partment of the Treasury

ternal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung The organization may have to use a copy of this return to satisfy state reporting requirements.

benefit trust or private foundation)

OMB No 1545-0047

Open to Public Inspection

	rui uie	2003 Calendar year, or tax year beginning and ending		· · · · · · · · · · · · · · · · · · ·
\Rightarrow	Check if applicable	, Flease	loyer identif	ication number
440	Addre	USB IRS	F 4700	214
. ₹	chang Name	print of DENSEN FAMILY FOUNDATION 9	<u>5-4708</u>	
X	chang	See Number and Street (of P.O. DOX II main is not delivered to street address)	phone numb 818) 9	
E	return	Instruc-		88-4053 X Cash Accrual
÷	return Amend	tions City or town, state or country, and 21P+4 LA CANADA, CA 91011	Other (specify)	X Cash Accrual
3	return Applic	Section 501(c)(3) organizations and 4047(a)(1) nonexempt charitable trusts		527 omanizations
	lpendır	must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group return for		Yes X No
G	Waheita	:►N/A H(b) If "Yes," enter number of		L 168 LALINU
<u>.</u>		ation type (check only one) X 501(c) (3) (insert no) 4947(a)(1) or 527 H(c) Are all affiliates included	-	Yes No
ĸ		if the experiential's group recent are parally not may then 505 000. The (If "No," attach a list.)		
		tion need not file a return with the IRS; but if the organization received a Form 990 Package H(d) is this a separate return ganization covered by a	i filed by an c i group ruling	i? Yes X No
		ail, it should file a return without financial data. Some states require a complete return.		100 (22) 110
_		M Check ► if the or		not required to attach
L	Gross re	ceipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 1,488,565 . Sch. B (Form 990, 990-		
_	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances	·	·
	1	Contributions, gifts, grants, and similar amounts received:		
	a	Direct public support 1a 1,488,500.	1	
	b	Indirect public support 1b		
- Critica	C	Government contributions (grants) 1c		
	d	Total (add lines 1a through 1c) (cash \$ 1,488,500 . noncash \$)	1d	1,488,500.
V	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	
N.	3	Membership dues and assessments	3	
N.	4	Interest on savings and temporary cash investments	4	65.
	5	Dividends and interest from securities	5	
=	6 a	Gross rents 6a		
	b	Less; rental expenses 6b		
<u>U</u>	C	Net rental income or (loss) (subtract line 6b from line 6a)	6c	
27 30 a	7	Other investment income (describe)	7	-
Revenue	8 a	Gross amount from sales of assets other (A) Securities (B) Other		
3 8		than inventory 8a		
) č	Ь	Less: cost or other basis and sales expenses 8b	İ	
		Gajn or (Joss) (attach schedule) 8c	{	
		Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	
	9	Special events and activities (attach schedule). If any amount is from gaming, check here		
->	a	Gross revenue (portificiating \$ of contributions		
₩	MAY	Gross revenue (not including \$ of contributions of contributions	1	
	_	Less. direct expenses other than fundraising expenses 96	1	
_	0.0	Der income of (loss) from special events (subtract line 9b from line 9a)	9c	
		Gross sales of inventory, less returns and allowances		
	Ь	Less: cost of goods sold		
	6	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	
	11	Other revenue (from Part VII, line 103)	11	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		1,488,565.
	13	Program services (from line 44, column (B))		1,475,405.
Expenses	14	Management and general (from line 44, column (C))	14	1,133.
ě	15	Fundraising (from line 44, column (D))	15	
EX	16	Payments to affiliates (attach schedule)	16	
	17	Total expenses (add lines 16 and 44, column (A))	· ·	1,476,538.
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	12,027.
Net	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	21,262.
Ž	20	Other changes in net assets or fund balances (attach explanation)	20	0.
_	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	33,289.
3230 12-1	001 17-03	LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2003)

613-14

95-4708314 (D) Fundraising 0

JENSEN FAMILY FOUNDATION Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) Page 2 Part II **Functional Expenses** and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (B) Program services Do not include amounts reported on line (C) Management (A) Total and general 6b, 8b, 9b, 10b, or 16 of Part I. 22 Grants and allocations (attach schedule) 1,475,405.STATEMENT 3 1,475,405. cash \$ 1,475,405, noncash \$ 23 Specific assistance to individuals (attach schedule) 23 Benefits paid to or for members (attach schedule) 24 0 0 Compensation of officers, directors, etc. 25 25 Other salaries and wages 26 Pension plan contributions 27 27 Other employee benefits 28 Payroll taxes ... 29 29 Professional fundraising fees 30 930. 930 Accounting fees 31 32 Legal fees 32 Supplies 33 34 Telephone 35 Postage and shipping . 35 36 Occupancy 37 Equipment rental and maintenance 37 Printing and publications 38 39 39 Travel Conferences, conventions, and meetings 40 41 Interest 42 Depreciation, depletion, etc. (attach schedule) 42 Other expenses not covered above (itemize): a TAXES & LICENSES 35 35 43a 168. 168 **b BANK CHARGES** 43b 43c 43d 43e Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15 44 1,476,538. 1,475,405. 1,133. Joint Costs. Check if you are following SOP 98-2. Yes X No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? If "Yes," enter (i) the aggregate amount of these joint costs \$ ______; (ii) the amount allocated to Program services \$ (iii) the amount allocated to Management and general \$; and (iv) the amount allocated to Fundraising \$ Part III Statement of Program Service Accomplishments What is the organization's primary exempt purpose? ► SEE STATEMENT Program Service Expenses
(Required for 501(c)(3) and
(4) orgs., and 4947(a)(1)
trusts, but optional for others) All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt chantable trusts must also enter the amount of grants and a LRH MASTERPIECE EDITIONS - AN EXEMPT ORGANIZATION 347,500. (Grants and allocations \$ **b** INTERNATIONAL ASSOCIATION OF SCIENTOLOGIST - AN EXEMPT ORGANIZATION 286,002. (Grants and allocations \$ c CHURCH OF SCIENTOLOGY RELIGIOUS TRUST - AN EXEMPT ORGANIZATION 172,000. (Grants and allocations \$ d CHURCH OF SCIENTOLOGY FSO - AN EXEMPT ORGANIZATION 171,161. (Grants and allocations \$ 498,742. • Other program services (attach schedule) STATEMENT 4 (Grants and allocations \$ 475,405. Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶

D . 10/	D - I	OI 4-
Uart IV	Kalanca	SHOOTE
railiv	Balance	Olicera

Note:		re required, attached schedules and amounts w uld be for end-of-year amounts only.	ithin the description column	(A) Beginning of year		(B) End of year
	45	Cook and interest begins			45	
	45 46	Cash - non-interest-bearing Savings and temporary cash investments	··· ·	21,262.	46	33,289.
		·	· · · · · · · · · · · · · · · · · · ·			-
	47 a	Accounts receivable	478			
	b	Less; allowance for doubtful accounts	47b		47c	
	48 a	Pledges receivable	48a			
	TO a	Less: allowance for doubtful accounts	48b		48c	
	49	Grants receivable	,,,,,		49	-
	50	Receivables from officers, directors, trustees,				
		and key employees .			50	
ets	51 a	Other notes and loans receivable	51a			
Assets	ь	Less: allowance for doubtful accounts	51b		51c	
,	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges			53	
	54	Investments - securities	Cost FMV		54	
	55 a	Investments - land, buildings, and				
		equipment basis	55a			
				j		
	b	Less: accumulated depreciation	55b		55c	
	56	Investments - other	, , · <u> }</u>		56	
		Land, buildings, and equipment basis	57a		1	•
	b	Less: accumulated depreciation	57b		57c	·-·-
	58	Other assets (describe			58	······································
		Tabel access (add loose 45 through 50) (must equal	Uno 74)	21,262.	59	33,289.
	59 60	Total assets (add lines 45 through 58) (must equal Accounts payable and accrued expenses	inie 74)	21,202.	60	33,203.
	61	Grants payable			61	
	62	Deferred revenue			62	
es	63	Loans from officers, directors, trustees, and key em	plovees		63	
Liabilities		a Tax-exempt bond liabilities			64a	
lat		Mortgages and other notes payable			64b	
-	65	Other liabilities (describe)		65	
		•				
	66	Total liabilities (add lines 60 through 65)		0.	66	0.
	Organ	nizations that follow SFAS 117, check here	and complete lines 67 through			
တ္တ		69 and lines 73 and 74.			67	
ü	67	Unrestricted			68	
3afa	68 69	Temporarily restricted			69	
שַ		nizations that do not follow SFAS 117, check here	X and complete lines		03	
Fu	Vigal	70 through 74.	and complete unes			
ö	70	Capital stock, trust principal, or current funds		0.	70	0.
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, and equ		0.	71	0.
Ass	72	Retained earnings, endowment, accumulated incom		21,262.	-	33,289.
é	73	Total net assets or fund balances (add lines 67 three				
-		column (A) must equal line 19; column (B) must equ	-	21,262.	73	33,289.
	74	Total liabilities and net assets / fund balances (ad		21,262.	74	33,289.

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	990 (2003) JENSEN FAMILY FOUNDA	TION			95-47083	14 Page 4
Pa	rt IV-A Reconciliation of Revenue per Audited		t IV-B Recond	iliation of Exp	enses per A	udited
· · · · · · · · · · · · · · · · · · ·	Financial Statements with Revenue per			al Statements	with Expen	ses per
_	Return Total revenue, gains, and other support	a	Return Total expenses and lo	neses ner		
	per audited financial statements N/A		audited financial state	ements	▶ a	N/A
ь	Amounts included on line a but not on	b	Amounts included on line 17, Form 990:	line a but not on		
	line 12, Form 990:	(1)	Donated services			
(1)	Net unrealized gains	` '	and use of facilities .	\$		
	on investments . \$	(2)	Prior year adjustment	ts	1 1	
(2)	Donated services		reported on line 20,			
	and use of facilities \$		Form 990	.\$		
(3)	Recoveries of prior	(3)	Losses reported on			
	year grants \$		line 20, Form 990	.\$		
(4)	Other (specify):	(4)	Other (specify):			
_	<u> </u>	-		\$.	
	Add amounts on lines (1) through (4)	-	Add amounts on lines	s (1) through (4)	b c	
-	Line a minus line b	_	Line a minus line b	June 17 Form		
	Amounts included on line 12, Form 990 but not on line a:	d	Amounts included on 990 but not on line a			
(1)	Investment expenses	(1)	Investment expenses			
-	not included on		not included on			
	line 6b, Form 990 \$		line 6b, Form 990	\$		
(2)	Other (specify):	(2)	Other (specify):			
	<u> </u>	_		_\$		
	Add amounts on lines (1) and (2)	4	Add amounts on lines		▶ d	
е	Total revenue per line 12, Form 990	e	Total expenses per lin	ne 17, Form 990		
[5 _	(line c plus line d) e e rt V List of Officers, Directors, Trustees, and Key	Emal	(line c plus line d)	a aven if not compar	e e	
Pa	rt V List of Officers, Directors, Trustees, and Key		tle and average hours			(F) Expense
	(A) Name and address	(C) p	er week devoted to position	(If not paid, enter	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SAI	LLY JENSEN	SEC	RETARY/CFC			•
42	45 MESA VISTA DR.	.				
LA	CANADA, CA 91011	10		0.	0.	0.
<u>CR</u>	AIG JENSEN	CEO	1			
	45 MESA VISTA DR.			_	_	
	CANADA, CA 91011	10		0.	0.	0.
	LAND HAWKINS	.				
	51 HOLLYWOOD BLVD.				1	
	LLYWOOD, CA 90028	AS	NECESSARY	0.	0.	0.
	SE COHEE			1		
	11 N. NEW HAMPSHIRE	20	MEGEGGADA		1	
	S ANGELES, CA 90027	AS	<u>NECESSARY</u>	0.	0.	0.
	SLIE BROWNING 31 HOLLYWOOD BLVD.					
	LLYWOOD, CA 90028	λC	NECESSARY	0.	0.	0.
1101	DELHOOD, CA JOVAO	LIO.	HECHODUNI	<u> </u>	"	<u> </u>
				1		
				1		
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				1		1
				l		
75 (Did any officer director tructor or key ampleyee receive consecute comme	ation of a	nore than \$100 000 6-	m vour organization	and all coloted	
	Did any officer, director, trustee, or key employee receive aggregate compens: organizations, of which more than \$10,000 was provided by the related organ				X No	
	organizations, or without more than wite,0000 was provided by the related organi		100, atmost soneut	[] 100 [<u> </u>	Form 990 (2003)

_		<u>-4708314</u>		Page 5
Pa	rt VI Other Information	 	Yes	
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	↓	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	. 77		X
	If "Yes," attach a conformed copy of the changes.	1		l
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	. 78a		X
b 79	If "Yes," has it filed a tax return on Form 990-T for this year? N/2 Was there a liquidation, description, or substantial contraction during the year?		 	X
10	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	 	
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership,			
•••	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		х
b	If "Yes," enter the name of the organization			
		nexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a	o.		
b	Did the organization file Form 1120-POL for this year?	81b		X
82 a	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		_X_
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.)			
83 a	• • • • • • • • • • • • • • • • • • • •			
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	A 83b		
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	1	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			į
	tax deductible? N/Z		1	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?			
Þ	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for prox	y tax		
_	owed for the prior year.			I
C	Dues, assessments, and similar amounts from members 85c N/Z			
d	Section 162(e) lobbying and political expenditures 85d N/Z			ı
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/F			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/P			
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?			
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate allocable to nondeductible lobbying and political expenditures for the following tax year? N/ \mathbb{R}	I .		
B6			 	
h	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 86a N/A 86b N/A		1 1	
B7	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A			
ь	Gross income from other sources. (Do not net amounts due or paid to other sources	*		
•	against amounts due or received from them.)	<u>.</u>		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership.	-	1 1	-
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?	İ		
	If "Yes," complete Part IX	88		\mathbf{X}_{-}
39 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911▶	0.]	
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If "Yes," attach a statement explaining each transaction	89b		<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			0.
đ	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
00 a	List the states with which a copy of this return is filed CALIFORNIA			
b	Number of employees employed in the pay period that includes March 12, 2003			0
)1	The books are in care of ► JENSEN FAMILY FOUNDATION Telephone no. ► 81	<u>.8-988-4</u>	053	
	Located at ► 4245 MESA VISTA DR., LA CANADA, CA ZIP	+4 ▶ <u>9101</u>	1	
			_	_
2	Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here		►L	
23041	and enter the amount of tax-exempt interest received or accrued during the tax year	<u>N/</u>		
23041 2-17-	03	Forr	n 990 (2003)

		<u></u>	S (See page 33 of the instruc	,110115.)		
Note: En	ter gross amounts unless otherw	rise ——	elated business income		d by section 512, 513, or 514	(E)
indicated	<i>i</i> .	(A) Busines	(B)	(C) Exclu-	(D)	Related or exempt
93 Progr	ram service revenue:	code	S Amount	sion	Amount	function income
_					<u>.</u>	
. —						1
,						
e						 -
· —	care/Medicaid payments			1		
	· ·		,			
•	and contracts from government ages	ncies	-	 		
	bership dues and assessments		65.	 		
	est on savings and temporary cash in	ivestments	05.	 		
	ends and interest from securities	.		├──├		
	ental income or (loss) from real estat	te:		 		<u> </u>
	financed property			\vdash		
b not d	ebt-financed property					-
98 Net re	ental income or (loss) from personal	property .		 		
99 Other	investment income			 		
100 Gain	or (loss) from sales of assets					Ì
other	than inventory .					
101 Net in	ncome or (loss) from special events					
102 Gross	s profit or (loss) from sales of invent	ory				
103 Other	revenue:					
a						
b						
c						
d				<u> </u>		
е						
104 Subto	otal (add columns (B), (D), and (E))		65.		0.	. 0.
105 Total	(add line 104, columns (B), (D), and	I (E))			>	·65.
Note: Line	105 plus line 1d, Part I, should	equal the amount on line	e 12, Part I.			
Part VI	Relationship of Activ	ities to the Accom	plishment of Exemp	t Purp	oses (See page 34 of th	e instructions.)
Line No.						
LING IN.	Explain how each activity for whic	h income is reported in col		d importa	ntly to the accomplishmen	
▼			umn (E) of Part VII contributed	d importa	ntly to the accomplishmen	
	Explain how each activity for whic exempt purposes (other than by p		umn (E) of Part VII contributed	d importa	ntly to the accomplishmen	
	Explain how each activity for whic		umn (E) of Part VII contributed	d importa	ntly to the accomplishmen	
	Explain how each activity for whic exempt purposes (other than by p		umn (E) of Part VII contributed	d importa	ntly to the accomplishmen	
	Explain how each activity for whic exempt purposes (other than by p		umn (E) of Part VII contributed	d importal	ntly to the accomplishmen	
	Explain how each activity for whice exempt purposes (other than by poly)	providing funds for such pu	umn (E) of Part VII contributed rposes).			t of the organization's
Part IX	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regardir	providing funds for such pu	umn (E) of Part VII contributed rposes). aries and Disregard		ities (See page 34 of the	t of the organization's e instructions.)
Part IX	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regarding (A) ddress, and EIN of corporation,	ng Taxable Subsidi	umn (E) of Part VII contributed rposes). aries and Disregard		i ties (See page 34 of the	e instructions.) (E) End-of-year
Part IX	Explain how each activity for whice exempt purposes (other than by post of the	ng Taxable Subsidi	umn (E) of Part VII contributed rposes). aries and Disregard		ities (See page 34 of the	t of the organization's e instructions.)
Part IX	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regarding (A) ddress, and EIN of corporation, pership, or disregarded entity	ng Taxable Subsidir (B) Percentage of ownership interest %	umn (E) of Part VII contributed rposes). aries and Disregard		ities (See page 34 of the	e instructions.) (E) End-of-year
Part IX	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regarding (A) ddress, and EIN of corporation,	ng Taxable Subsidirections of the pure state of	umn (E) of Part VII contributed rposes). aries and Disregard		ities (See page 34 of the	e instructions.) (E) End-of-year
Part IX	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regarding (A) ddress, and EIN of corporation, pership, or disregarded entity	ng Taxable Subsidirections of the such pure of the subsidirection	umn (E) of Part VII contributed rposes). aries and Disregard		ities (See page 34 of the	e instructions.) (E) End-of-year
Part IX Name, a	Explain how each activity for whice exempt purposes (other than by post of the	ng Taxable Subsidirection (B) Percentage of ownership interest	umn (E) of Part VII contributed rposes). aries and Disregard (C) Nature of activities	ed Ent	i ties (See page 34 of the (D) Total income	e instructions.) End-of-year assets
Part IX Name, a partr	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regarding (A) ddress, and EIN of corporation, pership, or disregarded entity N/A Information Regarding	roviding funds for such purious for such purious funds for such purious fo	umn (E) of Part VII contributed rposes). aries and Disregard (C) Nature of activities	ed Ent	ities (See page 34 of the (D) Total income	e instructions.) End-of-year assets ge 34 of the instructions.)
Part IX Name, a partr	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regarding (A) ddress, and EIN of corporation, pership, or disregarded entity N/A Information Regarding the year, recommendation recognization, during the year, recommendation recognization, during the year, recommendation recognization, during the year, recommendation recognization.	roviding funds for such pure the providing funds for such pure the	aries and Disregard (C) Nature of activities ciated with Personal indirectly, to pay premiums on	ed Ent	ities (See page 34 of the (D) Total income	e instructions.) End-of-year assets ge 34 of the instructions.) Yes X No
Part IX Name, a partr Part X (a) Did (b) Did (c)	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regarding (A) N/A Information Regarding (A) N/A Information Regarding (A) Information	Percentage of ownership interest % % % % g Transfers Associately or individually a premiums, directly or individually or individually and indi	aries and Disregard (C) Nature of activities ciated with Personal ndirectly, to pay premiums on	ed Ent	ities (See page 34 of the (D) Total income	e instructions.) End-of-year assets ge 34 of the instructions.)
Part IX Name, a partr Part X (a) Did (b) Did (b) Note: If	Explain how each activity for whice exempt purposes (other than by policy) N/A Information Regarding (A) ddress, and EIN of corporation, pership, or disregarded entity N/A Information Regarding the organization, during the year, pay "yes" to (b), file Form 8870 and	roviding funds for such pure providing funds for such pure pure pure pure pure pure pure pure	aries and Disregard (C) Nature of activities ciated with Personal ndirectly, to pay premiums on rectly, on a personal benefit co	Benefa person ontract?	ities (See page 34 of the (D) Total income	e instructions.) End-of-year assets ge 34 of the instructions.) Yes X No Yes X No
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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.)

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

	JENSEN FAMILY FOUNDATION			95, 47083	14
Part I	Compensation of the Five Highest Paid Employ (See page 1 of the instructions. List each one. If there are none, enter		icers, Directo		
	(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and othe allowances
NONE _					
over \$50,000		0			·
Part II	Compensation of the Five Highest Paid Indepe (See page 2 of the instructions. List each one (whether individuals or fi			al Services	
	(a) Name and address of each independent contractor paid more the	an \$50,000	(b) Type of s	service (c) Compensation
NONE _					
, ,					
Total avente	a of others resolves over				
	r of others receiving over	0			

Sc	chedule A (Form 990 or 990-EZ) 2003 JENSEN FAMILY FOUNDATION 9!	5-470831	4	age 2
F	Part III Statements About Activities (See page 2 of the instructions.)		Yes	No
2	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ (Must equal amounts on line 38, Part or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)	1_1_		х
1	a Sale, exchange, or leasing of property?	2a		X
I	b Lending of money or other extension of credit?	<u>2</u> b		х
(c Furnishing of goods, services, or facilities?	2c		x
(d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<u>2d</u>		x
(e Transfer of any part of its income or assets?			x
3 8	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a		x
t	b Do you have a section 403(b) annuity plan for your employees?	3b		Х
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4		x
P	Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
56 77 8 9 10 11 11 12	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)((Also complete the Support Schedule in Part IV-A.) 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.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gros receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses accomb the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	1)(A)(iv).		
	(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 section 509) Provide the following information about the supported organizations. (See page 5 of the instructions.)			
	(a) Name(s) of supported organization(s)		ne numi	
1.	4 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			

Galecter year (or fiscal year (a) 2002 (b) 2001 (c) 2000 (d) 1999 (e) Total spinning (n) the property of the	Pai	Note: You may use the	complete only it you ch he worksheet in the ins	necked a box on line 1 structions for convertir	o, 11, or 12.) Use cash og from the accrual to ti	he cash method he cash method	of account	ting N/A
security of the 23 minus line 17 15 Membership less received membership less received membership less received membership less received membership less received membership less received membership less received membership less received membership less received membership less received membership less received membership less received membership less received membership less received membership less received from payments on securities loans (section \$124), prints, repaired, and (less section \$11 taxes) from membership less received from payments on securities loans (section \$124), prints, repaired, and (less section \$11 taxes) from membership less received from payments on securities loans (section \$124), prints, repaired, and (less section \$11 taxes) from membership less received from membership less received from membership less received from membership less received from membership less received from membership less received from membership less received from membership less received from membership less received from membership less received from membership less received from membership less received from the part of the organization by a governmental unit without drage. Do not included the value of services or facilities generally furnanced to the organization of services of the less generally furnanced to the organization described as lines 10 or 11; as Enter 2% of amount in column (c), line 24 15 Prepare a list for your records to show the name of and amount contributed by reach person (other than a governmental unit or publicly supported organization) whose total prints of 1998 through 2002 exceeded the amount shown in line 26s. 16 Public support (line 26c immunis less 26d instanced in lines 15, 16, and 17 that were recolved from a "disqualified person," propare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person," propare a list for your records to show the name of, and total amounts received in less differences (the secs amounts) for		dar year (or fiscal year ning in)					i	
17. Gross recepts from admissions, merchandes sold or services performed, or furnishing of facilities in any activity that is related to the organization's chartfolia, let, purpose of the company of th	15	received. (Do not include unusual						
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	<u>h</u>							

²⁸ Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, 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.

Schedule A (Form 990 or 990-EZ) 2003 JENSEN FAMILY FOUNDATION Private School Questionnaire (See page 7 of the instructions.)

N/A

		Yes
Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		
nstrument, or in a resolution of its governing body?	29	
Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,	20	
nd other written communications with the public dealing with student admissions, programs, and scholarships?	30	
las the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of]	
olicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known	31	
o all parts of the general community it serves?	31	-
Too, please describe, if no, please explains (if yet note there explains a corporation and in the corporation and		
Does the organization maintain the following:		
Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	₩
Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student		
dmissions, programs, and scholarships?	32c	1
Panisa of all material wand by the apparation or an its habelf to colicit contributions?	32d	
copies of all material used by the organization or on its behalf to solicit contributions? f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	020	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to:		
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	33a	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges?		
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	33a 33b 33c	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Individual statement of faculty or administrative staff? Individual statement of faculty or administrative staff? Individual statement of faculty or administrative staff?	33a 33b 33c 33d	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Individual solutions policies? Imployment of faculty or administrative staff? Individual solutions or other financial assistance? Individual solutions of the state of the stat	33a 33b 33c 33d 33e	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Individual policies? Individual policies? Individual policies? Individual policies?	33a 33b 33c 33d 33e 33f	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Imployment of faculty or administrative staff? Scholarships or other financial assistance? Iducational policies? Use of facilities?	33a 33b 33c 33d 33e 33f 33f	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Imployment of faculty or administrative staff? Inducational policies? Iducational policies? Inducational policies?	33a 33b 33c 33d 33e 33f	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Imployment of faculty or administrative staff? Scholarships or other financial assistance? Iducational policies? Use of facilities?	33a 33b 33c 33d 33e 33f 33f	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Imployment of faculty or administrative staff? Inducational policies? Iducational policies? Inducational policies?	33a 33b 33c 33d 33e 33f 33f	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Imployment of faculty or administrative staff? Inducational policies? Iducational policies? Inducational policies?	33a 33b 33c 33d 33e 33f 33f	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Individuality or administrative staff? Individuality or other financial assistance? Indicational policies? Indicational policies? Intiletic programs? Intiletic programs? Intiletic programs? Intiletic programs? Intiletic programs? Intiletic programs? Intiletic programs to any of the above, please explain. (If you need more space, attach a separate statement.)	33a 33b 33c 33d 33e 33f 33g 33h	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Individual spolicies? Imployment of faculty or administrative staff? Indicational policies? Iducational policies? Intiletic programs? Intiletic	33a 33b 33c 33d 33e 33g 33h	
f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Idmissions policies? Imployment of faculty or administrative staff? Iducational policies? Iducational policies? Iducational policies? Idithetic programs? Interextracurricular activities? If you need more space, attach a separate statement.) Ideas the organization receive any financial aid or assistance from a governmental agency? Idias the organization's right to such aid ever been revoked or suspended?	33a 33b 33c 33d 33e 33f 33g 33h	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Individual spolicies? Imployment of faculty or administrative staff? Indicational policies? Iducational policies? Intiletic programs? Intiletic	33a 33b 33c 33d 33e 33f 33g 33h	

Schedule A (Form 990 or 990-EZ) 2003

Grants to other organizations for lobbying purposes

Total lobbying expenditures (Add lines c through h.)

Direct contact with legislators, their staffs, government officials, or a legislative body
 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

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

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Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.) Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Yes No a Transfers from the reporting organization to a noncharitable exempt organization of: (i) Cash (ii) Other assets a(ii) b Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization b(ii) (ii) Purchases of assets from a noncharitable exempt organization b(iii) (iii) Rental of facilities, equipment, or other assets b(iv) (iv) Reimbursement arrangements b(v) (v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations b(vi) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: Line no. Amount involved Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements 52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the X No Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule: N/A (a) (c) Description of relationship (b) Name of organization Type of organization

FOOTNOTES

STATEMENT

TAX RETURNS ARE BEING AMENDED TO REFLECT INADVERTENT OMISSION OF ADDITIONAL MEMBERS OF THE BOARD OF DIRECTORS

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FORM 990	STATEMENT OF	ORGANIZATION'S	PRIMARY	EXEMPT	PURPOSE	STATEMENT	2
PART III							

EXPLANATION

TO ENGAGE IN CHARITABLE ACTIVITIES DIRECTED TOWARD BENEFITTING VARIOUS CHARITABLE ORGANIZATIONS AFFILIATED WITH THE CHURCH OF SCIENTOLOGY

FORM 990	CASH GRANTS AND ALLOCATIONS STA			ATEMENT 3	
CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT	
CHARITABLE	AOLA		NONE	97,301.	
CHARITABLE	BRIDGE PUBLICATIONS		NONE	2,000.	
CHARITABLE	CBAA		NONE	30,000.	
CHARITABLE	CHURCH OF SCIENTOLOGY CELEBRITY C.		NONE	119,200.	
CHARITABLE	CCHR		NONE	5,000.	
CHARITABLE	CRIMINON		NONE	750.	
CHARITABLE	CHURCH OF SCIENTOLOGY FSO		NONE	171,161.	
CHARITABLE	CHURCH OF SCIENTOLOGY FSSO		NONE	22,920.	
CHARITABLE	US IAS MEMBERS TRUST		NONE	286,002.	
CHARITABLE	LRH MASTERPIECE EDITIONS		NONE	347,500.	
CHARITABLE	CHURCH OF SCIENTOLOGY PASADENA		NONE	169,313.	
CHARITABLE	CHURCH OF SCIENTOLOGY RELIGIOUS T.		NONE	172,000.	
CHARITABLE	CHURCH OF SCIENTOLOGY ASHO		NONE	13,068.	

JENSEN FAMIL	Y FOUNDATION		95-4708314
CHARITABLE	C OF S BOULDER MISSION	NONE	3,000.
CHARITABLE	CHURCH OF SCIENTOLOGY TAMPA	NONE	10,000.
CHARITABLE	C OF S VALLEY ORG	NONE	20,000.
CHARITABLE	C OF S WOMEN'S AUXILIARY	NONE	1,000.
CHARITABLE	CHURCH OF SCIENTOLOGY SMI WUS	NONE	3,000.
CHARITABLE	CHURCH OF SCIENTOLOGY LA ORG	NONE	1,500.
CHARITABLE	FRIENDS OF NARCONON	NONE	500.
CHARITABLE	IFF	NONE	190.
TOTAL INCLUDED	ON FORM 990, PART II, LINE 22		1,475,405.
FORM 990	OTHER PROGRAM SER	VICES	STATEMENT 4
DESCRIPTION		GRANTS AND ALLOCATIONS	EXPENSES
OTHER EXEMPT ORGANIZATIONS			498,742.
TOTAL TO FORM 990, PART III, LINE E			498,742.