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

2001

Department of the Treasury Internal Revenue Service

Open to Public Inspection

OMB No 1545 0047

		The digatization may have to use a copy of this retain	· to callary	oldic reporting requirement					
Α	For the	e 2001 calendar year, or tax year beginning , and er	ding						
В_	Check if	applicable Please C Name of organization	-		D E	mployer I	D number		
Γ	Addre	ss change use IRS EDUCATION BASICS & BEYOND,	INC.			<u> 3-086</u>			
	1	change print of THE BRIGHTEN SCHOOL				elephone			
	Initial	The state of the s	et address	Room/suite		•	2-1254	4	
-	Final	See Olioo at Garage General	C1 8001C32	, roomsanc			method X		
┢	1	Specific					_		
H	Applic	ation instruct ODANGE GA 000	<i>c</i> =			ccrual _	Other (spe	спу	
L	pendii	ng Lions, L Oldaton CR 320	$\overline{}$			_			
		Section 501(c)(3) organizations and 4947(a)(1) nonexempt cha				-		Fa	
_		trusts must attach a completed Schedule A (Form 990 or 990-				5?	∐ Yes _2	No.	
	Web s		—  <sup>на</sup>	) If "Yes" enter no of affil	liates	<b>&gt;</b>		N/A	
J	•	zation type	H(c	Are all affiliates included	17	X N/A	∐ Yes L	No	
	(check	only one) X 501(c) ( 3 ) < (insert no ) 4947(a)(1) or 52	27_	(If "No" att a list. See in	nstr )				
K	Check	here 🕨 📙 if the organization's gross receipts are normally not more than	H(c	d) Is this a separate return	filed by	an	_ 🗷	N/A	
	\$25,00	The organization need not file a return with the IRS but if the organization	<u> </u>	organization covered by	a group	ruling?	Yes	Nc	
	receive	d a Form 990 Package in the mail, it should file a return without financial data		Enter 4-digit GEN	<b>&gt;</b>				
	Some	states require a complete return	I N	N Check ▶ X if the	organ	ization is n	ot required		
L	Gross (	receipts Add lines 6b, 8b, 9b and 10b to line 12  226, 9	00	to attach Sch B (For	rm 990,	990-EZ c	or 990-PF)		
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund	Balan	ces (See Specific I	Instru	ctions or	n page 16	<del>3</del> )	
	1	Contributions, gifts, grants, and similar amounts received		•					
	a	Direct public support	1a	12,01	3	ĺ			
	ь	Indirect public support	1b		7	Ì			
	c	Government contributions (grants)	1c		1	ĺ			
	ď	Total (add lines 1a through 1c) (cash \$ 12,013 noncash		·	-  <sub>1d</sub>		12,0	112	
	2			2	<del> </del>	213,0			
		Program service revenue including government fees and contracts (from Part V	))			213,0	<u>, , , , , , , , , , , , , , , , , , , </u>		
	3	Membership dues and assessments	3	<b> </b>	1 0	12.6			
	4	Interest on savings and temporary cash investments	4	-	1,8	130			
	5	Dividends and interest from securities	5	<u> </u>					
	6a	Gross rents	6a		4	ļ.			
	b	Less rental expenses	_6b		4	ł			
	С	Net rental income or (loss) (subtract line 6b from line 6a)	tract line 6b from line 6a)						
R	7	Other investment income (describe			7				
e v	8a	Gross amount from sales of assets other (A) Secunties		(B) Other	_	}			
e n		than inventory	8a		_	ļ			
u	b	Less cost or other basis and sales expenses	8b		_[	Ţ			
е	С	Gain or (loss) (attach schedule)	Вс			ĺ			
	ď	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d_				
7	9	Special events and activities (attach schedule)							
7007	a	Gross revenue (not including \$ of			1				
ر د		contributions reported on line 1a)	9a		1				
-	ь	Less direct expenses other than fundraising expenses	9b		7				
	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		7				
<b>.</b>	C	Gross profit or (loss) from sales of inventory (att. sch.) (subtract line 10b from lii		·	10c				
ij	11				11	·			
otin  all		Total revenue (add lines 1d 2.2 & 5.5 a. 7.8d Co. 40a4 April 44)				1	226,9	700	
	12	Other revenue (from Part VII line 103)  Total revenue (add lines 1d, 2 3 4, 5, 6c, 7, 8d 9c 10c(and 11) September 100 Program services (from line 44, column (B))		1	12	-			
禾	13	Program services (from line 44, column (B))	בט	1	13	<del>                                     </del>	147,7		
9	14	Management and general (from line 44, column (C))		ပ္ကန	14	<del> </del>	55,0		
ريك	15	Fundraising (from line 44, column (D))  Payments to affiliates (attach schedule)		HS-OSC	15	<del> </del>	17,8	<u>196</u>	
e e	16	1 and 1 animales father screening		ผู้เ	16	<del> </del>	200		
	17	Total expenses (add lines 16 and 44 column (A))		<u> </u>	17	ļ	220,7		
A	18	Excess or (deficit) for the year (subtract line 17 from line 12) OGDEN,	UT	1	18	ļ	6,1		
N S	19	Net assets or fund balances at beginning of year (from line 73, column (A))		,,	19	ļ	<u>16,1</u>	<u>.69</u>	
e e t t	20	Other changes in net assets or fund balances (attach explanation)			20				
5	21	Net assets or fund balances at end of year (combine lines 18 19, and 20)			21		22,3	367°	

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Form 990 (2001) EDUCATION BASICS & 1	BEYON	D, INC.	<u>33-0868915</u>		Page 2
			ns (B) (C) and (D) are requ		
Functional Expenses and section 494	7(a)(1) none	exempt chantable trusts	li i	e Specific Instructions on	page 21 )
Do not include amounts reported on line	1 1	(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I	+		services	and general	<del></del>
22 Grants and allocations (attach schedule) non- (cash \$ cash \$	) 22				
(cash \$ cash \$	23				
24 Benefits paid to or for members	24		-		
25 Compensation of officers directors, etc	25	59,372	26,124	27,311	5,937
26 Other salaries and wages	26	18,376	17,090	1,286	
27 Pension plan contributions	27	20,5,0	2,7000		<del></del>
28 Other employee benefits	28	684	-	684	
29 Payroll taxes	29	7,508	4,054	2,853	601
10 Professional fundraising fees	30				
31 Accounting fees	31				
22 Legal fees	32	1,685		1,685	
3 Supplies	33				
4 Telephone	34	··			
35 Postage and shipping	35	2,828	1,414	1,131	283
36 Occupancy	36	50,000		5,000	1,500
7 Equipment rental and maintenance	37	1,763		1,763	
88 Printing and publications	38		,		
39 Travel	39	140		140	
10 Conferences, conventions, and meetings	40				
11 Interest	41	908		908	
Depreciation, depletion, etc. (att. sch.)	42	2,356	2,356		
3 Other expenses not covered above (itemize) a	43a				
b SEE STATEMENT 1	43b	75,082	53,219	12,288	9,575
c	43c				
d	43d				<u>_</u>
e	43e				
4 Total functional expenses (add lines 22 - 43) Organizations					
completing columns (B)-(D) carry these totals to lines 13-1	5 44	220,702	147,757	55,049	17,896
Joint Costs Check ▶ ☐ if you are following SOP 98-2					
vre any joint costs from a combined educational campaign and fundral	sing solicita	tion reported in (B) Prog	ram services?	▶ 🛮 י	Yes 🔀 No
"Yes " enter (i) the aggregate amount of these joint costs \$	_	(o) the	amount allocated to Progr	ram services \$	
lii) the amount allocated to Management and general		and (IV) the	amount allocated to Fund	Iraising \$	
Part III Statement of Program Service Ac	complis	hments (See Sp	pecific Instructions	on page 24)	
What is the organization's primary exempt purpose?					Program Service
EDUCATION OF CHILDREN					Expenses (Required for 501(c)(3) ar
All organizations must describe their exempt purpose achieve of clients served, publications issued, etc. Discuss achievem	ements in ents that a	a clear and concise r	manner State the numb Section 501(c)(3) and (	ber	(4) orgs and 4947(a)(1 trusts but optional for
All organizations must describe their exempt purpose achieved foliants served publications issued, etc. Discuss achievem organizations and 4947(a)(1) nonexempt chantable trusts must	<u>ist also en</u>	ter the amount of gra	ints and allocations to d	others)	others )
a EDUCATED APPROXIMATELY 45 (	CHILD	REN IN GRAI	DES K-12		
		(Grants and all	ocations \$	)	<u>147,757</u>
b					
<del></del>		(Grants and all	ocations \$	)	
c				1	
				İ	
		(Grants and all	ocations \$	1	
d					
		(Grants and all			
e Other program services (attach schedule)		(Grants and all		)	145 555
f Total of Program Service Expenses (should equal line	44, colum	n (B), Program servic	:es)	<u> </u>	147,757 Form 990 (2001
***					FUH 330 (200)

#### Part IV Balance Sheets (See Specific Instructions on page 24)

45   Cash-non-interest-bearing   25,991   45   8,451     46   Savings and temporary cash investments   47a   46   18,987     47a   Accounts receivable   47b   47c     48a   Pledges receivable   48a   48c     49   Grants receivable   49   49     50   Receivables from officers, directors, trustees, and key employees (attach schedule)   51a   51c     51   Other notes and loans receivable (attach schedule)   51a   51c     52   Investments-land, buildings and equipment basis   55a   10   55b   55c     55   Investments-other (attach schedule)   55b   57a   9,482     57b   3,391   6,041   57c   6,091     57b   3,391   6,041   57c   6,091     57c   6,091   57c   6,091     57c   57c   57c   57c   6,091     57c   57c   57c   6,091     57c   57c   57c   6,091     57c   57c   6,091   57c   6,091     57c   57c   57c   6,091     57c   57c   57c   6,091     57c   57c   57c   6,091     57c   57c   57c   7,091     57c   57c   6,091     57c   57c   7,000     5	_	Note	Where required, attached schedules and amounts with	hin the description		(A)		(B)
45 Savings and temporary cash investments  46 18,987  47a Accounts reconvable b Less allowance for doubtful accounts  48a Piedges receivable b Less allowance for doubtful accounts  48b 48c Grants receivable c Grants receivable d Grants receivabl						Beginning of year	<b> </b>	End of year
47a		45	Cash-non-interest-bearing			<u>25,991</u>	45	<u>8,451</u>
b Less allowance for doubiful accounts  48a Piedges receivable  b Less allowance for doubiful accounts  48b		46	Savings and temporary cash investments		-		46	<u> </u>
b Less allowance for doubiful accounts  48a Piedges receivable  b Less allowance for doubiful accounts  48b				1 1				
48a   Pledges receivable   48a   48b   48c   48c   48b   48c   48c   48b   48c		47a	Accounts receivable	47a				
b Loss allowance for doubtful accounts  48b		b	Less allowance for doubtful accounts	47b			47c	<del></del>
b Loss allowance for doubtful accounts  48b				]				
49 Grants receivable A Receivable in Receivable of Receivable in Receiv		48a	Pledges receivable	48a			<b>,</b>	
So   Receivables from officers, directors, trustees, and key employees (altach schedule)   S1a   Other notes and loans receivable (altach schedule)   S1b   S1c		ь	Less allowance for doubtful accounts	48b		··	48c	
A   (altach schedule)   50   51a   51b   51b   51c   51b   51c   51b   51c   51b   51c		49	Grants receivable				49	
State   Sta		50	Receivables from officers, directors, trustees, and key	employees				
Section   State   St	Α	<b>!</b>	(attach schedule)		L		50	··
b Less allowance for doubtful accounts  1	s	51a	Other notes and loans receivable (attach				{	
52   Inventones for sale or use   52   53   Prepaid expenses and deferred charges   53   Prepaid expenses and deferred charges   54   Investments-securities	\$	1	schedule)	51a				
S   Prepad expenses and deferred charges   S   S   Investments-securities   S   S   Investments-securities   S   S   S   S   S   S   S   S   S	e	ь	Less allowance for doubtful accounts	51b			51c	
54 Investments-securities	t	52	Inventones for sale or use				52	
55a Investments-land, buildings and equipment basis b Less accumulated depreciation (attach schedule) 55 Investments-other (attach schedule) 56 Investments-other (attach schedule) 57a Land, buildings and equipment basis b Less accumulated depreciation (attach schedule) 57b 3,391 6,041 57c 6,091 58 Other assets (describe ► SEE STMT 2 ) 1,125 58 825 59 Total assets (add lines 45 through 58) (must equal line 74) 33,157 59 34,354 60 Accounts payable and accrued expenses 60 61 Grants payable 61 Greate payable 61 Greate payable 62 Deferred revenue 62 Edered revenue 62 Edered revenue 63 Loans from officers directors, trustees and key employees (attach schedule) 64a Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (detach schedule) 64 Edered for the liabilities (detach schedule) 65 Other liabilities (detach schedule) 66 Other liabilities (detach schedule) 67 Unrestricted 68 Total liabilities (add lines 60 through 65) 16,988 65 11,987 67 Unrestricted 69 Permanently restricted 69 Pe	s	53	Prepaid expenses and deferred charges		[		53	
b Less accumulated depreciation (attach schedule)  56 Investments-other (attach schedule)  57 Land, buildings and equipment basis  b Less accumulated depreciation (attach schedule)  58 Other assets (describe ► SEE STMT 2 )  59 Total assets (add lines 45 through 58) (must equal line 74)  59 Total assets (add lines 45 through 58) (must equal line 74)  50 Accounts payable and accrued expenses  61 Cartan payable  62 Deferred revenue  63 Loans from officers directors, trustees and key employees (attach schedule)  64 Tax-exempt bond liabilities (attach schedule)  65 Other liabilities (describe ► SEE STMT 3 )  66 Total liabilities (add lines 60 through 65)  67 Urganizations that follow SFAS 117, check here ► and complete lines  67 through 69 and lines 73 and 74  68 Temporarily restricted  69 Permanently restricted  69 Permanently restricted  61 Captal stock, trust principal or current funds  70 Captal stock, trust principal or current funds  71 Pad-dn or capital surplus, or land, building, and equipment fund  71 Pad-dn or capital surplus, or land, building, and equipment fund  71 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)  55		54	Investments-securities	► ☐ Cost	FMV		54	
b Less accumulated depreciation (attach schedule)  56 Investments-other (attach schedule)  57a Land, buildings and equipment basis  b Less accumulated depreciation (attach schedule)  57b 3,391 6,041 57c 6,091  58 Other assets (describe ► SEE STMT 2 ) 1,125 58 825  59 Total assets (add lines 45 through 58) (must equal line 74) 33,157 59 34,354  60 Accounts payable and accrued expenses  61 Grants payable  62 Deferred revenue  63 Loans from officers directors, trustees and key employees (attach schedule)  64 Tax-exempt bond liabilities (attach schedule)  65 Other liabilities (describe ► SEE STMT 3 ) 16,988 65 11,987  Organizations that follow SFAS 117, check here ► and complete lines 67 through 69 and lines 73 and 74  NF 67 Unrestricted  68 Temporanly restricted  69 Permanently restricted  69 Permanently restricted  61 Organizations that follow SFAS 117, check here ► and complete lines 70 capital stock, trust principal or current funds  70 Capital stock, trust principal or current funds  71 Pad-in or capital surplus, or land, building, and equipment fund  70 Capital stock, trust principal or current funds  71 Pad-in or capital surplus, or land, building, and equipment fund  72 Retained earnings endowment, accumulated income or other funds  73 Total net assets or fund balances (add lines 67 through 69 OR lines  74 Polumy 172, column (A) must equal line 19, column (B) must equal line 21)  16 16, 169 73 22, 367		55a	Investments-land, buildings and					
Schedule   S5b			equipment basis	55a				
56 Investments-other (attach schedule) 57a Land, buildings and equipment basis b Less accumulated depreciation (attach schedule) 58 Other assets (describe ► SEE STMT 2 ) 1,125 58 825  59 Total assets (add lines 45 through 58) (must equal line 74) 33,157 59 34,354  60 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from officers directors, inustees and key employees (attach schedule) 64a Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (describe ► SEE STMT 3 ) 16,988 65 11,987  66 Total liabilities (add lines 60 through 65) 16,988 66 11,987  Organizations that follow SFAS 117, check here ► and complete lines 67 through 69 and lines 73 and 74  Unrestricted 68 Temporanly restricted 69 Permanently restricted 69 Permanently restricted 70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings endowment, accumulated income or other funds 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)  57a 9, 482  57b 3, 391 6, 041 57c 6, 091  57b 3, 391 6, 041 57c 60  57b 4, 391 6, 041 5		ь	Less accumulated depreciation (attach					
57a Land, buildings and equipment basis b Less accumulated depreciation (attach schedule) 58 Other assets (describe ► SEE STMT 2 ) 1,125 58 825  59 Total assets (add lines 45 through 58) (must equal line 74) 33,157 59 34,354  60 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 62 b 63 Loans from officers directors, inustees and key employees (attach schedule) 64a Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (actach schedule) 66 Total liabilities (add lines 60 through 65) 66 Total liabilities (add lines 60 through 65) 67 Unrestricted 68 Temporanily restricted 69 Permanently restricted 69 Torganizations that do not follow SFAS 117, check here ► and complete lines 60 Organizations that do not follow SFAS 117, check here ► and complete lines 70 through 72 Capital stock, trust principal or current funds 70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings endowment, accumulated income or other funds 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) 66, 041, 125 S8 67, 041, 125 S8 67, 041, 125 S8 68, 05 69 60 60 61 Grants payable 61 61 62 63 64a 64b 64a 64b 64a 64b 64a 64b 64a 64b 64b 64a 64b 64b 64a 64b 64a 64b 64b 65c 61 11, 987 67 67 68 69 69 60 60 61 61 61 61 62 62 63 64a 64b 64b 65c 67 67 68 67 68 69 67 69 67 67 67 67 67 67 67 67 67 67 67 67 67			schedule)	55b			55c	
b Less accumulated depreciation (attach schedule)  57b 3,391 6,041 57c 6,091  58 Other assets (describe ► SEE STMT 2 ) 1,125 58 825  59 Total assets (add lines 45 through 58) (must equal line 74) 33,157 59 34,354  60 Accounts payable and accrued expenses 61  61 Grants payable 62 Deferred revenue 62  62 Loans from officers directors, trustees and key employees (attach schedule) 63  64a Tax-exempt bond liabilities (attach schedule) 64a  65 Other liabilities (describe ► SEE STMT 3 ) 16,988 65 11,987  66 Total liabilities (add lines 60 through 65) 16,988 66 11,987  Organizations that follow SFAS 117, check here ► and complete lines 67 through 69 and lines 70 through 74  67 Unrestricted 68 Temporanty restricted 69 Permanently restricted 70 Capital stock, trust principal or current funds 70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Retained earnings endowment, accumulated income or other funds 70 through 72  Column (A) must equal line 19, column (B) must equal line 21) 16,169 73 22,367		56	Investments-other (attach schedule)	<u>-</u> ; .			56	
b Less accumulated depreciation (attach schedule)  57b 3,391 6,041 57c 6,091  58 Other assets (describe ► SEE STMT 2 ) 1,125 58 825  59 Total assets (add lines 45 through 58) (must equal line 74) 33,157 59 34,354  60 Accounts payable and accrued expenses 61  61 Grants payable 62 Deferred revenue 62  62 Loans from officers directors, trustees and key employees (attach schedule) 63  64a Tax-exempt bond liabilities (attach schedule) 64a  65 Other liabilities (describe ► SEE STMT 3 ) 16,988 65 11,987  66 Total liabilities (add lines 60 through 65) 16,988 66 11,987  Organizations that follow SFAS 117, check here ► and complete lines 67 through 69 and lines 70 through 74  67 Unrestricted 68 Temporanty restricted 69 Permanently restricted 70 Capital stock, trust principal or current funds 70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Retained earnings endowment, accumulated income or other funds 70 through 72  Column (A) must equal line 19, column (B) must equal line 21) 16,169 73 22,367		57a	Land, buildings and equipment basis	57a	9,482			<u> </u>
Schedule		Ь	Less accumulated depreciation (attach					
58 Other assets (describe ► SEE STMT 2 )			· · · · · · · · · · · · · · · · · · ·	57b	3,391	6,041	57c	6,091
59 Total assets (add lines 45 through 58) (must equal line 74)  60 Accounts payable and accrued expenses  61 Grants payable 62 Deferred revenue 63 Loans from officers directors, trustees and key employees (attach schedule) 63 Loans from officers directors, trustees and key employees (attach schedule) 64 Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (describe ► SEE STMT 3 ) 66 Total liabilities (ded lines 60 through 65) 67 Unrestricted 68 Temporanity restricted 69 Permanently restricted 69 Permanently restricted 69 Permanently restricted 60 Total liabilities (attach schedule) 60 Total liabilities (attach schedule) 60 Total liabilities (add lines 60 through 65) 60 Total liabilities (add lines 73 and 74 60 Unrestricted 60 Total liabilities (add lines 73 and 74 60 Unrestricted 61 Turestricted 62 Temporanity restricted 63 Temporanity restricted 64 Temporanity restricted 65 Temporanity restricted 66 Total liabilities (add lines 60 through 70 through 71 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) 65 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 73, column (A) must equal line 19, column (B) must equal line 21) 66 Total liabilities (attach schedule) 67 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) 68 Temporanity explicit (B) Temporanity equal line 19, column (B) must equal line 21) 69 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 73, column (A) must equal line 19, column (B) must equal line 21)		58	Other assets (describe					825
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61 Grants payable 62 Deferred revenue 63 Loans from officers directors, trustees and key employees (attach schedule) 63 Tax-exempt bond liabilities (attach schedule) 64 Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (describe SEE STMT 3 ) 66 Total liabilities (add lines 60 through 65) 67 Unrestricted 68 Temporanty restricted 69 Permanently restricted 69 Permanently restricted 69 Permanently restricted 69 Organizations that do not follow SFAS 117, check here A organizations that do not follow SFAS 117, check h		60						
62 Deferred revenue 63 Loans from officers directors, trustees and key employees (attach schedule) 63 Loans from officers directors, trustees and key employees (attach schedule) 64a Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (describe  SEE STMT 3 ) 66 Total liabilities (add lines 60 through 65)  Crganizations that follow SFAS 117, check here  and complete lines 67 through 69 and lines 73 and 74  NF of Unrestricted 68 Temporarily restricted 69 Permanently restricted 69 Permanently restricted 69 Corganizations that do not follow SFAS 117, check here  and complete lines 70 through 74 70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Paid-in or capital surplus, or land, building, and equipment fund 71 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 2 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		61	· -			<del>'</del> '	61	
b 63 Loans from officers directors, trustees and key employees (attach schedule) 64a Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (describe ► SEE STMT 3 ) 66 Total liabilities (add lines 60 through 65) 70 Organizations that follow SFAS 117, check here ► and complete lines 67 through 69 and lines 73 and 74 67 Unrestricted 68 Temporanly restricted 69 Permanently restricted 69 Permanently restricted 60 Organizations that do not follow SFAS 117, check here ► and complete lines 70 through 74 70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Retained earnings endowment, accumulated income or other funds 70 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) 63 Capital Stock, trust principal or current funds 70 through 72, column (A) must equal line 19, column (B) must equal line 21) 64 Capital Stock (A) must equal line 19, column (B) must equal line 21) 65 Capital Stock (B) Capital Stock (Capital Stock) (C						<del></del>	<del>! </del>	
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b Mortgages and other notes payable (attach schedule) 65 Other liabilities (describe  SEE STMT 3 ) 66 Total liabilities (add lines 60 through 65)  Crganizations that follow SFAS 117, check here  and complete lines 67 through 69 and lines 73 and 74  67 Unrestricted 68 Temporanly restricted 69 Permanently restricted 69 Permanently restricted Crganizations that do not follow SFAS 117, check here  and complete lines 70 through 70  Capital stock, trust principal or current funds 70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings endowment, accumulated income or other funds 73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, 73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, 73 Column (A) must equal line 19, column (B) must equal line 21)  16, 169 73 22, 367		64a	•			<del> </del>	-	
65 Other liabilities (describe ► SEE STMT 3 )  66 Total liabilities (add lines 60 through 65)  Corganizations that follow SFAS 117, check here ► and complete lines  67 through 69 and lines 73 and 74  87 Unrestricted  68 Temporantly restricted  69 Permanently restricted  69 Permanently restricted  60 Organizations that do not follow SFAS 117, check here ► A and complete lines 70 through 74  70 Capital stock, trust principal or current funds  71 Paid-in or capital surplus, or land, building, and equipment fund  72 Retained earnings endowment, accumulated income or other funds  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, 169 73 22, 367	t	l .						
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67 through 69 and lines 73 and 74  67 Unrestricted  68 Temporantly restricted  69 Permanently restricted  69 Organizations that do not follow SFAS 117, check here of the lines 70 through 74  70 Capital stock, trust principal or current funds  71 Paid-in or capital surplus, or land, building, and equipment fund  72 Retained earnings endowment, accumulated income or other funds  73 Total net assets or fund balances (add lines 67 through 69 OR lines  70 through 72,  70 column (A) must equal line 19, column (B) must equal line 21)  67 brough 69 and lines 73 and 74  68 for through 69 and lines 73 and 74  69 column (A) must equal line 19, column (B) must equal line 21)				and complete lines				
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t n d 69 Permanently restricted  A Organizations that do not follow SFAS 117, check here A Complete lines 70 through 74  70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings endowment, accumulated income or other funds 73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, 71 Column (A) must equal line 19, column (B) must equal line 21)  73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, 71 Column (A) must equal line 19, column (B) must equal line 21)	ΝF	67	Unrestricted		ļ		67	
d 69 Permanently restricted  Organizations that do not follow SFAS 117, check here A and complete lines 70 through 74  70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings endowment, accumulated income or other funds 73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, 71 Column (A) must equal line 19, column (B) must equal line 21)  69  69  69  69  69  69  70  70  71  72  73  74  75  75  76  77  78  79  70  70  71  71  71  72  73  74  75  75  76  77  78  78  79  70  70  71  71  71  72  73  74  75  75  76  77  78  78  79  70  70  70  71  71  72  73  74  75  75  76  77  78  78  79  70  70  70  71  71  72  73  74  75  75  76  77  78  78  78  79  70  70  70  70  71  71  72  73  74  75  75  76  77  78  78  78  79  70  70  70  71  71  72  73  74  75  75  76  77  78  78  78  78  78  78  78  78		68	Temporanly restricted		Ī		68	
Organizations that do not follow SFAS 117, check here A and complete lines 70 through 74  70 Capital stock, trust principal or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings endowment, accumulated income or other funds 73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, 73 Column (A) must equal line 19, column (B) must equal line 21)  16,169 73  22,367		69			Ī		69	
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Paid-in or capital surplus, or land, building, and equipment fund Retained earnings endowment, accumulated income or other funds Total net assets or fund balances (add lines 67 through 69 OR lines To through 72, Column (A) must equal line 19, column (B) must equal line 21)  71  72  73  74  75  76  77  78  79  70  70  70  71  71  72  72  73  70  73  74  75  75  76  77  78  78  79  79  70  70  70  70  70  70  70  70		70	<del>-</del>				70	
72 Retained earnings endowment, accumulated income or other funds C 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)  16,169 72 22,367				ment fund	ľ			
C 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) 16,169 73 22,367					ţ	16.169		22.367
70 through 72, column (A) must equal line 19, column (B) must equal line 21) 16,169 73 22,367	C				ľ			
column (A) must equal line 19, column (B) must equal line 21) 16,169 73 22,367	0 e		·					
	T 5	]		at line 21)	Ì	16.169	73	22.367
		74	•		ļ			

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.

Form 9	990 (2001)	EDUCATION BASE	ICS_	& BEYOND,	IN	<u>c.</u>	33-0	868915			Page 4	
Par	art IV-A Reconciliation of Revenue per Audited				Part IV-B Reconciliation of Expenses per Audited							
		<b>Financial Statements</b>	with	Revenue per		Financial Statements with Expenses per						
N/I	<u> </u>	Return (See Specific	Instr	uctions, page 26		<u> N/</u>	<u>'A</u> R	teturn			<u> </u>	
а	Total revenue	e, gains and other support			а	)	Total expenses	and losses per				
F	oer audited fi	nancial statements	a				audited financia	f statements	•	a		
b /	Amounts incl	uded on line a but not on			П	)	Amounts include	ed on line a but not	t		- · · ·	
1:	ine 12, Form	990			Ĭ		on line 17 Form	1 990				
(1) N	Net unrealize	d gains on				(1)	Donated service	s and use				
ų.	nvestments	s	1 1		Į.		of facilities \$			l I		
(2)	Donated serv	rices and use	1 !			(2)	Prior year adjus	tments		]		
c	of facilities	\$	1				reported on line	20				
(3) F	Recovenes o	f prior	1				Form 990 \$					
<b>)</b>	ear grants	\$				(3)	Losses reported	I on line 20,		1		
(4)	Other (specif	y)	}				Form 990 \$					
						(4)	Other (specify)			]		
		\$	!									
-	Add amounts	on lines (1) through (4)	Ъ				\$					
							Add amounts or	n lines (1) through (	(4) ▶	ь		
c L	ine a minus	line b	c		c	:	Line a minus line	e b	<b>•</b>	С		
d A	Amounts incl	uded on line 12			d	1	Amounts include	ed on line 17,				
F	Form 990 bu	t not on line a	1 1				Form 990 but no	ot on line a		!		
(1)	(1) Investment expenses			1	(1)	Investment expe	enses		] ]			
r	not included	on line 6b,	1 1				not included on	line 6b		<b>!</b>		
F	Form 990	\$	]				Form 990 \$			]		
(2) (	Other (specif	y)	]			(2)	Other (specify)					
	<u>s</u>						<u>s</u>					
į.	Add amounts	on lines (1) and (2)	d				Add amounts or	n lines (1) and (2)	<b>•</b>	d		
e 7	Total revenue	e per line 12 Form 990			e	•	Total expenses	per line 17, Form 9	90			
	hne c plus hi	ne d)	e				(line c plus line	d)	•	e		
Par	t V Lis	st of Officers, Director	s, Tr	ustees, and Key	/ Em	plo	yees (List each	n one even if not co	mpens	ated, see S	pecific	
	Ins	tructions on page 26)										
		(A) Name and address			(B	l) Ti	tle and average irs per week	(C) Compensation	( <b>D)</b> Comploy	contrib to see benefit deferred	(E) Expense	
<u></u>		(A) Name and address	,				ted to position	(If not paid, enter	plans t	deferred pensation	account and other allowances	
	THY VI				PR	ES.	SIDENT					
		<u>GRANADA DR. OR</u>	<u>ANG</u>	E, CA 928				30,235		0	0	
PA	TRICIA	ADEFF			V-	PF	RESIDENT			1		
		FLOWER IRVINE	CA	92620	40			10,773		0	0	
	SAN R.						RETARY			1		
		SANTA ANA CANY	ON :	ROAD ORANG				10,653		0	0	
	BIN RO				CF							
		ESSORI AVE. PLA	<u>ACE</u>	NTIA, CA	40		<del></del>	7,711		0	0	
	GO CAN				DI	RE	ECTOR					
		INES IRVINE, C	<u>A 9</u> :	2620	0			0		0	0	
		OITENKO				RE	ECTOR					
		CESSA SAN CLEMI	ENT	E CA 9267				0		0	0	
	ED VOI					RE	ECTOR					
		CESSA SAN CLEM	<u>ENT</u>	E CA 9267				0		0	0	
		GREGORY			DI	RI	ECTOR					
41	19 S. PARKER ST ORANGE, CA				0_		<del></del>	0		0	0	
		<u> </u>										
								}				
		<del></del>			L				L		·	
		er director trustee, or key em	-	+								
		and all related organizations		•	0 was	pro	wided by the rela	ated organizations?	,	<b>&gt;</b>	Yes 🔀 No	
)·	f "Yes," attac	h schedule-see Specific Inst	ruction	ns on page 27								

	1990 (2001) EDUCATION BASICS & BEYOND, INC. 33-0868915		Pa	<u>sge 5</u>
	irt VI Other Information (See Specific Instructions on page 27 )		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		<u>X</u>
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			
78a	Did the organization have unrelated business gross inc. of \$1,000 or more during the year covered by this return?	78a		<u>X</u>
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		X
79	Was there a liquidation dissolution termination, or substantial contraction during the year? If "Yes," attach a			
	statement	79	-	<u>X</u>
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		X
b	If "Yes," enter the name of the organization			
04 -	and check whether it is			
81a	Enter direct or indirect political expenditures. See line 81 instr.  But the appropriate State of the state o			v
b	Did the organization file Form 1120-POL for this year?	81b		<u> </u>
82a	Did the organization receive donated services or the use of materials, equipment or facilities at no charge		v	
L	or at substantially less than fair rental value?	82a	Х	
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.)	ŀ		
83a		83a	х	,
osa b	Did the organization comply with the public inspection requirements for returns and exemption applications?	83b	Ŷ	
84a	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?  Did the organization solicit any contributions or gifts that were not tax deductible?	84a	Λ.	x
b	· · · · · · · · · · · · · · · · · · ·	041		
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  N/A	84b		
85	501(c)(4), (5) or (6) organizations a Were substantially all dues nondeductible by members?  N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  N/A	85b		
~	If "Yes" was answered to either 85a or 85b do not complete 85c through 85h below unless the organization	000		
	received a waiver for proxy tax owed for the prior year			
С	Dues, assessments, and similar amounts from members 85c			
d	Section 162(e) lobbying and political expenditures  85d	1		,
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices  85e	1		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f	1		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?  N/A	85g		
_	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?  N/A	85h	į	
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12			
ь	Gross receipts, included on line 12, for public use of club facilities 86b	] [	ļ	
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 )	}		
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		<u> </u>
89a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under			
	section 4911 ▶ 0 , section 4912 ▶ 0 section 4955 ▶ 0			
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	_89ь_		<u>X</u>
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			0
90a	List the states with which a copy of this return is filed CA			
ь	Number of employees employed in the pay period that includes March 12, 2001 (See instructions )	10		<del></del>
91	The books are in care of ► ROBIN ROSS  Telephone no ► 714-	282	-12	54
	Located at ▶ 2190 N. CANAL STREET, ORANGE, CA ZIP+4 ▶ 92865			
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	<del></del>	000	(2001)
		rom	ココリ	(2001)

Form 990 (200 Part VII	1) EDUCATION BASI Analysis of Income-Pro						<del></del>	Page 6
	gross amounts unless otherwise	ducing Activiti	ſ	d business income			12 513 or 514	
indicated	gross amounts unless otherwise							(E) Related or
	service revenue		(A) Business code	(B) Amount	(C) Exclusion code	An	(D) nount	exempt function income
_	TION			<del></del>		<del>[</del>	<del></del>	210,817
	K SALES			-			<del></del>	1,483
	DENT STORE SALES				<u> </u>	<del> </del>	<del></del>	714
	MISSIONS				<del></del>	·		37
e	ENI DO TOND				<del> </del>	<del></del>	<u> </u>	
	e/Medicaid payments				-			
	d contracts from government agen	cioé				<del></del>		
-	ship dues and assessments	Mes	<del></del>			<del>                                     </del>		
	·	.celmonlo	<del></del>	·	14		1,836	<del></del> -
	on savings and temporary cash inv	resiments	····-	<u>.                                    </u>	<del> </del> _	<del> </del>	1,030	
	Is and interest from securities					<del></del> -	<del></del>	<del></del>
	al income or (loss) from real estate	1		<del></del> -		ļ		<del>_</del>
	inced property							
	-financed property			<del></del>		<u> </u>		
	al income or (loss) from personal p	roperty	<del></del>				<u></u>	
	vestment income		ļ					
	(loss) from sales of assets other th	an inventory			_		<u> </u> .	
	me or (loss) from special events							··
	rofit or (loss) from sales of inventor	У				ļ		
103 Other re	venue a			· · · · · · · · · · · · · · · · · · ·	_			
b	· · · · · · · · · · · · · · · · · · ·				_ <b> </b>	<u> </u>		
c								
d		<del></del>						
е						<u> </u>		
104 Subtotal	(add columns (B), (D) and (E))				0		1,836	213,051
105 Total (a	dd line 104, columns (B), (D) and	(E))					<b>•</b>	214,887
Note Line 105	plus line 1d, Part I, should equal	the amount on line 1	2, Part I					
Part VIII	Relationship of Activiti	es to the Accor	nplishment	of Exempt Pu	rposes (	See Speci	fic Instructions	s on page 32 )
Line No	Explain how each activity for whi	ch income is reporte	ed in column (E	) of Part VII contrib	outed impor	tantly to th	e accomplish	ment
•	of the organization's exempt purp	oses (other than by	providing fund	ls for such purpose	s)			
93A	TUITION RECEIVED					UCATI	ON	
93B	PAYMENTS FROM ST							
93C	PAYMENTS FROM ST		_				<del></del> -	
93D	REFERRRAL COMMIS							
Part IX	Information Regarding T			isregarded En	titi <b>es</b> (Se	e Specific	Instructions o	n page 33 )
Alama -d	(A)	(B)		(C)		(D)	T	(E)
name, add partner	dress, and EIN of corporation, ship, or disregarded entity	Percentage of ownership interes		lature of activities		Total inc	ome	End-of-year assets
	/A		%					
		<del></del>	%					
		<u> </u>	%					
		- <del></del>	%					
Part X	Information Regarding T	ransfers Assoc	nated with	Personal Bene	fit Contr	acts (Se	Specific Inst	nuctions on no. 33.)
	he organization during the year receive						opedine mat	Yes X No
• •	the organization during the year, p	•		•				Yes X No
, ,	es" to (b), file Form 8870 and For	• •		on a personal ben	Ciri Corribac			□ .02 전
11010 17	Under penaltyes of perjury, I declare th		_	200000000000000000000000000000000000000	ulae and stat	omasis as		
	and belief it in true correct and comp							
Please	No Line	A CONTRACTOR OF PICE	porer (outer blan	omeer, is bases on a		Or Hillor pro	7	MANDS
Sign	1 Course	my		<del></del>		•	<del>/</del>	avova
Here	Superfure of officer	m=10 ( )	Diacil	a. L. 1		6)	Date	
		ney /	resid	CKT 1	LYCL	יע <i>ס</i> י		
	Type or print name and title	<del>-/</del>	<del>/</del> i	<del></del>		T		
Dave	Preparer's	1/A/ A	Da	self لمميسمية	eck if	n 1 :		TIN (See Gen Instr W)
Paid	signature	- 7 ma		1/05/02 em	ployed 🕨	PO	006150	
Preparer's		ENBERG ANI		N CPAS			EIN -	<u>95-3387333</u>
Use Only		•		VARD SUIT	E 103		Phone	
	address and ZIP + 4 T <sub>2</sub> OS	ANGELES	CA 900	149			Iոո ▶ 3.2	23-666-7700

EDUCATION BASICS & BEYOND, INC.

#### **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 Supplementary Information-(See separate instructions) OMB No 1545-0047

2001

Department of the Treasury Internal Revenue Service

▶ MUST be completed by the above organizations and attached to their Form 990 or 990 EZ Name of the organization

Employer identification number 33-0868915

THE BR	RIGHTEN SCHOOL		_		
Part I	Compensation of the Five Highest Par	d Employees Other Ti	han Officers, Di	rectors, and Trus	tees
	(See page 1 of the instructions List ea	ch one If there are not	ne, enter "None		
(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  NONE  (b) Title and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee ben plans & deferred compensation  (e) Compensation  (f) Compensation  (g) Compens		(e) Expense account and other allowances			
NONE					
					· · · · · · · · · · · · · · · · · · ·
					· · · · · ·
					-
	_				
Part II					lone ")
	(a) Name and address of each independent contractor pa	aid more than \$ 50 000	(b) Туре	of service	(c) Compensation
NONE					
					·
Total number	of others receiving over \$50,000 for				

Sche	dule .	A (Form 990 or 990-EZ) 2001 EDUCATION BASICS & BEYOND, INC. 33-086891	<u>5</u>	Р	age 2
Pa	rt III	Statements About Activities (See page 2 of the instructions )		Yes	No
1		ng the year, has the organization attempted to influence national state or local legislation, including any	$\Box$		
		mpt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid	1	<u> </u>	X
		icurred in connection with the lobbying activities (Must equal amount on line 38, VI-A, or line i of Part VI-B)			
		anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other			
	orga	inizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of			
		obbying activities			
2		ng the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
		stantial contributors, trustees directors, officers, creators key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority			ĺ
		er or principal beneficiary? (If the answer to any question is "Yes" attach a detailed statement explaining the			1
		sactions )	1		ĺ
а	Sale	e, exchange or leasing of property?	_2a		х
b	Lend	ding of money or other extension of credit?	2b		x
С	Furn	nishing of goods, services, or facilities?	2c		х
	_	CHE DIDE IL BODY COO			
d	Payı	ment of compensation (or payment or reimbursement of exp. if more than \$1 000)? SEE PART V, FORM 990 SEE STMT 4	_2d	<u> </u>	
0	Tran	isfer of any part of its income or assets?	2e		х
3		s the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)	3		X
4 Note	-	you have a section 403(b) annuity plan for your employees?	4	l	Х
		ich a statement to explain how the organization determines that individuals or organizations receiving grants orn it in furtherance of its chantable programs "qualify" to receive payments			
			L	-	
	rt IV		_ <del></del>		
	$\overline{}$	ization is not a private foundation because it is. (Please check only ONE applicable box.)			
5 6		A church_convention of churches, or association of churches_Section 170(b)(1)(A)(i) 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)(v)			
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, or	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) (Also complete the Support Schedule in Part IV-A)	(A)(IV)		
11a	п	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)(vi) (Also complete the Support Schedule in Part IV-A)			
11b	Д,	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12	_	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
		receipts from activities related to its chantable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of			
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acqui by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	reu		
13	$\Box$	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations			
	_ (	described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See			
	3	section 509(a)(3) )			
		Provide the following information about the supported organizations. (See page 5 of the instructions.)			
		(a) Name(s) of supported organization(s)	o) Line n from a		ſ
	-	<del></del>		JOVE	
		An organization organized and energled to test for public select. Section 500(e)(4), (See page 6 of the instructions.)			_

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

34a Does the organization receive any financial aid or assistance from a governmental agency?

If you answered "Yes" to either 34a or bi please explain using an attached statement

Proc 75-50 1975-2 C B 587 covering racial nondiscrimination? If "No " attach an explanation

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev

b Has the organization's right to such aid ever been revoked or suspended?

Schedule A (Form 990 or 900-EZ) 2001

34a

34b

X

X

, , ,	litures by Electi	BASICS & BEY ng Public Charities gible organization th	(See pa	ge 9 d	of the instructions)	
Check a If the organization belo		<del>'</del>	<del></del>		cked "a" and "limited cor	ntrol® provisions apply
Limits on	Lobbying Expe	enditures	<u>~</u>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence				36		
37 Total lobbying expenditures to influence	•		<u> </u>	37		
38 Total lobbying expenditures (add lines 3		an cot loopying,	T	38		<del></del>
39 Other exempt purpose expenditures	oo and or ,		-  -	39		<del></del> _
40 Total exempt purpose expenditures (ad	d lines 38 and 39)		T	40	· · <del>- ·</del> · · · ·	
41 Lobbying nontaxable amount. Enter the	•	lowing table-	F			
If the amount on line 40 is-		nontaxable amount is-				
Not over \$500 000	20% of the ame		ור			
Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess over \$5	500 000			
Over \$1 000,000 but not over \$1 500 0	00 \$175 000 plus	10% of the excess over \$	1,000,000	41		
Over \$1 500,000 but not over \$17 000	000 \$225 000 plus	5% of the excess over \$1	500,000			
Over \$17 000 000	\$1,000,000		JĮ.			
42 Grassroots nontaxable amount (enter 2	5% of line 41)		Ĺ	42		
43 Subtract line 42 from line 36 Enter -0-	of line 42 is more that	n line 36	L	43		
44 Subtract line 41 from line 38 Enter -0	if line 41 is more that	n line 38	L	44		
				1		
Caution If there is an amount on either						<u> </u>
	4-Year Avera	agıng Period Under	Section	501(r	1)	
(Some organizations	that made a section	501(h) election do not ha	ve to comp	lete all	of the five columns below	w
See the ins	structions for lines 45	5 through 50 on page 11 o	of the instruc	ctions)		
		Lobbying Expe	nditures D	uring 4	-Year Averaging Period	d
Calendar year (or	(a)	(b)	(c)		(d)	(e)
fiscal year beginning in)	2001	2000	1999	9_	1998	Total
45 Lobbying nontaxable amount						
46 Lobbying ceiling amount (150% of						
line 45(e))						
47 Total lobbying expenditures						
48 Grassroots nontaxable amount						
49 Grassroots ceiling amount (150% of		_				
line 48(e))						
50 Grassroots lobbying expenditures					. <b>↓</b>	
	-	Public Charities	loto Bort	\/I ^\	(Coo nago 12 of th	ne instr) N/A
		ns that did not comp			(See page 12 of ii	M/A
During the year, did the organization attempt to influence public grants are a less		- · · · · · · · · · · · · · · · · · · ·	-	ану	Yes No	Amount
attempt to influence public opinion on a leg  a Volunteers	islauve matter or rele	erengum, unough die use	OI .		<del></del>	<del></del>
	mnonoton in super	ness concreted on lines a th	brough b		<del>-  </del>	
<ul> <li>b Paid staff or management (include conclude)</li> <li>c Media advertisements</li> </ul>	лирепзацоп ін ехреі	uses tehoried ou mies c n	mougn n )			
d Mailings to members, legislators or t	he nublic					
e Publications, or published or broadca	•					
f Grants to other organizations for lobb						
g Direct contact with legislators, their si		imale or a legislative body	v		<del> </del>	
h Rallies demonstrations seminars, or	-		=		<del>                                     </del>	
Total lobbying expenditures (add line)	•	o locaros or any other m			<del> </del>	
If "Yes" to any of the above also atta		o a detailed description of	f the lobbyin	na activ	ities	

DAA

Schedule :		990 or 990-EZ) 2001		ATION BASICS & B	<del></del>	<u>0868915</u>	P	age 6					
Part V				ansfers To and Transaction page 12 of the instruction	ns and Relationships With	Noncharitable							
51 Did					with any other organization describe	d in section							
	•		-		relating to political organizations?								
				noncharitable exempt organization			Yes	No					
(1)	Cash					51a(ı)		X					
(11)		assets				a(II)	$\top$	X					
• •	er transa						<del>                                     </del>	<del>                                     </del>					
(1)			s with a non	charitable exempt organization		b(i)	}	х					
(11)		•		e exempt organization		b(n)	<del>                                     </del>	x					
(m)		of facilities, equipment		· •		b(m)	<del> </del>	X					
(iv)		or tadinaes, equipment oursement arrangemen		3300		b(iv)		X					
(v)		or loan guarantees	11.3			b(v)	<del> </del>	X					
(VI)		=	mambarehin	or fundraising solicitations		b(vi)	<del>                                     </del>	X					
			•	ther assets, or paid employees		, c	†	X					
	_		_	• • •	mn (b) should always show the fair ri			<u> </u>					
		·			zation received less than fair market								
_		•	•	olumn (d) the value of the goods, o		value in any							
			snow in Co	·· · · · · · · · · · · · · · · · · · ·									
(a)		(b)		(c)	(c	•							
N/A	10	Amount involved	Name o	f nonchantable exempt organization	Description of transfers transact	nons and sharing arrang	ments						
						<del></del>		——					
		. <u>-</u>				<del> </del>		—					
		<del></del>				<del></del>							
·						<del></del>							
						<del></del>							
				<del></del>									
-		-											
				<u> </u>									
						<del></del>							
		<u> </u>											
		<u> </u>			<u> </u>								
	_	=	-	d with or related to one or more to	· •		_	3					
				than section 501(c)(3)) or in section	n 527?	▶ 📙 `	res 🏻	No					
b If Y	es, con	plete the following sc	nedule										
		(a)		(b)	(	c)							
		lame of organization		Type of organization	Description of	f relationship							
<u> N/A</u>	<u> </u>												
					_								
		<del></del>											
				<u> </u>									
		_											
_													
	_												

Form 4562

(Rev March 2002) Department of the Treasury Internal Revenue Service

# **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions

Attach to your tax return

OMB No 1545 0172

2001

Attachment Sequence No 67

Name(s) shown on return

EDUCATION BASICS & BEYOND, INC. THE BRIGHTEN SCHOOL

Identifying number 33-0868915

Business or activity to which this form relates

I	NDIRECT DEPRECIATI	ON											
Pa	art I Election To Expen	se Certain Tan	gible Property	Under	Section	179							
	Note. If you have a	ny listed prope	rty, complete P	a <u>rt V b</u>	efore you	com	plete Pa	art I					
1	Maximum amount See page 2 of t	he instructions for a	a higher limit for cer	təin busi	nesses				1_	\$24 000			
2	Total cost of section 179 property	olaced in service (s	ee page 3 of the ins	tructions	3)				2				
3	Threshold cost of section 179 prop	erty before reduction	on in limitation						3	\$200,000			
4	Reduction in limitation. Subtract lin	e 3 from line 2. If z	ero or less enter -0	-					4				
5_	Dollar limitation for tax year. Subtract lin	e 4 from line 1 If zero	orless enter -0 If ma	med filing	separately si	ee pg 3	of the instr		5				
	(a) Description	of property		(b) Cost	t (business us	e only)	(c) E	Elected cos	it				
6													
					<del></del> ,								
7	Listed property. Enter the amount	from line 29			Į	7			. —				
8	Total elected cost of section 179 p	roperty Add amour	nts in column (c), lin	es 6 and	17				8				
9	Tentative deduction. Enter the small	atler of line 5 or line	8						9	<u> </u>			
10	Carryover of disallowed deduction	from line 13 of your	2000 Form 4562						10				
11	Business income limitation. Enter t	he smaller of busin	ess income (not les	s than z	ero) or line 5	ō (see ıı	nstruction	s)	11				
12	Section 179 expense deduction A	dd lines 9 and 10, b	out do not enter mor	e than lu	ne 11				12				
13	Carryover of disallowed deduction to 2002 Add lines 9 and 10, less line 12												
	ote Do not use Part II or Part III below for listed property. Instead, use Part V												
Pa	Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property )												
14	Special depreciation allowance for certa	in property (other than	listed property) acquire	ed after Se	ept 10 2001 (	see pg	3 of the ins	tr)	14				
15	Property subject to section 168(f)(		15										
16_	Other depreciation (including ACRS) (see page 4 of the instructions)  art III MACRS Depreciation (Do not include listed property ) (See page 4 of the instructions )												
Pa	art III MACRS Depreciati	on (Do not inc	lude listed prop	erty)(	See page	4 of	the inst	ructions	<u>s)</u>				
	Section A												
17	MACRS deductions for assets placed in service in tax years beginning before 2001  17 1,726												
18	If you are electing under section 16	)											
	year into one or more general asse					·····		<b>&gt;</b>	}				
	Section B-A		ervice During 2001	1		e Gene	ral Depre	ciation S	System	<u> </u>			
	(a) Classification of property	(b) Month and year placed in service	(c) Rasis for depreci (business/investmei only-see instruction	nt use	(d) Recovery period	(e) Coi	rvention	(f) Meth	od	(g) Depreciation deduction			
19a	3-year property												
þ_	5-year property			515	<u> 5.0</u>		IY Y	200		103			
			1	<u>,591</u>	7.0	F	ΙΥ	200	DB	227			
	10-year property												
	15-year property						<del></del>	<del></del>					
	uo jour proparti												
<u>g</u>				1									
h	25-year property				25 yrs		<del></del>	S/L					
"	Residential rental	<del>_</del>			27 5 yrs		<u>им</u>	S/L					
	Residential rental property				27 5 yrs 27 5 yrs		им	S/L S/L					
''	Residential rental property Nonresidential real				27 5 yrs	N	им им	S/L S/L S/L					
1	Residential rental property Nonresidential real property				27 5 yrs 27 5 yrs 39 yrs	P	MM MM	S/L S/L S/L S/L					
I	Residential rental property  Nonresidential real property  Section C-As	sets Placed in Ser	vice During 2001 T	ax Year	27 5 yrs 27 5 yrs 39 yrs	P	MM MM	S/L S/L S/L S/L	Syste	m			
1 20a	Residential rental property  Nonresidential real property  Section C-As Class life	sets Placed in Ser	vice During 2001 T	ax Year	27 5 yrs 27 5 yrs 39 yrs Using the	P	MM MM	S/L S/L S/L S/L reciation S/L	Syste	m			
1 20a b	Residential rental property  Nonresidential real property  Section C-As: Class life 12-year	sets Placed in Ser	vice During 2001 T	ax Year	27 5 yrs 27 5 yrs 39 yrs Using the	Alterna	MM  MM  tive Depi	S/L S/L S/L S/L reciation S/L S/L	Syste	m			
1 20a b	Residential rental property  Nonresidential real property  Section C-As: Class life 12-year 40-year			ax Year	27 5 yrs 27 5 yrs 39 yrs Using the	Alterna	MM MM	S/L S/L S/L S/L reciation S/L	Syste	m			
ι 20a b c	Residential rental property Nonresidential real property Section C-As: Class life 12-year 40-year art IV Summary (See page	ge 6 of the instr		ax Year	27 5 yrs 27 5 yrs 39 yrs Using the	Alterna	MM  MM  tive Depi	S/L S/L S/L S/L reciation S/L S/L	Syste	m			
l 20a b c Pa	Residential rental property  Nonresidential real property  Section C-As: Class life 12-year 40-year art IV Summary (See page Listed property Enter amount from	ge 6 of the instr	ructions)		27 5 yrs 27 5 yrs 39 yrs Using the A 12 yrs 40 yrs	Alterna	MM  MM  tive Depi	S/L S/L S/L S/L reciation S/L S/L	Syste	m			
ι 20a b c	Residential rental property  Nonresidential real property  Section C-As: Class life 12-year 40-year art IV Summary (See page Listed property Enter amount from Total Add amounts from line 12, 1	ge 6 of the instr line 28 ines 14 through 17,	lines 19 and 20 in 0	column (	27 5 yrs 27 5 yrs 39 yrs  Using the 12 yrs 40 yrs	Alterna	MM  MM  tive Depi	S/L S/L S/L S/L reciation S/L S/L	Syste				
1 b c Pa 21	Residential rental property  Nonresidential real property  Section C-As: Class life 12-year 40-year art IV Summary (See page Listed property Enter amount from Total Add amounts from line 12, I Enter here and on the appropriate	ge 6 of the instr line 28 lines 14 through 17, lines of your return	lines 19 and 20 in o	column (	27 5 yrs 27 5 yrs 39 yrs  Using the 12 yrs 40 yrs	Alterna	MM  MM  tive Depi	S/L S/L S/L S/L reciation S/L S/L	Syste	m 2,056			
l 20a b c Pa	Residential rental property  Nonresidential real property  Section C-As: Class life 12-year 40-year art IV Summary (See page Listed property Enter amount from Total Add amounts from line 12, 1	ge 6 of the instr line 28 ines 14 through 17, lines of your return d in service during	lines 19 and 20 in of Partnerships and Sthe current year	column (	27 5 yrs 27 5 yrs 39 yrs  Using the 12 yrs 40 yrs	Alterna	MM  MM  tive Depi	S/L S/L S/L S/L reciation S/L S/L	Syste				

## EDUCATION BASICS & BEYOND, INC. 33-0868915

For	n 4562 (2)	001) (Rev 3-2 <u>002)</u>	)				_					_				Page :
Ρ	art V	Listed Property use Note For any vi 24a, 24b, column	ed for enterta	inment, re	ecreation the state	on, or	amuse	ement	) eductina	lease e	•			ompute	ers, an	
Sec	tion A-De	preciation and Of									enger au	ıtomobil	es)			
24a	Do you h	ave evidence to supp	ort the business/in	vestment use	claimed?		Yes	No	24b	If "Yes,	is the i	evidence	written	,	Yes	No
	(a)	(b)	(c)	(d	1		(e)		(f)		(g)	1	(h)		(	1)
	oe of prop	Date placed in	Busn /invest	Cost or	other		s for depr		Recover	′ 1	ethod/	-	Deprecia		Ele	cled
(lis	t vehicles first)	service	use percentage	bas	SIS	(bus	iness/inv use on		репод	Co	nvention	-	deduction	on		on 179 ost
25		depreciation allow		roperty acqu	iired afte	Septe			•			1				
	and use	d more than 50% i	in a qualified bu:	siness use (:	see page	7 of the	e instruc	tions)			2	5				
26		used more than 5							s)						·	
						T			Γ΄							
			%									i				
				· <del></del>												
			J %	]		1										
27	Property	used 50% or less	in a qualified be	isiness use	(see pag	e 7 of ti	he instru	ictions)							<u> </u>	
					1										I	
			0/	ļ						S/I						
				i											1	
		•	۰,							S/t		- 1			j	
28	Add am	ounts in column (h	), lines 25 throu	gh 27 Enter	here and	on line	21 pag	ne 1	•		2	8			}	
29		ounts in column (i)	•	-								•		29		
		,,	•	Sec	ction B-I	nforma	tion on	Use of \	Vehicles							
Соп	plete this	section for vehicle	s used by a sole	proprietor,	partner,	or other	"more t	han 5%	owner."	or relate	ed perso	n				
		ehicles to your emplo			-						-		hose vehic	cles		
30		siness/investment			(2			b)	Γ .	:)	ſ	d)	T .	e)	(	f)
	the year	(do not include co	ommuting miles-		Vehi	-	Veh	icle 2	Vehi	-	1 '	icle 4		icle 5	Vehicle 6	
	see pag	e 2 of the instruction	ons)						1	_	T		1	_		
31		mmuting miles driv	•	ear	_						1	_				
32		er personal (noncomn					1				1					
33		les driven during ti									1					
		s 30 through 32	•				ţ				Į.				į	
34	Was the	vehide available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use dun	ng off-duty hours?	•								ļ		1 -			
35	Was the	vehicle used prim	ianly by a													
		an 5% owner or rel					1				1	1		}	f	
36		r vehicle available for	•				1				Ì	1	1	1	i	
			Section C-Que	stions for F	molovei	s Who	Provide	· Vehicle	es for U	se by T	heır Em	plovees	:	•		
Ansv	wer these	questions to deter								-						
		than 5% owners or	•							•						
	_			<u> </u>											Yes	No
37	Do you m	aintain a written polic	y statement that pr	ohibits all pers	sonal use o	of vehicle	s includi	ng commi	uting by y	our empl	oyees?					
38	Do you	maintain a written j	policy statement	that prohibi	ts persor	al use	of vehicl	es exce	pt comm	uting, b	y your e	employe	es?			
	See pag	e 8 of the instructi	ons for vehicles	used by cor	porate of	ficers, o	directors	, or 1% c	or more o	wners						ļ
39	Do you	treat all use of vehi	icles by employe	es as perso	nal use?											
40	Do you	provide more than	five vehicles to	your employ	ees, obta	ın ınfor	mation f	rom youi	r employ	ees abo	out					
	the use	of the vehicles, an	d retain the infor	mation rece	ived?			-								
41	Do you	meet the requireme	ents concerning	qualified au	tomobile	demon	stration	use? (Se	e page 9	of the	instruct	ions )				
	_	your answer to 37	-	•				•	. •			•				
Pi	art VI	Amortization			_			-			<u>-</u>					
			_			T						(e)				
		(a)		(b)				(C)		(d		Amortiz		A	(f)	la.
		Description of costs	•	Date amo begi				rtizable nount	Í	Cor secti		percen			ortization l his year	
42	Amortiza	ation of costs that I	begins during vo	บr 2001 tax	year (see	page 9	of the	nstructio	ns)		•					
											]					
43	Amortiza	ation of costs that I	began before yo	ur 2001 tax	year								43			300
АЛ	Total A	dd amounts in coli	imn (f). See nac	a Q of the in	etaiction	e for wh	ore to re	enort.					AA			300

EDUCATION EDUCATION BASICS & BEYOND, INC 33-0868915 Federal Statements

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

Description	Tota <u>Expens</u>		Program Service	Mgt & General	Fund- Raising
	\$	\$		\$	\$
EXPENSES					
BANK CHARGES		91		91	
BOOKS	2,	644	2,644		
CLEANING & MAINTENANCE	1,	897	1,650	190	57
FIELD TRIPS	4	081	4,081		
FUND RAISING	8	821			8,821
INSURANCE	4	948		4,948	
LICENSE FEE	15	831	15,831		
LOCAL TAX		159		159	
MATERIALS	12,	876	12,876		
OFFICE SUPPLIES	3	541		3,541	
PROMOTION	10,	183	10,183		
REPAIR & MAINTENANCE	3,	,500	1,750	1,750	
SALES TAX		9		9	
STORAGE	1,	394		697	697
TELEPHONE	1,	516	758	758	
TEMP SERVICES		145		145	
TRAINING	3	446	3,446		<u></u>
TOTAL	\$ 75	082 \$	53,219	\$ 12,288	\$ 9,575

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## Statement 2 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of <u>Year</u>
ORGANIZATION COSTS NET OF AMORT	\$ 1,125	\$ 825
TOTAL	\$ 1,125	\$ 825

## Statement 3 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year	
LOANS	\$16,988	\$	11,987
TOTAL	\$ 16,988	\$	11,987

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## Statement 4 - Schedule A, Part III, Question 2d - Payment of Compensation

SALARIES PAID TO OFFICERS AS REPORTED ON 990

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Schedule A, Part V, Line 31 - Publication of Nondiscriminatory Policy

NEWSPAPER NOTICE PUBLISHED 11/29/01 DESCRIBING NON-DISCRIMINATORY POLICY