
b		rganization's share of: (1)		•		0) \$			
		itional 3% tax (not more th							
С	Income	tax on the amount on line	34				►	35c	
36		Taxable at Trust Rates (se							
		ount on line 34 from: 🗌 T						36	
37		ax (see page 13 of the ins						37	
38 39		tive minimum tax . add lines 37 and 38 to line						38 39	
	t IV	Tax and Payments		ci applic	3)			57	
		tax credit (corporations attac	h Form 1118: trusts	attach Eo	rm 1116)	40a			
	-	redits (see page 13 of the				40b			
		business credit—Check							
•		d: 📋 Form 3800 🗌 Foi				40c			
d	Credit f	or prior year minimum tax	(attach Form 8801	or 8827)		40d			
	Total c	redits (add lines 40a throug	gh 40d)					40e	
41	Subtrac	t line 40e from line 39 .						41	
42		es. Check if from: 🗌 Form 4255				6 🗌 Other (att	ach schedule).	42	
43						44a	· · · ·	43	
		nts: A 2002 overpayment of				44a 44b			
b		stimated tax payments .				440 44c			
с d		oosited with Form 8868 . organizations—Tax paid or				44d			
e e	-	withholding (see instruction				44e			
	•	redits and payments (see i				44f			
45		ayments (add lines 44a thi						45	
46		ed tax penalty (see page 4						46	
47	Tax du	e—If line 45 is less than th	e total of lines 43 a	nd 46, e	nter amou	nt owed	►	47	
48		yment—If line 45 is larger				er amount _i ove	•	48	
49 Par		e amount of line 48 you want: Statements Regarding				ormation (S	Refunded ►	49	<u> </u>
		UU							
1		time during the 2003 calend inancial account in a foreign							
		•	5.						
	here	" the organization may hav		- 90-22.	i. li tes,			reign country	
2		he tax year, did the organization		on from, o	r was it the	grantor of, or	transferor to, a	a foreign trust?	
	If "Yes,	" see page 15 of the instru	ctions for other forr	ms the o	rganizatior	n may have to	o file.	C	
3		ne amount of tax-exempt in					5		
Sche		Cost of Goods Sold							
1		ry at beginning of year	1		-	y at end of ye		6	
2	Purcha		2 3	7		goods sold.			
3			5			ne 5. (Enter I		7	
4a		nal section 263A costs schedule)	4a	8		ntl.)		th respect to	Yes No
b	•	osts (attach schedule)	4b	Ŭ				resale) apply	777777777777777777777777777777777777777
5		Add lines 1 through 4b	5						
		r penalties of perjury, I declare that I ha			npanying sche	dules and statemer	nts, and to the best		
Sig		ct, and complete. Declaration of prepar	er (other than taxpayer) is b	ased on all I	nformation of V	vnich preparer has	any knowledge.	May the IRS discus	s this roturn with
Her					7			the preparer shown	below (see
	Sign	ature of officer	Date		Title			instructions)?	Yes No
Paid		Preparer's signature			Date		Check if	Preparer's SSN	N OF PTIN
Prep	arer's	Firm's name (or					self-employed		
Use Only yours if self-employed), address and 7/P code							EIN Phone no	()	

Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property) (See instructions on page 16.)

1 Description of property	1	Descri	ption	of	pro	perty	
---------------------------	---	--------	-------	----	-----	-------	--

(1)		
(2)		
(3)		
(4)		

	2 Rent received	or accrued								
(a) From personal property (if the for personal property is more the more than 50%	an 10% but not	t (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				3 Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)				
(1)										
(2)										
(3)										
(4)										
Total	Тс	otal								
Total income (Add totals of contract of the formation of	olumns 2(a) and 2(b). Enter					Total deductions here and on line 6 (B), Part I, page 1	, colu	imn	
Schedule E—Unrelated			(See instruction	ons on p	age	16.)	(=), - = = = = = = = = = =			
				•	Ĭ		Deductions directly co	nnect	ed with or allocable to	
1 Description of de	ebt-financed property		2 Gross inco allocable to de prope	ebt-finance	a 🛏	debt-financed (a) Straight line depreciation (attach schedule)			oroperty (b) Other deductions (attach schedule)	
1)										
(1)			+		+					
(2)			+		+					
(3)					+			_		
(4)	E Aug. 11 1		+		+			_		
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (attach s		e to property	6 Column 4 divided by column 5		7 Gross income reportable (column 2 × column 6)		8 Allocable deductions (column 6 × total of colum 3(a) and 3(b))			
1)				q	%					
(2)			%							
(3)				%			-			
(4)					%					
Totals.	uctions included in)	▶∟				lumn (B), Part I, page 1	
Schedule F—Interest, A	nnuities, Rovalt	ies, and F	Rents From	Control	led	Orc	anizations (See	instr	ructions on page 17	
			ot Controlled					moti		
1 Name of Controlled Organization	Name of Controlled 2 Employer Organization Identification Number 3 Net un		nrelated income ee instructions) 4 Total of payment		speci	ified	5 Part of column (4) th included in the contro organization's gross inc		6 Deductions directly connected with income in column (5)	
(1)										
(2)										
3)										
(4)										
Nonexempt Controlled Orga	nizations			•					•	
					10 Pa	art of	column (9) that is		11 Deductions directly	
7 Taxable Income 8 Net unrelated (loss) (see instr				ried	a included		ded in the controlling ization's gross income		connected with income in column (10)	
(1)										
(2)										
(3)										
(4)										
()		I		he		nd or	is 5 and 10. Enter I line 8, Column (A), 1.	here	l columns 6 and 11. Enter e and on line 8, Column (E t I, page 1.	
Totals										

Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization (See instructions on page 18.)

(800 1151 801	ons on page roi)								
1 Description of income	2 Amount of inco	ome	direc	Deductions actly connected ach schedule)		4 Set-asides (attach schedule) 5 Total deducti and set-asides (plus col. 4)			et-asides (col. 3
(1)									
(2)									
(3)									
(4)									
	Enter here and on I	line 9,						Enter her	e and on line 9,
	column (A), Part I, j	page 1.							B), Part I, page 1.
Totals 🕨									
Schedule I—Exploited Exen (See instruction	npt Activity Inconstruction ns on page 18.)	ome, (Other Th	nan Advertisin	ıg lı	ncome			
							-		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	dir conne produ unr	penses rectly cted with uction of elated ss income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	fro is	Gross income m activity that not unrelated siness income	attribu	penses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
	Enter here and on line 10, col. (A), Part I, page 1.	line 10	ere and on , col. (B), , page 1.						Enter here and on line 26, Part II, page 1.
Totals ■ Schedule J—Advertising Inc	como (Soo instru	ctions	<u>on naga</u>	<u>/////////////////////////////////////</u>		<u>/////////////////////////////////////</u>			
Part I Income From Per									
Part Income From Per					5				
1 Name of periodical	2 Gross advertising income		Direct sing costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5	i Circulation income		dership osts	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
Totals (carry to Part II	Ι,								
line (5))	riodicals Popo	rtod c	n a So	narato Basis		oach nori	odical	listod in	Dart II fill in
columns 2 through					(1 01	each pen	ouicai	iisteu ii	i i ait ii, iii iii
(1)									
(2)									
(3)									
(4)									
(5) Totals from Part I									
Totals, Part II (lines 1-5) ▶	Enter here and on line 11, col. (A), Part I, page 1.	line 11	ere and on , col. (B), , page 1.						Enter here and on line 27, Part II, page 1.
Schedule K—Compensation		irecto	rs and	Trustees (See i	<u>/////</u> nstr	<u>/////////////////////////////////////</u>	10 ADA	//////////////////////////////////////	
1 Name			3, and	2 Title	1130	3 Percent of time devoted to	4.0	ompensatio	on attributable to d business
						business	,	unclated	
						%			
						%			
		_				%			
Takal Fakashara I II AA S						%			
Total—Enter here and on line 14, Pa	art II, page 1.)	•		