

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)

2003

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning 7/1/2003, and ending 6/30/2004

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization: **HOLLYWOOD EDUCATION AND LITERACY PROJECT**
 Number and street (or P O box if mail is not delivered to street address): **6336 HOLLYWOOD BOULEVARD**
 Room/suite: _____
 City or town: **LOS ANGELES** State or country: **CA** ZIP + 4: **90028**

D Employer identification number: **95-4617886**

E Telephone number: _____

F Accounting method: Cash Accrual
 Other (specify) _____

G Website: _____

J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **381,801**

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates **NONE**
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number **NONE**
M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:			
	a Direct public support	1a	234,338	
	b Indirect public support	1b		
	c Government contributions (grants)	1c	22,313	
	d Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)	1d		256,651
	2 Program service revenue (including government fees and contracts (from Part VII, line 93))	2		8,310
	3 Membership dues and assessments	3		0
	4 Interest on savings and temporary cash investments	4		2,528
	5 Dividends and interest from securities	5		0
	6 a Gross rents	6a		
	b Less: rental expenses	6b		
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c		0
7 Other investment income (describe _____)	7		0	
Revenue	8 a Gross amount from sales of assets other than inventory	(A) Securities		
	b Less: cost or other basis and sales expenses	8a	0	
	c Gain or (loss) (attach schedule)	8b	0	
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	0	
Revenue	8 d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		0
	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	114,312	
	b Less: direct expenses other than fundraising expenses	9b	41,535	
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c		72,777	
Revenue	10 a Gross sales of inventory, less returns and allowances	10a		
	b Less: cost of goods sold	10b		
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		0
Revenue	11 Other revenue (from Part VII, line 103)	11		0
	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		340,266
Expense	13 Program services (from line 44, column (B))	13		415,510
	14 Management and general (from line 44, column (C))	14		57,346
	15 Fundraising (from line 44, column (D))	15		50,610
	16 Payments to affiliates (attach schedule)	16		0
	17 Total expenses (add lines 16 and 44, column (A))	17		523,466
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		-183,200
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,229,476
	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		1,046,276

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Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ 0 noncash \$ 0)	0	0		
23	Specific assistance to individuals (attach schedule)	0			
24	Benefits paid to or for members (attach schedule)	0			
25	Compensation of officers, directors, etc.	19,082			19,082
26	Other salaries and wages	203,788	183,409	16,303	4,076
27	Pension plan contributions	0			
28	Other employee benefits	4,105	3,378	300	427
29	Payroll taxes	22,042	18,140	1,612	2,290
30	Professional fundraising fees	0			
31	Accounting fees	21,817		21,817	
32	Legal fees	0			
33	Supplies	0			
34	Telephone	21,501	17,846	1,505	2,150
35	Postage and shipping	26,657	22,125	1,866	2,666
36	Occupancy	54,147	44,942	3,790	5,415
37	Equipment rental and maintenance	0			
38	Printing and publications	0			
39	Travel	4,609	3,825	323	461
40	Conferences, conventions, and meetings	969	804	68	97
41	Interest	0			
42	Depreciation, depletion, etc. (attach schedule)	60,216	49,979	4,215	6,022
43	Other expenses not covered above (itemize): a PRO FEES	5,292	5,292		
	b INSURANCE	11,527	9,567	807	1,153
	c OTHER COSTS	67,714	56,203	4,740	6,771
	d	0			
	e	0			
	f	0			
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	523,466	415,510	57,346	50,610

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 0; (ii) the amount allocated to Program services \$ 0;
 (iii) the amount allocated to Management and general \$ 0; and (iv) the amount allocated to Fundraising \$ 0

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? TO IMPROVE LITURACY/EDUCATION LEVEL	Program Service Expenses
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 charitable trusts must also enter the amount of grants and allocations to others)	Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a ORGANIZATION ENROLLED APPROXIMATELY 600 NEW STUDENTS, DELIVERED APPROXIMATELY 50,000 HOURS OF TUTORING, AND BEGAN TRAINING APPROXIMATELY 300 NEW TUTORS. (Grants and allocations \$ 0)	415,510
b (Grants and allocations \$)	
c (Grants and allocations \$)	
d (Grants and allocations \$)	
e Other program services (attach schedule) (Grants and allocations \$)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	415,510

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

			(A)		(B)
			Beginning of year		End of year
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.					
Assets	45	Cash—non-interest-bearing	109,593	45	262,778
	46	Savings and temporary cash investments	355,025	46	
	47 a	Accounts receivable	1,855		
	47 b	Less: allowance for doubtful accounts	0	47c	1,855
	48 a	Pledges receivable	0		
	48 b	Less: allowance for doubtful accounts	0	48c	0
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)	0	50	0
	51 a	Other notes and loans receivable (attach schedule)	0		
	51 b	Less: allowance for doubtful accounts	0	51c	0
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	14,286	53	2,841
	54	Investments—securities (attach schedule)	0	54	0
	55 a	Investments—land, buildings, and equipment: basis	1,109,024		
	55 b	Less: accumulated depreciation (attach schedule)	247,804	55c	861,220
	56	Investments—other (attach schedule)	0	56	0
	57 a	Land, buildings, and equipment: basis	0		
	57 b	Less: accumulated depreciation (attach schedule)	0	57c	0
	58	Other assets (describe)	0	58	0
59	Total assets (add lines 45 through 58) (must equal line 74)	1,334,392	59	1,128,694	
Liabilities	60	Accounts payable and accrued expenses	104,916	60	82,448
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0
	64 a	Tax-exempt bond liabilities (attach schedule)	0	64a	0
	64 b	Mortgages and other notes payable (attach schedule)	0	64b	0
	65	Other liabilities (describe)	0	65	0
66	Total liabilities (add lines 60 through 65)	104,916	66	82,448	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted	874,672	67	1,046,246
	68	Temporarily restricted	354,804	68	
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
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)	1,229,476	73	1,046,246	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	1,334,392	74	1,128,694	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements ▶	a	543,126
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . . \$		
(2)	Donated services and use of facilities . . . \$	202,860	
(3)	Recoveries of prior year grants \$		
(4)	Other (specify):		
	----- \$		
	----- \$		
	Add amounts on lines (1) through (4) . . . ▶	b	202,860
c	Line a minus line b ▶	c	340,266
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	----- \$		
	----- \$		
	Add amounts on lines (1) and (2) . . . ▶	d	0
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	340,266

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	726,326
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities . . . \$	202,860	
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify):		
	----- \$		
	----- \$		
	Add amounts on lines (1) through (4) . . . ▶	b	202,860
c	Line a minus line b ▶	c	523,466
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	----- \$		
	----- \$		
	Add amounts on lines (1) and (2) . . . ▶	d	0
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	523,466

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Name <u>KINDER HUNT</u> Str City ST ZIP	Title <u>PRESIDENT</u> Hr/WK <u>60</u>	0	0	0
Name <u>JEFF BUTLER</u> Str City ST ZIP	Title <u>TREASURER</u> Hr/WK <u>20</u>	0	0	0
Name <u>SUESAN WALKER</u> Str City ST ZIP	Title <u>SECRETARY</u> Hr/WK <u>40</u>	19,082	0	0
Name _____ Str City ST ZIP	Title _____ Hr/WK _____			
Name _____ Str City ST ZIP	Title _____ Hr/WK _____			
Name _____ Str City ST ZIP	Title _____ Hr/WK _____			
Name _____ Str City ST ZIP	Title _____ Hr/WK _____			
Name _____ Str City ST ZIP	Title _____ Hr/WK _____			
Name _____ Str City ST ZIP	Title _____ Hr/WK _____			
Name _____ Str City ST ZIP	Title _____ Hr/WK _____			

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule—see page 28 of the instructions

Part VI Other Information (See page 28 of the instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
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	X
b	If "Yes," enter the name of the organization NONE and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct and indirect political expenditures. See line 81 instructions 81a 0		
b	Did the organization file Form 1120-POL for this year?	81b	
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.) 82b 202,860		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	X
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	X
b	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 proxy tax owed for the prior year.	85b	
c	Dues, assessments, and similar amounts from members 85c 0		
d	Section 162(e) lobbying and political expenditures 85d 0		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e 0		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f 0		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	X
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	X
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 86a 0		
b	Gross receipts, included on line 12, for public use of club facilities 86b 0		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a 0		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b 0		
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	X
89 a	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	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization 0		
90 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 (See instructions.) 90b 17		
91	The books are in care of Name JEFF BUTLER Telephone no (323) 463-2100 Located at 6336 HOLLYWOOD BLVD, LO City ST Zip + 4 90028		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a CURRICULUM SALES					522
b SEMINARS CONDUCTED					3,600
c TUTORING FEES					4,188
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			514	2,528	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		2,528	8,310
105 Total (add line 104, columns (B), (D), and (E))					10,838

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
NONE	NONE

Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	NONE	NONE	0	0
	%		0	0
	%		0	0
	%		0	0

Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer: Amanda Collins Date: 5/15/05

Type or print name and title: Amanda Collins Vice President

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 5/5/2005 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: BALBIN & COMPANY 445 S. FIGUEROA ST., 27TH FLOOR, LA, CA 90071 Preparer's SSN or PTIN (See Gen. Inst. W): 545-49-1581

EIN: 95-4309639 Phone no.: (213) 612-7778

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

2003

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 HOLLYWOOD EDUCATION AND LITERACY PROJECT	Employer identification number 95-4617886
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(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 other allowances
Name Str NONE				
City _____ ST _____ Zip _____ Country _____	Title _____ Avg hr/wk _____			
Name Str _____				
City _____ ST _____ Zip _____ Country _____	Title _____ Avg hr/wk _____			
Name Str _____				
City _____ ST _____ Zip _____ Country _____	Title _____ Avg hr/wk _____			
Name Str _____				
City _____ ST _____ Zip _____ Country _____	Title _____ Avg hr/wk _____			
Name Str _____				
City _____ ST _____ Zip _____ Country _____	Title _____ Avg hr/wk _____			
Total number of other employees paid over \$50,000 0				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Name NONE <input type="checkbox"/> Check here if a business		
Str _____ City _____ ST _____ ZIP _____ Country _____		
Name _____ <input type="checkbox"/> Check here if a business		
Str _____ City _____ ST _____ ZIP _____ Country _____		
Name _____ <input type="checkbox"/> Check here if a business		
Str _____ City _____ ST _____ ZIP _____ Country _____		
Name _____ <input type="checkbox"/> Check here if a business		
Str _____ City _____ ST _____ ZIP _____ Country _____		
Name _____ <input type="checkbox"/> Check here if a business		
Str _____ City _____ ST _____ ZIP _____ Country _____		
Total number of others receiving over \$50,000 for professional services 0		

Part III Statements About Activities (See page 2 of the instructions.)		Yes	No
1	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 ▶ \$ <u>0</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		X
	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.		
2	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.)		
a	Sale, exchange, or leasing of property?	2a	X
b	Lending of money or other extension of credit?	2b	X
c	Furnishing of goods, services, or facilities?	2c	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE VFORM 990	2d	X
e	Transfer of any part of its income or assets?	2e	X
3a	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
b	Do you have a section 403(b) annuity plan for your employees?	3b	X
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

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 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, city, and state ▶ _____ City _____ ST _____ Country _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
- 11 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.)
- 11 b 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 charitable, 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 acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
- 13 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 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)	(b) Line number from above
NONE	NONE

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	906,599	794,771	733,074	470,996	2,905,440
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	12,343	3,052	22,275	11,948	49,618
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	2,634	3,990	7,767	7,091	21,482
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22	921,576	801,813	763,116	490,035	2,976,540
24 Line 23 minus line 17	909,233	798,761	740,841	478,087	2,926,922
25 Enter 1% of line 23	9,216	8,018	7,631	4,900	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 58,538
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 2,926,922
d Add: Amounts from column (e) for lines: 18 21,482 19 0 22 0 26b 0					26d 21,482
e Public support (line 26c minus line 26d total)					26e 2,905,440
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 99.27%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2002) _____ (2001) 0 (2000) 0 (1999) 0					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2002) _____ (2001) 0 (2000) 0 (1999) 0					
c Add: Amounts from column (e) for lines: 15 0 16 0 17 0 20 0 21 0					27c 0
d Add: Line 27a total 0 and line 27b total 0					27d 0
e Public support (line 27c total minus line 27d total)					27e 0
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f 0
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 0.00%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 0.00%
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.					

Part V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

Table with 3 columns: Question, Yes, No. Rows include questions 29-35 regarding racial nondiscrimination policies, record keeping, and financial aid.

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group. Check b if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	0	0
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	0	0
38	Total lobbying expenditures (add lines 36 and 37)	0	0
39	Other exempt purpose expenditures	0	0
40	Total exempt purpose expenditures (add lines 38 and 39)	0	0
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is—		
	The lobbying nontaxable amount is—		
	Not over \$500,000 20% of the amount on line 40		
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000	0	0
	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		
42	Grassroots nontaxable amount (enter 25% of line 41)	0	0
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	0	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	0	0

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount	0	0	0	0	0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures	0	0	0	0	0
48 Grassroots nontaxable amount	0	0	0	0	0
49 Grassroots ceiling amount (150% of line 48(e))					0
50 Grassroots lobbying expenditures	0	0	0	0	0

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
	a Volunteers		X
b Paid staff or management (Include compensation in expenses reported on lines c through h.)		X	
c Media advertisements		X	0
d Mailings to members, legislators, or the public		X	0
e Publications, or published or broadcast statements		X	0
f Grants to other organizations for lobbying purposes		X	0
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	0
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	0
i Total lobbying expenditures (Add lines c through h.)			0

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 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	51a(i)	X
(ii)	Other assets	a(ii)	X
b	Other transactions:		
(i)	Sales or exchanges of assets with a noncharitable exempt organization	b(i)	X
(ii)	Purchases of assets from a noncharitable exempt organization	b(ii)	X
(iii)	Rental of facilities, equipment, or other assets	b(iii)	X
(iv)	Reimbursement arrangements	b(iv)	X
(v)	Loans or loan guarantees	b(v)	X
(vi)	Performance of services or membership or fundraising solicitations	b(vi)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c	X

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:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
NONE	NONE	NONE	NONE

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 Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
NONE	NONE	NONE

Line 9 (990) - Special events and activities

	Event A	Event B	Event C	All others	Totals
1 Special event name	GREAT WINE CAUSE				
1a Number of special events	1				
2 Gross receipts	114,312				2 114,312
3 Less contributions					3 0
4 Gross revenue	114,312	0	0	0	4 114,312
5 Less direct expenses	41,535				5 41,535
6 Net income or (loss)	72,777	0	0	0	6 72,777

Line 55 (990) - Investments land, buildings, and equipment

	Land (net of any amortization)	
	Beginning	End
1 FURNITURE AND EQUIPMENT	114,617	172,636
2 LIBRARY	10,600	10,600
3 LEASEHOLD IMPROVEMENTS	561,664	604,312
4		
5		
6 Total land (net of any amortization)	686,881	787,548

	Buildings and equipment		Accumulated depreciation	
	Beginning	End	Beginning	End
7 BUILDING	303,516	321,476		
8				
9 ACCUMULATED DEP			187,558	247,804
10				
11 DEP S/L 5 TO 30 YEARS				
12				
13				
14				
15				
16				
17 Total buildings and equipment	303,516	321,476	187,558	247,804
18 Buildings and equipment (less accumulated depreciation)			115,958	73,672
19 Total land, buildings and equipment			802,839	861,220

Category or Item	Cost/Other Basis	Accumulated Depreciation	Book Value
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11 Total	0	0	0