Form **990**

OMB No 1545-0047 2004

Department of the Treasury

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 Open to Public

A	For the	2004 calendar year, or tax year beginning	, and ending	0 00.10	y state reporting requirement		1 1000000000000000000000000000000000000
В		applicable Please C Name of organization	j unu unung			D E	mployer Identification no.
Ī	ר	SS Shange USE IRS TNTERNATIONAL A	CADEMY OF DE	דחצ	TRT_		4-3382902
⊢	1	label or CAMTON CONCERNATION		- 021			
⊢	1						elephone number
-	Initial	Trained and discretion 1 of Son in in		dress)	I .		23-937-9911
-	Finali	Specific TOOL WILDSHILL I			216		ccounting method: X Cash
Ļ	1	ded return Instruc- City or town, state or country, and Z				Ĺ∐ ^	ccrual Other (specify)
L	Applic	ation pending tions. LOS ANGELES	CA 9001	-		<u> </u>	<u> </u>
		Section 501(c)(3) organizations and 4947			and I are not applicable to se		· — —
		trusts must attach a completed Schedule	e A (Form 990 or 990-EZ).	H	(a) Is this a group return for	affiliates	s? Yes X No
<u>G</u>	Websit	e: ► DETOXACADEMY.ORG		_ н	(b) If "Yes," enter number of	f affiliate	s Þ
J		zation type		Н	(c) Are all affiliates included	1?	Yes No
		only one) ► X 501(c) (3) < (insert no.)		_	(If "No," att a list See in		
K	Check	here 🕨 🔲 ıf the organization's gross receipts are nor	mally not more than \$25,0	юф. н	(d) Is this a separate return	filed by	an
	The org	ganization need not file a return with the IRS; but if the o	rganization received a	<u> </u>	organization covered by	a group	ruling? Yes No
	Form 9	90 Package in the mail, it should file a return without fina	ancial data. Some states	L	I Group Exemption Nu	ımber 🕨	<u> </u>
	require	a complete return.			M Check ▶ if the	organi	zation is not required
L	Gross	eceipts: Add lines 6b, 8b, 9b, and 10b to line 12	1,671,91	9	to attach Sch. B (For	m 990,	990-EZ, or 990-PF).
	art f	Revenue, Expenses, and Changes in N	let Assets or Fund E	Balar	nces (See page 18	of the	instructions.)
	1	Contributions, gifts, grants, and similar amounts receive				<u> </u>	
	a	Direct public support		1a	1,661,896	5	
	Ь	Indirect public support		1b		7	
	C	Government contributions (grants)		1c	10,000	5	
	d	Total (add lines 1a through 1c) (cash \$1,67	71 896 noncash \$		1 20,000	1d	1,671,896
Œ.	2	Program service revenue including government fees ar		line (731	2	2/0/2/030
2005	3	Membership dues and assessments	id contracts (nom ratt vii)	, iii ie c))	3	
	4	•				4	23
90	5	Interest on savings and temporary cash investments Dividends and interest from securities				5	23
	l _			6-	l	3	
	6a	Gross rents		6a Ch		┥	
	b	Less: rental expenses	-\ -\	6b	<u> </u>	┥ ू_	
$\Omega_{\mathbf{n}}$	C	Net rental income or (loss) (subtract line 6b from line 6a	a) `			6c	
<u></u> e R	7	Other investment income (describe				7	
Z v	8a	Gross amount from sales of assets other	(A) Securities	-	(B) Other	┥	
SCANNED OF STATE		than inventory		8a		┥	
$\mathcal{Q}_{\mathbf{e}}^{\mathbf{u}}$	b	Less: cost or other basis and sales expenses		8b		-	
	C	Gain or (loss) (attach schedule)		8c	L	┨╻.	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B			. 🗆	8d	
	9	Special events and activities (attach schedule). If any a		eck h	ere 🕨 🔛	İ	i
	50	Gross revenue (not including \$	^{of}		1		
_		contributions reported on line 1a)		9a		4	
6	b	Less direct expenses other than fundraising expenses		9b	L	-	
15	NON	Net in ငစ္ခ်က္မြဲခ်င္မွာ (loss from special events (subtract line s	eb from line 9a)		(9c	
1 1	10a	Gross sales of inventory, less returns and allowances		10a		4	
-		Less: cost of goods sold		10b		4	
	00	cross profit or (loss) from sales of inventory (attach sch	nedule) (subtract line 10b f	rom lı	ne 10a)	10c	<u> </u>
	11	Other revenue (from Part VII, line 103)				11	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10	oc, and 11)			12	1,671,919
E	13	Program services (from line 44, column (B))				13	1,183,853
p e	14	Management and general (from line 44, column (C))				14	221,643
n	15	Fundraising (from line 44, column (D))				15	214,177
s e	16	Payments to affiliates (attach schedule)				16	
s	17	Total expenses (add lines 16 and 44, column (A))	<u> </u>		<u> </u>	17	1,619,673
A	18	Excess or (deficit) for the year (subtract line 17 from line	e 12)			18	52,246
NS	19	Net assets or fund balances at beginning of year (from	line 73, column (A))			19	-47,694
e e t t	20	Other changes in net assets or fund balances (attach ex	xplanation)			20	
	21	Net assets or fund balances at end of year (combine lin	es 18, 19, and 20)			21	4,552
For inst	Privacy ruction	Net assets or fund balances at end of year (combine lin Act and Paperwork Reduction Act Notice, see the se s.	parate				Form 990 (2004)
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Form 990 (2004)

_		inplete column (A) Column			•	
Functional Expenses and section 4947(a)(1) no.	nexempt chantable trusts t				ons)
Do not include amounts reported on line		(A) Total	(B) Prog		(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I.	-		servi	ces	and general	
22 Grants and allocations (attach schedule) STMT 1		002 104	003	104		
(cash\$ 993,124 cash \$)	22	993,124	993	<u>,124</u>		
23 Specific assistance to individuals	23					
24 Benefits paid to or for members	24					
25 Compensation of officers, directors, etc.	25					
26 Other salaries and wages	_26					
27 Pension plan contributions	27					
28 Other employee benefits	28					ļ
29 Payroll taxes	29					
30 Professional fundraising fees	30					
31 Accounting fees	31	30,073			30,073	
32 Legal fees	32	4,656			4,656	
33 Supplies	33	7,770			7,770	
34 Telephone	34					
35 Postage and shipping	35	5,071			1,776	3,295
36 Occupancy	36					
37 Equipment rental and maintenance	37					
38 Printing and publications	38	41,355	12	,759	3,111	25,485
39 Travel	39	85,925		,120		
40 Conferences, conventions, and meetings	40	104,871		,224	328	
41 Interest	41		-	·		
42 Depreciation, depletion, etc. (attach schedule)	42					
43 Other expenses not covered above (itemize):a	43a					
b SEE STATEMENT 2	43b	346,828	104	,626	162,894	79,308
c	43c	310,020		, 525		757555
	43d					
d	$\overline{}$					
e	43e				-	
44 Total functional expenses (add lines 22 - 43) Organizations	ا ا	1 610 673	1 100	0.53	221 642	214 177
completing columns (B)-(D), carry these totals to lines 13-15	44	1,619,673	1,103	, 653	221,643	214,177
Joint Costs. Check ► ☐ If you are following SOP 98-2.			=\=		•	. □ 🖨
Are any joint costs from a combined educational campaign and	a tunar		• •	-		► Yes X No
If "Yes," enter (i) the aggregate amount of these joint costs\$			int allocated to F			<u> </u>
(III) the amount allocated to Management and genera\$, and (iv) the amou				
Part III Statement of Program Service Acc	ompi	isnments (See pa	age 25 of tr	ie insti	ructions.)	Brown Condo
What is the organization's primary exempt purpose?						Program Service Expenses
SEE STATEMENT 3		sloor and assiss -		Ma	-h	(Required for 501(c)(3) &
All organizations must describe their exempt purpose achiever of clients served, publications issued, etc. Discuss achieveme	nts that	t are not measurable (Section 501(c)(3) and	(4)	(4) orgs, & 4947(a)(1) trusts, but optional for
organizations and 4947(a)(1) nonexempt charitable trusts mus	t also e	enter the amount of gra	ints and alloca	tions to	others.)	others)
a SEE "STATEMENT OF PROGRAM S	ERV]	CE ACCOMPL	ISHMENT	S"		
ATTACHED.						
		(Grants and all	locations \$		993,124	1,183,853
b					-	
		(Grants and all	ocations \$		1	
		(Ordino dila dil	OGGROUP V			
		(Grants and all	ocations \$,	
		(Orania and an	ocations w			
d						
		(O				
Other		(Grants and all			<u></u>	
Other program services (attach schedule) Tatal of Brown Services (attach schedule)		(Grants and all				1 102 052
f Total of Program Service Expenses (should equal line 44	, colun	iii (b), Program servic	es)			1,183,853 Form 990 (2004)
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Part IV Balance Sheets (See page 25 of the instructions.)

	Note:	Where required, attached schedules and amount column should be for end-of-year amounts only	ts within the description	(A) Beginning of year		(B) End of year
	45	Cash-non-interest-bearing		2,306	45	154,552
	46	Savings and temporary cash investments	}	2/300	46	131/332
	40	dayings and temporary cash investments	ľ			
	47a	Accounts receivable	47a			
	Б	Less: allowance for doubtful accounts	47b		47c	
	1					
	48a	Pledges receivable	48a		i	
	Ь	Less: allowance for doubtful accounts	48b	'	48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, an	d key employees			
Α	İ	(attach schedule)			50	
s	51a	Other notes and loans receivable (attach				
s	ļ	schedule)	51a		ſ	
e	b	Less: allowance for doubtful accounts	51b		51c	
t	52	Inventories for sale or use			52	
s	53	Prepaid expenses and deferred charges			53	
	54	Investments-securities	► ☐ Cost ☐ FMV ☐		54	
	55a	Investments-land, buildings, and				
		equipment: basis	55a		1	
	b	Less: accumulated depreciation (attach			1	
		schedule)	55b		55c	
	56	Investments-other (attach schedule)	, ,		56	
	57a	Land, buildings, and equipment: basis	57a			
	b	Less: accumulated depreciation (attach	1 1			
		schedule)	57b		57c	
	58	Other assets (describe)		58	
				2 206		154 550
	59	Total assets (add lines 45 through 58) (must eq	ual line 74)	2,306		154,552
L	60	Accounts payable and accrued expenses	}		60	· · · · · · · · · · · · · · · · · · ·
i	61	Grants payable	-		61	
a b	62	Deferred revenue	la		62	
ī	63	Loans from officers, directors, trustees, and key	employees (attach			
ļ	64-	schedule)	-		63	
t	64a	Tax-exempt bond liabilities (attach schedule)	dule) SEE WORKSHEET	50,000	64a	150,000
Ĭ	65	Mortgages and other notes payable (attach sche	dule) SEE WORRSHEET	50,000	65	130,000
e	65	Other liabilities (describe	,		65	
S	66	Total liabilities (add lines 60 through 65)		50,000	66	150,000
		inizations that follow SFAS 117, check here	X and complete lines		- 30	150,000
	5"	67 through 69 and lines 73 and 74.				
NF	67	Unrestricted		-47,694	67	-108,448
e u	68	Temporanly restricted			68	113,000
t n	69	Permanently restricted			69	······································
A	Orga	inizations that do not follow SFAS 117, check h	ere Dand			
s B		complete lines 70 through 74.	_		1	
s a	70	Capital stock, trust principal, or current funds	l		70	
e I	71	Paid-in or capital surplus, or land, building, and e	equipment fund		71	
t a s n	72	Retained earnings, endowment, accumulated inc	· · ·		72	
С	73	Total net assets or fund balances (add lines 67				
0 е	ł	70 through 72,		1		
rş		column (A) must equal line 19, column (B) must	equal line 21)	-47,694	73	4,552
	74	Total liabilities and net assets / fund balances	(add lines 66 and 73)	2,306	74	154,552

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.

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*********	1 990 (2004)	INTERNAT.					DET	OX.	IFI-	94-:	3382902			Pa
Pŧ	irt IV-A	Reconciliatio						P	art IV-E		Reconciliation of			er Audited
		Financial Stat									Financial Stater	nents	s with Ex	penses per
		Return (See p		of t	he instr	uctions.))	Щ			Return			
а		e, gains, and other			_			а		-	and losses per			
L	-	nancial statements		a	1	,671,	919	4			al statements		a	1,619,6
b		uded on line a but i	not on					b			ded on line a but not			
(4)	line 12, Form							1		17, Forr				
(1)	Net unrealized investments	-						 (1)			es and use			
(2)	Donated servi		-	-					of facili	÷			4	
(-)	of facilities	¢						(2)	Prior ye	-				
(3)	Recoveries of	f prior		1				1		d on line	•			
(-,	year grants	•						(2)	Form 9	-			-	
(4)	Other (specify			1 1				(3)	Form 9		d on line 20,			
` '	(-,							(4)	Other (-			1	
	• •	\$						'~'	Outer (.	specify).	•			
	Add amounts	on lines (1) through	h (4)	Ь]		•	.			
		., ,	` ,					1	Add am	<u>¥</u> Ounts O	n lines (1) through (4	41	1.	
С	Line a minus t	ine b	•	c	1,	671,9	919	c		ninus lin		" •	c	1,619,6
d	Amounts inclu	ided on line 12,						ď			led on line 17,			1,010,0
	Form 990 but	not on line a:						1			ot on line a:			
(1)	Investment ex	penses						(1)	Investm					
	not included o	n line		H						uded on				
	6b, Form 990	\$							6b, For	n 990 \$				
(2)	Other (specify):					i	(2)	Other (s	specify).				
		\$								\$				
	Add amounts	on lines (1) and (2)	•	d					Add am	ounts or	n lines (1) and (2)	<u> </u>	اما	
•	Total revenue	per line 12, Form 9	990					е	Total ex	penses	per line 17, Form 99	90		
***************************************	(line c plus line		<u> </u>	е		671,9			(line c p	lus line	d)		e	1,619,67
Pai	t V Lis	t of Officers, D	Director	s, T	rustees,	and Ke	y Er	nplo	yees (l	ıst each	n one even if not cor	npensa	ated; see pa	age 27 of
	the i	nstructions.)					T.		···					
		(A) Name a	nd address				ho	(B) Ti urs pe	itle and av r week de	erage voted to	(C) Compensation (If not paid, enter	(D) empl	Contrib to oyee benefit & deferred npensation	(E) Expense account and other
RI.	LEN EDM	ONDSON					╄		position		-0)	Plan	npensation	allowances
		HIRE BL L	מג פח.	ic F	ፒድ ሮአ	9001			TEE,	PRE	l _		•	
CA	RL SMIT	H	OB AL	i G E	HE CH	9001	_		ਆਦਾਦਾ	CEC	0	 	0	<u> </u>
		HIRE BL L	OS AN	CE	ፒፑ ሮል	9001	h 3	KUS	TEE,	SEC			•	.]
JA	MES BAR	NES	OD TH	1011	TH CA	. 2001	_	DTTC	TEE,	יו כייי	0	 -	0	11
		HIRE BL L	OS AN	GE	LE CA	9001	h 1	KUS	155,	IKE			^	
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	Nd	P 1 .												
5 [ום any officer,	director, trustee, o	r key emp	loye	e receive a	aggregate	comp	ensa	tion of m	ore than	\$100,000 from you	r	·	
1.	ryanizauon an F"Voc." au-au	d all related organi	zations, o	T Whi	cn more th	an \$10,00	0 wa:	s prov	rided by	the relat	ted organizations?		▶ [Yes X N
ľ	res, attach	schedule-see page	e 28 of the	ınst	ructions.									

	1990 (2004) INTERNATIONAL ACADEMY OF DETOXIFI- 94-3382902		F	age 5
P	art 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?	77		X
	If "Yes," attach a conformed copy of the changes			
78a	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		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a			
	statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common	"		
ooa	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	x	
h	If "Yes," enter the name of the organization F.A.S.E.	ova		
b				
04 -	·			
81a	Enter direct and indirect political expenditures. See line 81 instructions 81a	- I		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			
	or at substantially less than fair rental value?	82a		<u>X</u>
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.)			
83a	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? N/A	83b		
84a	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? 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			
	received a waiver for proxy tax owed for the prior year			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures 85d			
۵	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e	1		
	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f	1 1		
'	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A			
9		85g		
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? N/A 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	85h		
86				
b	Gross receipts, included on line 12, for public use of club facilities	- 1		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders			
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		ĺ	
	partnership, or an entity disregarded as separate from the organization under Regulations sections] [Ì	
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		<u>X</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		Ī	
	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	1	X
•	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	000		
·	sections 4912, 4955, and 4958			0
_				0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			
90a	List the states with which a copy of this return is filed CA NY			^
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions)	02=		<u> </u>
91	The books are in care of ► ALI DATARDINA Telephone no. ► 323-	937	-99	7.7
	Located at ► LOS ANGELES, CA ZIP+4 ► 90010			,
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 92			
		Earm	990	(2004)

Note: Enter	gross amounts unless otherwise		Unrelated	business income	Excluded	by sec 512, 513, or 5	14 (E)
ındicated.			(A)	(B) Amount	(C) Exclusion	(D) Amount	Related or exempt function
93 Progran	n service revenue:	Bu	isiness code	Amount	code	Amount	income
а							
b							
c				-		-	
d						_	
е							
f Medicai	re/Medicaid payments						
	nd contracts from government ager	ncies					
•	rship dues and assessments						
	on savings and temporary cash in	vestments			14	2	3
	ds and interest from securities		-				
	tal income or (loss) from real estate	e:					
	anced property			<u> </u>	† · · · · · · · · · · · · · · · · · · ·		
	t-financed property						
	tal income or (loss) from personal p	oronerty					
	evestment income					·	
	(loss) from sales of assets other th	nan inventory			 		
	ome or (loss) from special events						
	rofit or (loss) from sales of invento	~ ├─		···	1		
		•			 	- -	
					├ <i>-</i>		
		i					
		ŀ					
e							
	I (add columns (B), (D), and (E))			0		2	3 0
	idd line 104, columns (B), (D), and	(E))	L		l		23
	5 plus line 1d, Part I, should equal		Part I			· -	
Part VIII	Relationship of Activiti			of Exempt Purp	oses (S	ee page 34 of	the instructions)
Line No.	Explain how each activity for whi						
▼	of the organization's exempt pur	· ·			poa	, ay 10 a 10 a 000 mp	
N/A							
						· · · · · · · · · · · · · · · · · · ·	
				· .			
Part IX	Information Regarding T	axable Subsidiario	es and Di	sregarded Entit	ies (Sec	page 34 of th	e instructions.)
	(A)	(B)		(C)		(D)	(E)
Name, ad partne	dress, and EIN of corporation, rship, or disregarded entity	Percentage of ownership interest	l Na	ature of activities	ŀ	Total income	End-of-year assets
N/A		%	,				
		%		*			
		%			_		
		0/	<u> </u>				
Part X	Information Regarding T	ransfers Associat	ed with F	Personal Benefit	Contrac	cts (See nage 34	of the instructions)
	the organization, during the year, r						
	the organization, during the year, p	· ·	=			mai bonent contrac	Yes X No
• •	res" to (b), file Form 8870 and Form	• •	•	on a personal benefit	Contract		1es 21 140
Note. II	I					and to the best	of multipout adap
	Under penalties of penjury, I declare the and belief, it is true, correct and confi		_				-
Please	11111	د د د و ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱۰ د ۱ د ۱	(50.0.			1 1	1/15/05
Sign							43/43
Here	Signature of Officer	Switt -	- 54	screten		Date	1 '
	Type or print name and title	0.			- $$	Charlet	Description Description
		11/1///////////////////////////////////	7 -1) _	1	Check if self-	Preparer's SSN or PTIN
Paid	Preparer's	/W/ - X	20	Date 11/1		employed X	(See Gen Instr W)
Preparer's	signature	AND W	dr:	<u> </u>	5/05		305-60-3582
Use Only		AND W. FINK		CIITME 10C		EIN	<u>P</u>
•		1 HONOLULU A		SUITE 126		Phone	010 040 4555
	address, and ZIP + 4 MON	TROSE, CA	<u>91020-</u>	T0#1		no ▶	<u>818-249-4577</u>

SCHEDULÈ 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

OMB No 1545-0047

2004

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL ACADEMY OF DETOXIFI-

Supplementary Information-(See separate instructions.)

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

Employer identification number

CATION_SPECIALISTS		94-3382902
Part I Compensation of the Five Highest Paid Emp (See page 1 of the instructions. List each one		
(a) Name and address of each employee paid more (b	r week devoted to position (c) Compensation	(d) Contributions to (e) Expense
NONE		
	,	
Total number of other employees paid over \$50,000		in al Opping
Part II Compensation of the Five Highest Paid Inde (See page 2 of the instructions. List each one		
(a) Name and address of each independent contractor paid more that	an \$50,000 (b) Type	of service (c) Compensation
CAROL HAMAKER 2-01 50TH AVE APT. 9C LONG ISLAND CITY NY 11101	CONSULTIN	G 68,937
	CONSULTING	00,937
Total number of others receiving over \$50,000 for professional services		

Sche	dule	A (Form 990 or 990-EZ) 2004 INTERNATIONAL ACADEMY OF DETOXIFI- 94-3382902		P	age 2
P	ert J	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	Du	ring the year, has the organization attempted to influence national, state, or local legislation, including any			
		empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid			ı
		incurred in connection with the lobbying activities \(\bigs \) (Must equal amounts on line 38,	1		
		rt VI-A, or line i of Part VI-B)	1		X
		ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other			i
	-	panizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities.			
2		ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any	- 1		
		ostantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or			
		h any taxable organization with which any such person is affiliated as an officer, director, trustee, majority			
		ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the nsactions.)			
а	Sal	le, exchange, or leasing of property?	2a		x
b	Ler	nding of money or other extension of credit?	2b		Х
С	Fu	mishing of goods, services, or facilities?	2c		X
d	Pa	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
			- 1		
е	Tra	ansfer of any part of its income or assets?	2e		X
3a		you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	ľ	1	
	-	determine that recipients qualify to receive payments.)	3a		<u>X</u>
b		you have a section 403(b) annuity plan for your employees?	3b		X
4a		I you maintain any separate account for participating donors where donors have the right to provide advice	. 1		v
_		the use or distribution of funds?	4a		X
D	Do	you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		
P	ut E	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The	orga	nization is not a private foundation because it is: (Please check only ONE applicable box)			
5	Ц	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(I).			
6	Н	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	Н	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	Ш	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city,			
10	П	and state ► An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(i)			
	ш	(Also complete the Support Schedule in Part IV-A.)	v j.		
11a	X	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	П	A community trust Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12	П	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)	Line n om at	umbe ove	٢
					_
					_
14	\Box	An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 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.

	: You may use the worksheet in the instruc					
Cale	ndar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15	Gifts, grants, and contributions received (Do					
	not include unusual grants. See line 28.)	792,016	577,847			1,369,863
<u>16</u>	Membership fees received			·	<u> </u>	0
17	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing of		li.			
	facilities in any activity that is related to the					
	organization's chantable, etc., purpose					0
18	Gross income from interest, dividends,					ĺ
	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				<u> </u>	0
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			II.		0
22	Other income Attach a schedule Do not					
	include gain or (loss) from sale of capital assets	·			ļ	0
23	Total of lines 15 through 22	792,016	577,847			1,369,863
24	Line 23 minus line 17	792,016				1,369,863
25	Enter 1% of line 23	7,920				
26	Organizations described on lines 10 or	11: a Enter 2% of	amount in column (e),	line 24	▶ 26a	27,397
ь	Prepare a list for your records to show the					
	governmental unit or publicly supported o			•	,	
	amount shown in line 26a. Do not file this	-	-		l l	604,425
c	Total support for section 509(a)(1) test: E	· · · · · · · · · · · · · · · · · · ·			▶ 26c	1,369,863
d	Add Amounts from column (e) for lines:	-				
_		22	26b	604,425	▶ 26d	604,425
e	Public support (line 26c minus line 26d to				▶ 26e	765,438
f	Public support percentage (line 26e (nu		line 26c (denominato	r))	▶ 26f	55.8770%
27	Organizations described on line 12:					
	person," prepare a list for your records to				•	son."
	Do not file this list with your return. Ent			,		N/A
	•	002)	(2001)	1	(2000)	•
b	For any amount included in line 17 that w	•	, ,		· ·	records to
	show the name of, and amount received f		•		· ·	
	(Include in the list organizations described	•	-	` '	• •	• •
	the difference between the amount receiv	-		•		•
	amounts) for each year:			(4), 0		N/A
	·	02)	(2001)	•	(2000)	,
С	Add: Amounts from column (e) for lines:	•	•	•	(2000)	
·	` <i>'</i>	15 20	21		▶ 27c	1
	Add: Line 27a total.	and line 27b			≥ 27d	
d					27a	
e	Public support (line 27c total minus line 27c total support for section 500(a)(2) tost: 5	·	22 column (c)	275	2/8	
f	Total support for section 509(a)(2) test: E			▶ 27f	→ 27a	
9	Public support percentage (line 27e (nu					%
<u>h</u>	Investment income percentage (line 18,				27h	%
28	Unusual Grants: For an organization des		-			
	prepare a list for your records to show, for description of the nature of the grant. Do				-	
	accompanion of the nature of the grafft, DO	iiocine iiiis iist With \	rour return. DO NOUNC	iiuue iiiese giällis ili l	IIIG IJ.	

Schedule A (Form 990 or 990-EZ) 2004 INTERNATIONAL ACADEMY OF DETOXIFI - 94-3382902 Page 4 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 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, Yes No 29 other governing instrument, or in a resolution of its governing body? 29 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during 31 the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: 32 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 admissions, programs, and scholarships? 32c Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) 33 Does the organization discriminate by race in any way with respect to Students' rights or privileges? 33a Admissions policies? 33b Employment of faculty or administrative staff? 33c Scholarships or other financial assistance? 33<u>d</u> Educational policies? 33e Use of facilities? 33f Athletic programs? 33g Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement) Does the organization receive any financial aid or assistance from a governmental agency? 34a Has the organization's right to such aid ever been revoked or suspended? 34b If you answered "Yes" to either 34a or b, please explain using an attached statement.

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B 587, covering racial nondiscrimination? If "No," attach an explanation

35

Sch	nedule A (Form 990 or 990-EZ) 2004 INT	TERNATIONAL	ACADEMY OF	DETO	KIFI-	94-33	8290	2	Page
_	Part VI-A Lobbying Expen (To be completed	ditures by Electi d ONLY by an eliq	ng Public Chariti gible organization	i es (See potential)	page 9 Form	of the inst 5768)	ruction N/A	s.)	
<u>Ch</u>	eck a If the organization belo						limited	control" pr	ovisions apply.
	Limits o	n Lobbying Expe	enditures		[(a))		(b)
		itures" means amount			Ì	Affiliated tota	group Is		o be completed or ALL electing organizations
36	Total lobbying expenditures to influence			<u> </u>	36				
	Total lobbying expenditures to influence				37			<u> </u>	
	Total lobbying expenditures (add lines				38			- 	
	Other exempt purpose expenditures	,			39			<u> </u>	
40	Total exempt purpose expenditures (ad	dd lines 38 and 39)			40	-			
41	Lobbying nontaxable amount. Enter the	e amount from the follo	owing table-						
	If the amount on line 40 is-	The lobbying n	ontaxable amount is						
	Not over \$500,000	20% of the amoun	t on line 40	7					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15%	6 of the excess over \$500	,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10%	6 of the excess over \$1,0	00,000	41				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	of the excess over \$1,50	0,000					
	Over \$17,000,000	\$1,000,000							
	Grassroots nontaxable amount (enter 2				42				
	Subtract line 42 from line 36. Enter -0-				43				
44	Subtract line 41 from line 38 Enter -0-	if line 41 is more than	line 38		44				
	Caution: If there is an amount on eithe	r line 43 or line 44 vo	u must file Form 4700						
	Caution: It there is all amount on entire		aging Period Un		- F04	/h\		-,	
	(Some organization	ons that made a section							
		See the instructions for					columns	below.	
		200 410 1110112010110 10							
			Lobbying Expe	enditures Di	uring 4-1	'ear Averagiı ———	ng Perio	d	
	Calendar year (or	(a)	(b)	(c	:)	(0	 d)		(e)
	fiscal year beginning in) ▶	2004	2003	200	02	20	01		Total
45	Lobbying nontaxable amount								
	Lobbying ceiling amount (150% of		· · · · · · · · · · · · · · · · · · ·						
	line 45(e))							ł	
									
17	Total lobbying expenditures					1			
						 		 	
	Grassroots nontaxable amount								
	Grassroots ceiling amount (150% of								
	ine 48(e))								
		J				İ			·
	Grassroots lobbying expenditures Lobbying Activity	h. N	D 1 11 01 111						
F-4					4) // A \	(0 -	44.6		
Duri	(For reporting only ng the year, did the organization attemp	t to influence national	state or legal legislet	piete Par	<u>t VI-A)</u>	(See page	<u> 11 of</u>	the instr	uctions.)N/A
tter	npt to influence public opinion on a legis	slative matter or refere	, state of local legislat	ion, including	g any	[,	Yes No	, l	Amount
а	Volunteers	siauve matter or refere	mourn, unough the us	e or:		-	-		
b	Paid staff or management (Include co	mpensation in expens	es renorted on lines o	through h.)		<u> </u> -		-	
c	Media advertisements		co reported on mics C	anough II.)		-	\dashv	-	
d	Mailings to members, legislators, or th	e public				 	\dashv	+	
е	Publications, or published or broadcast					卜		+	
f	Grants to other organizations for lobby					<u> </u>	\dashv	+	
9	Direct contact with legislators, their sta		als, or a legislative bo	dy		一	$\neg \vdash$	 	
h	Rallies, demonstrations, seminars, con	nventions, speeches, I							
i	Total lobbying expenditures (Add lines	c through h.)					······································	 	
	If "Yes" to any of the above, also attac	h a statement giving a	detailed description	of the lobbyi	ng activit	ies.			

	S 11/15/2005 12	•						
	dule A (Form 9	Information Reg	arding Tr	ansfers To and Transaction	DETOXIFI - 94 - 3382902 ons and Relationships With Noncharita	ble Ex		Page 6 t
51	•	orting organization dire	ectly or indire		with any other organization described in section		_	
•		•		nonchantable exempt organization	, relating to political organizations?		Yes	No
а	(i) Cash		iization to a	Honoramable exempt organization	101.	51a(i)	163	X
	• • •	rassets				a(il)		X
b	- · ·	•						
	(i) Sales	or exchanges of asse	ts with a noi	ncharitable exempt organization		b(i)		x
	(ii) Purch	nases of assets from a	noncharitab	le exempt organization		b(ii)		X
	(iii) Renta	al of facilities, equipme	nt, or other	assets		b(iii)		Х
	(iv) Reim	bursement arrangeme	nts			b(iv)		X
		s or loan guarantees				b(v)	—	X
	• •		*	or fundraising solicitations		b(vi)	ļ	X
С	=			other assets, or paid employees		<u> </u>		X
d		•		· -	ımn (b) should always show the fair market value of	the		
	•	, -	•		ization received less than fair market value in any			
		1	nt, snow in c	(c)	other assets, or services received: (d)			
	(a) Line no	(b) Amount involved	Name o	of noncharitable exempt organization	Description of transfers, transactions, and sharing	g arrange	ments	
<u> N</u>	/A							_
			<u> </u>					
		 						
	_	ļ. <u></u>				.		
			 					
			 					
							_	
	-							
				····				
	described in	-	Code (other	ed with, or related to, one or more than section 501(c)(3)) or in section			es 🔀	No
		(a) Name of organization		(b) Type of organization	(c) Description of relationship			
	N/A			<u> </u>	· · · · · · · · · · · · · · · · · · ·			
	1							
				1	I .			

	rms		Mor	tgages and Otl	her Notes Payable		
9	90 / 990-PF						2004
		For ca	lendar year 2004, or	tax year beginning	, and ending	Caralana Ide	
Nam Ti	_e NTERNATIONAI	L ACA	ADEMY OF DE	TOXTET-		Employer la	entification Number
	ATION SPECIA					94-338	2902
_ <u>F</u>	ORM 990, PAR	RT IV	, LINE 64E	3 - ADDITION	AL INFORMATION		
		Name	of lender		Relationship to dis	aualified nersa	ın
(1)	BULLDOG CAR			IT I.P	Tellationship to dis		
(2)	RON & MIMI			11 111			
(3)							
4)							
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<u>(7)</u>							
8) 9)							
<u>3)</u> (10)		_ 					
					<u> </u>		
	Onginal amount borrowed		Date of loan	Maturity date	Repayment terms		Interest rate
1)	50,0	00	12/11/03	12/31/05			
2)	100,0		9/28/04	12/31/05			9.000
3)							
4)		_					
5)_							-
6)							
7) 8)					 		
8) 9)		_			-		
10)							
	ç,	ocumby pr	ovided by borrower		Purpose of	loan	
1)	NONE	cuity pr	Ovided by borrower		TEMPORARY WORKING C		NEEDS
<u>')</u>	NONE				FINANCING OF DETOXI		
2/ 3)					12112102110 01 2210111		1100101
4)							
5)_							
6)			_ 				
<u>7) </u>					 		_
8) 9)				 			
<u>3) </u>				···			
					Balance due at		ance due at
			mished by lender		beginning of year	e	nd of year
1)	\$150,000 C	HCA			50,000		50,000
2) 3)	\$100,000	NOU					100,000
3) 4)							
<u>-, </u>			 _				
6)							
7)							
8)							
9)							
10) Tot		 -			50,000		150,000
101	uio				30,000		<u> </u>

IADS INTERNATIONAL ACADEMY OF DETOXIFI-94-3382902 FYE: 12/31/2004

Federal Statements

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Statemen	Statement 1 - Form 990, Part II, Line 22 - Grants, Allocations and Contributions	ne 22 - Grants	, Allocations and	Contribution	ını	
Name Address	Relationship to Org	dı	Class of Activity			
Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explntn
DOWNTOWN MEDICAL PC.	NONE	DET	XIFICATION	ROJ		
139 FULTON ST., SUITE 515	ሱ	¢ //T'T08	ሱ			
NEW YORK, NY, 10038						
DR STEVEN LAGER, DO	NONE	DET	DETOXIFICATION PROJ	ROJ		
465 WILLIS AVE		13,300				
WILLISTON PARK, NY, 11596						
F.A.S.E.	MANAGEMENT	DET	DETOXIFICATION PROJ	ROJ		
4801 WILSHIRE BLVD., SUITE 215		0 5 6 7 5				
LOS ANGELES, CA, 90010						
HEALTHMED	NONE	DET	DETOXIFICATION PROJ	ROJ		
5501 POWER INN RD STE 130		/ 17 / 61				
SACRAMENTO, CA, 95820						
TOTAL	່ _ເ	993,124 \$	\$ 0	0		

IADS, INTERNATIONAL ACADEMY OF DETOXIFI-

94-3382902

Federal Statements

11/15/2005 12:33 PM

FYE: 12/31/2004

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description		Total Expenses	_	Program Service	_	Mgt & General	_	Fund- Raising
	\$		\$		\$		\$	
EXPENSES								
ADMINISTRATIVE SUPPORT SERV		114,078				114,078		
BANK AND CREDIT CARD CHARGES		4,205				4,205		
CONSULTING SERVICES		134,625		71,567		19,942		43,116
LICENSES, FEES AND TAXES		120				120		
MEMBERSHIPS, DUES AND FEES		656				656		
PROJECT SUPPORT/RESRCH COORDN	_	93,144		33,059	_	23,893		36,192
TOTAL	\$_	346,828	\$_	104,626	\$_	162,894	\$	79,308

Statement 3 - Form 990, Part III - Organization's Primary Exempt Purpose

THE PRIMARY PURPOSE OF THE ACADEMY IS TO PROVIDE INFORMATION TO PHYSICIANS, PUBLIC HEALTH SPECIALISTS, RESEARCHERS, HEALTH CARE PROVIDERS AND OTHERS INTERESTED IN IMPLEMENTING THE DETOXIFICATION PROCEDURE DEVELOPED BY L. RON HUBBARD TO TREAT THE EFFECTS OF CHEMICAL EXPOSURES AND DRUG ABUSE.

THE ACADEMY ALSO SUPPORTS EFFORTS BY ITS MEMBERS TO ASSIST PUBLIC HEALTH OFFICIALS AND HEALTH CARE PROVIDERS TO IMPLEMENT DETOXIFICATION ON A HUMANITARIAN BASIS.

International Academy of Detoxification Specialists #95-3382902 Statement of Program Service Accomplishments 2004

Background: Chemical Contamination and Human Detoxification

The blanketing of earth with man-made chemicals is an unprecedented event in human history. One of the greatest challenges facing the public health community is developing effective techniques to evaluate – and resolve – health effects resulting from environmental and occupational exposures.

Since the early 1980s, physicians, rehabilitation specialists and other caregivers have utilized the detoxification program developed by L. Ron Hubbard to bring relief to individuals suffering the effects of chemical exposures and drug abuse.

The program utilizes a precise regimen of exercise, sauna bathing, vitamin and mineral supplementation and other elements to reduce body accumulations of toxins.

A continuously evolving body of research projects in the US, Eastern Europe and Russia has examined the value of detoxification in addressing the human consequences of large-scale contamination. Findings have been published by organizations including the Royal Swedish Academy of Science, the World Health Organization's International Agency for Research on Cancer, and the US Environmental Protection Agency.

A steadily growing number of physicians, environmental health specialists, researchers, drug rehabilitation professionals and government officials have followed this work and made contributions to it. Applications of detoxification have ranged from treatment programs for addicted inmates to humanitarian efforts to improve the health of those affected by the Chernobyl disaster.

International conferences on chemical contamination and human detoxification in Los Angeles, California and Stockholm, Sweden strengthened the sense of community among these professionals and made it evident that an organization was needed to facilitate exchange of information regarding detoxification.

This is a primary function of the Academy. Through its website (www.detoxacademy.org), the Academy offers published research regarding detoxification and links to news and research regarding chemical body burden. It also facilitates communication between Academy members and healthcare professionals, exposed individuals, researchers and others with questions regarding detoxification.

While the Academy was conceived as a forum for information exchange, it also contributes to planning and supervision of special projects undertaken by Academy members and assists in bringing together teams of experts to respond to a particular need.

New York Rescue Workers Detoxification Project

In addition to the tragic loss of life, the September 11, 2001 attacks on the World Trade Center resulted in unprecedented releases of toxic chemicals. Among those exposed were tens of thousands of firefighters, police, paramedics, sanitation workers and other emergency responders.

Within weeks of the attacks, Academy members began to receive calls from union officials and firefighters who were concerned that the health consequences of the 9/11 exposures could go well beyond the "World Trade Center cough."

After numerous meetings in New York, it was evident that there was a demand for a facility that could offer detoxification services. In cooperation with rescue workers, union representatives, city officials, physicians and concerned citizens, members of the Academy worked to meet this demand.

The initiative was named The New York Rescue Workers Detoxification Project. During the first five months of the project, an advisory board of physicians and environmental health specialists was formed and a facility was established within blocks of the WTC site.

Delivery of services – which the board had mandated to be provided to rescue workers at no cost – began in September 2002.

Delivery and Results

By the end of 2004, 382 persons had completed detoxification, with uniformly positive results. A summary of 286 cases was completed in July 2004.

The following table presents a summary of improvements in symptoms commonly seen in rescue workers:

	Resolved	Greatly
	at discharge	improved
	·	at discharge
Mental Health		
Poor concentration and attention span	84%	12%
Fatigue	82%	14%
Irritability	81%	13%
Impaired memory and mental acuity	78%	20%
Anxiety	88%	12%
Depression	86%	14%
Loss of sleep	80%	16%
Headaches	77%	22%
Lung and Airway		
Sinusitis	91%	9%
Cough	88%	12%
Breathing difficulties	63%	31%
Skin		
Rash or dryness	70%	24%
Musculoskeletal		
Joint pain	72%	16%
Muscle pain	79%	19%
Muscle weakness	87%	12%
Other		
Increased use of alcohol after 9-11	84%	14%
Eye irritation	78%	12%
Impaired vision or hearing	69%	14%

Need for medication

Almost half of all patients required medication at start of treatment with half of these on airway medications. Upon completion of detoxification, 86 % of these patients no longer required medication. (Note: Reduction or discontinuation of medication occurs only when medically appropriate and is done under physician supervision.)

Endocrine function

Hormones secreted by endocrine glands regulate the activity of most of the vital organs in the body. Pollutants, especially PCBs and heavy metals, disrupt endocrine function, particularly the thyroid and adrenal glands. Effects include mood disorders, especially depression and anxiety, low energy, weight change, reproductive and skin problems, and altered cholesterol levels.

Results of blood chemistry testing of all patients show that approximately 30 percent of patients have abnormal levels of thyroid-related hormones at the start of treatment. By the end of treatment, 66% of these patients have normal thyroid function with the remaining third improved.

Cholesterol levels

Blood chemistry testing of all patients measured high total cholesterol in 20% of patients with high levels of LDL ("bad cholesterol") in 32% of patients. Of these patients, 61 percent had cholesterol and LDL levels in the desirable range after detoxification.

Balance testing

Balance is an indication of nervous system function. At the start of detoxification, 63% of all patients have measurable nervous system impairment by this test. Of these patients, half have normal measures following detoxification and most others were markedly improved.

Research

Pre-and post-detoxification blood samples were taken from six men who were present when the WTC towers collapsed. Analysis of pre-treatment samples found elevated levels of mono-ortho PCBs – the most toxic forms of PCB, with dioxin-like structure and effects. Levels were significantly reduced following detoxification.

These findings were presented by project advisor James Dahlgren at the 24th International Symposium on Halogenated Environmental Organic Pollutants and Persistent Organic Pollutants (POPs) — DIOXIN 2004 in Berlin, Germany on September 6-10. Co-authors on the paper included Arnold Schecter—one of the world's recognized experts on dioxin—and Olaf Papke of ERGO Laboratories in Hamburg, Germany, known worldwide for accurate biomonitoring of persistent chemicals.

Subsequent to this presentation, a second set of pre-treatment "baseline" samples were analyzed. These sample, taken a month later than the other pre-treatment samples, could further establish that the high pre-treatment levels were not an anomaly, or a reflection of routine elimination through normal body processes.

The samples were analyzed, and revealed that pre-treatment levels remained constant. This added significant power to the study. The findings were presented in October 2004, at a conference organized by the project in New York (details below).

In addition to its other value, this work was extremely valuable to the process of designing the protocol for a long-term treatment outcome study.

Findings of preliminary research regarding the rescue workers were also presented at a scientific meeting in the UK, convened for the presentation of the findings of a long-term outcome study of the benefits of detoxification for Chernobyl-exposed workers – research conducted at facilities of the Russian Academy of Medical Sciences. As a result of this presentation, the Russian researchers expressed a desire to collaborate on a paper comparing the

symptoms and improvements of the Chernobyl workers to those of the New York rescue workers.

Detoxification and Uniformed Services Personnel

The remarkable recovery of an army pilot made ill by 9/11 toxins was the impetus for a meeting of physicians, researchers and public health specialists who share an interest in service-related toxic exposures.

When he arrived for detoxification in February 2004, Captain Sean Donahue had been ill continuously since September 16, 2001, and was on the way to discharge from the military. His Mount Sinai physician, with no remaining treatment option but a disabling regimen of full-body steroids, suggested he might want to try the Hubbard program.

After three weeks of detoxification, he recovered. "To say that they were amazed by the results is putting it mildly," he recalls. His caregivers at the Deployment Health Clinical Center (DHCC), a facility housed at Washington's Walter Reed Medical Center, were also impressed. Examinations they conducted before and after detoxification provided medical confirmation of Donahue's rehabilitation.

A delegation from DHCC requested a tour of the New York treatment facility, and project director Keith Miller of the Foundation for Advancements in Science and Education (FASE) saw an opportunity to facilitate a discussion between them and FASE Associates and project advisors familiar with both detoxification and service-related exposures.

The group came together in early October for "Uniformed Services Personnel: Treatment Interventions for Toxic Exposures," a one-day conference organized by FASE. A primary purpose for the meeting was to explore how the lessons learned in New York could inform a treatment research agenda for Gulf War illness and bring detoxification to more veterans.

Participants included Lea Steele, PhD, the scientific director of the congressionally created Research Advisory Committee on Gulf War Illness, and Jim Binns, the committee chair; VA physician Boaz Milner, a project advisory

board member and one of the first scientists to publish a paper on "Gulf War Syndrome"; David Carpenter, PhD, of the State University of New York at Albany, an international expert on bioaccumulative toxins, currently investigating the legacy of Agent Orange under a grant from the National Institutes of Health; FASE Senior Associate David E. Root, MD, who has testified regarding the benefits of detoxification for Gulf War veterans before a presidential advisory board and at a Centers for Disease Control/National Institutes of Health conference on treatment research; and FASE Associate James Barnes, CHP, a Lockheed radiation specialist who serves on the Homeland Defense Committee of the Health Physics Society.

Dr. Antoinetta Gatti, head of the Department of Biomaterials at Italy's University of Modena, heard of the meeting and traveled to New York to contribute to the discussion. With funding from the European Commission, Dr. Gatti is investigating the toxicity of "nanoparticles"—particles smaller than one micron (one-millionth of a meter)—and has examined veterans of the Gulf and Balkan Wars.

Throughout the day of scientific presentations and discussion, several themes emerged. The need for a new approach to large-scale exposure incidents was evident—Vietnam and Gulf War veterans, for example, have waited decades for exposure studies to be completed, with virtually no progress in identifying treatment options.

It was also clear that the weight of evidence—both the 20-year history of detoxification studies and projects facilitated by FASE and the hundreds of recoveries achieved in New York—calls for aggressive investigation of the benefits of detoxification for those exposed to toxins on the battlefield.

City Council Hearings

At the request of New York City Councilwoman Margarita Lopez, project staff and completions provided testimony in two City Council hearings addressing the mental health impact of toxic exposures during the rescue and recovery efforts. As several of the project's medical advisors testified, a number of the toxins released in New York can affect the nervous system, causing symptoms that might also be diagnosed as "Post Traumatic Stress."

In testimony submitted to the council, toxicologist William Meggs, MD, PhD, chief of the division of toxicology at the Brody School of Medicine, recalled how this misdiagnosis had worked against the recovery of Gulf War veterans:

"Like the rescue workers, the veterans were told that they were not ill, but were manifesting 'post traumatic stress.' After hundreds of millions of dollars of research regarding Gulf War illness, we know this is not the case. We now know that many of the hundreds of thousands of men and women who served in the Gulf suffered a toxic assault on their nervous system, respiratory system, gastrointestinal system, and other body systems."

The expert testimony provided by project advisors – in combination with dramatic statements of illness and recovery provided by rescue workers – convinced the council that detoxification should be included in the services provided to rescue workers. The chair of the hearing expressed her intention to find government funds to support this.

Long Island Facility

One of the primary targets for 2004 was to help the hundreds of rescue workers living on Long Island who had asked that detoxification be available near to their homes and families.

In June, this wish became a reality, as firefighters, police officers, paramedics, local and state government officials, sanitation workers and community leaders cut the ribbon on a Long Island detoxification facility.

State Senator Michael Balboni, who represents Long Island, issued a proclamation in celebration of the opening. Balboni called the results being achieved through detoxification "the ultimate victory over the effects terrorists hoped to achieve."

INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS

FINANCIAL STATEMENTS

December 31, 2004

INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS

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December 31, 2004

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INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees International Academy of Detoxification Specialists

Robal W Sank CA

I have audited the accompanying statement of assets, liabilities and net assets - cash basis of the International Academy of Detoxification Specialists (a California non-profit public benefit corporation) as of December 31, 2004 and 2003, and the related statements of support, expenses and other changes in net assets - cash basis for the years then ended. These financial statements are the responsibility of the Organization's management. My responsibility is to express an opinion on these financial statements based on my audits.

I conducted my audits in accordance with generally accepted auditing standards. Those standards require that I plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. I believe that my audits provide a reasonable basis for my opinion.

As described in Note 1, these financial statements were prepared on the cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles.

In my opinion, the financial statements referred to above present fairly, in all material respects, the assets, liabilities, and net assets of the International Academy of Detoxification Specialists as of December 31, 2004 and 2003, and its support, expenses and other changes in net assets for the years then ended on the basis of accounting described in Note 1.

November 14, 2005

INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS STATEMENT OF ASSETS, LIABILITIES AND NET ASSETS - CASH BASIS

As of December 31, 2004 and 2003

	Decem	iber 31
	2004	2003
<u>ASSETS</u>		
Current Assets:		
Cash and cash equivalents	\$ 154,552	\$ 2,306
Total Assets	<u>\$ 154,552</u>	\$ 2,306
LIABILITIES AND NET ASSETS		
Current Liabilities:		
Loan payable	\$ 150,000	\$ 50,000
Nist Assets (Deficial)		
Net Assets (Deficit):	(100.440)	(47.604)
Unrestricted	(108,448) 113,000	(47,694)
Temporarily restricted	•	
Total Net Assets (Deficit)	4,552	(47,694)
Total Liabilities and Net Assets	\$ 154,552	\$ 2,306

The accompanying notes are an integral part of these financial statements.

INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS STATEMENT OF SUPPORT, EXPENSES AND OTHER CHANGES IN NET ASSETS - CASH BASIS

For the Years Ended December 31, 2004 and 2003

	2004	2003
UNRESTRICTED NET ASSETS		
SUPPORT - unrestricted	\$ 1,388,214	\$ 327,326
Net assets released from restriction	170,682	499,967
Interest income	23	
Total Support and Net Assets Released from Restriction	1,558,919	827,293
EXPENSES		
Program Expenses -		
New York Rescue Workers Detoxification Project:		
Grants for delivery of detoxification procedure	993,124	536,488
Other program-related expenses	190,729	167,724
Total Program Expenses	1,183,853	704,212
Administrative Expenses	221,643	147,388
Fund-raising Expenses	214,177	85,106
Total Expenses	1,619,673	936,706
Decrease in Unrestricted Net Assets	(60,754)	(109,413)
TEMPORARILY RESTRICTED NET ASSETS		
SUPPORT - temporarily restricted	283,682	464,690
Net assets released from restriction	(170,682)	(499,967)
Increase (Decrease) in Temporarily Restricted Net Assets	113,000	(35,277)
Increase (Decrease) in Total Net Assets	52,246	(144,690)
NET ASSETS (DEFICIT), beginning of year	(47,694)	96,996
NET ASSETS (DEFICIT), end of year	\$ 4,552	\$ (47,694)

The accompanying notes are an integral part of these financial statements.

INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS NOTES TO FINANCIAL STATEMENTS

December 31, 2004

NOTE 1 – BACKGROUND AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Background -

The International Academy of Detoxification Specialists, a California non-profit public benefit corporation (hereinafter "IADS" or the "Organization"), was incorporated in 1999. The Organization's primary purpose is to conduct and support research and education regarding the use of the detoxification procedure developed by L. Ron Hubbard to address the effects of environmental chemical contamination, occupational exposures and drug abuse. The Organization is tax exempt under Section 501(c)(3) of the Internal Revenue Code.

In 2002 the New York Rescue Workers Detoxification Project was formed in response to requests from union officials and rescue workers that detoxification be made available to firefighters, paramedics, police and other rescue workers present at the World Trade Center site. On this project, in addition to its research and education activities, IADS assists and supports public health officials and health care providers to deliver the detoxification procedure to New York rescue workers on a humanitarian basis.

Basis of Presentation -

The accompanying financial statements have been prepared under the cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles ("GAAP"). The principal differences between GAAP and the cash basis are that, under GAAP, support is generally recorded when pledged rather than when collected, and expenses and grants to others are generally recorded when incurred or committed to rather than when paid. Additionally, under the cash basis no statement of cash flows is presented.

Restricted Support -

Grants and contributions of cash or other assets are recorded as temporarily restricted support if they are received with donor stipulations regarding their use. When a donor-imposed restriction expires, that is, when a stipulated time restriction ends or stipulated purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of support, expenses and other changes in net assets as net assets released from restriction.

Functional Allocation of Expenses -

The Organization allocates direct costs incurred to its respective program, administrative, or fund-raising expense category. Indirect costs are allocated based on management's estimate of the relative effort expended.

INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS NOTES TO FINANCIAL STATEMENTS

December 31, 2004

NOTE 2 – LOAN PAYABLE

In December 2003 the Organization obtained a short-term loan for \$50,000 from a benefactor. In September 2004 an additional \$100,000 was advanced. The revised loan agreement provides for interest at 9% per annum. The loan is unsecured. Management currently expects that the loan will be repaid, or forgiven by the benefactor, prior to December 31, 2005.

NOTE 3 – CONCENTRATIONS OF CREDIT RISK

From time to time during the year ended December 31, 2004, the Organization's cash balances in banks exceeded the federally insured limits. Cash balances in excess of the federally insured limits were approximately \$72,741 at December 31, 2004.

NOTE 4 – CONCENTRATIONS OF SUPPORT

During the years ended December 31, 2004 and 2003 the Organization received approximately 26% and 36% of its support, respectively, from one major contributor, and 10% and 25% of its support, respectively, from a second major contributor. As it is always considered reasonably possible that any contributor could be lost, it therefore must also be considered that the Organization's ability to carry out its purposes could be impaired by such a loss. Management believes that the Organization's fundraising efforts subsequent to December 31, 2004 have been and will continue to be successful, including obtaining a substantial number of new contributors, and that the impact of the loss of any major contributor would be mitigated by contributions from these new contributors or other sources identified by its ongoing fundraising efforts.

NOTE 5 – RELATED PARTY TRANSACTIONS

The Organization requested, for cost-effectiveness purposes, that the New York Rescue Workers Detoxification Project, its primary activity during 2004 and 2003, be managed by the Foundation for Advancements in Science and Education ("FASE"), a California non-profit public benefit corporation tax-exempt under Section 501(c)3 of the Internal Revenue Code with which the Organization shares common management. Under the terms of the agreement, FASE is to provide support services to IADS. The agreement specifies that FASE' compensation shall be in accordance with the project's budget as it may exist from time to time, and that payment thereof is subject to the availability of funds. Total payments

INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS NOTES TO FINANCIAL STATEMENTS

December 31, 2004

to FASE under this agreement were \$114,078 in 2004 and \$109,945 in 2003, primarily for research coordination and administrative support.

NOTE 6 - COMMITMENTS AND CONTINGENCIES

Effective January 1, 2004, the Organization entered into an agreement with the Association for Better Living and Education ("ABLE"), a non-profit public benefit corporation tax-exempt under Section 501(c)(3) if the Internal Revenue Code. In exchange for certain management, program and fundraising services provided by ABLE as specified in the agreement, the Organization has agreed to pay ABLE an amount generally equal to 5% of contributions received. The agreement expires in one year, is subject to automatic renewal, but may be terminated by either party upon thirty days' notice. A total of \$71,679 was paid to ABLE in 2004 pursuant to this agreement.

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INDEPENDENT AUDITOR'S REPORT ON SUPPLEMENTARY INFORMATION

To the Board of Trustees International Academy of Detoxification Specialists

My report on my audit of the basic financial statements of the International Academy of Detoxification Specialists for 2004 and 2003 appears on Page 1. I conducted my audits in accordance with generally accepted auditing standards for the purpose of forming an opinion on the basic financial statements taken as a whole. The schedule of functional expenses is presented for supplementary analysis and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in my opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

November 14, 2005

INTERNATIONAL ACADEMY OF DETOXIFICATION SPECIALISTS SCHEDULE OF FUNCTIONAL EXPENSES - CASH BASIS

For the Years Ended December 31, 2004 and 2003

		Total	18,372	43,799	1,392	38,676	69,216	10,684		536,488	10,425	70	384	450		53,002	92	53,124	8,733	98	91,713	936,706
			€9							v,												↔
	d-raising	Expenses		,	1	26,500	12,678	009			•		•	,		14,363	•	19,269	2,156	,	9,540	85,106
33	Fun	ΩÌ	↔																		}	8
2003	Administrative Fund-raising	Expenses	18,372	43,799	1,392	1	5,967	,		•	•	70	384	•		14,363	92	16,448	3,600	98	42,815	147,388
	Adm	臼	63																		1	8
	Program	Expenses		,	1	12,176	50,571	10,084		536,488	10,425	ı	•	450		24,276	•	17,407	2,977	1	39,358	704,212
	P.	Ě	69																		}	69
		Total	30,073	114,078	4,205	104,871	134,625	•		993,124	4,656	120	959	•		93,144	5,071	41,355	7,770	•	85,925	\$ 1,619,673
		1	69																		- 1	
	Administrative Fund-raising	Expenses		•	•	89,319	43,116	ı		•	•	•		•		36,192	3,295	25,485	•	•	16,770	\$ 214,177
2004	re Fu		€ 9	~	10	~	7				9	0	9			3	9	_	0		21	_
2	inistrativ	spenses	\$ 30,073	114,078	4,205	328	19,942	1		•	4,656	120	959	i		23,893	1,776	3,111	7,770	ı	11,035	221,643
	Adm	ΔÎ	↔																			↔
	Program	Expenses	\$	1		15,224	71,567			993,124	•	ı	ı	ı		33,059	1	12,759	ı	ı	58,120	\$ 1,183,853
			Accounting services	Administrative support services	Bank and credit card charges	Conferences, conventions and meetings	Consulting services	Equipment rental and maintenance	Grants for delivery of	detoxification procedure	Legal fees	Licenses, fees and taxes	Memberships, dues and fees	Photographic services	Project support and	research coordination	Postage and shipping	Printing and publications	Supplies	Telephone	Travel	Total

See Independent Auditor's Report on Supplementary Information.

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		filing for an Additional (not automatic) 3-Month Extension, complete or	Page 2
No	te. Only c	omplete Part II if you have already been granted an automatic 3-month extensi filling for an Automatic 3-Month Extension, complete only Part I (on page	on on a previously filed Form 8868.
		Additional (not automatic) 3-Month Extension of Time—Must F	
	oe or	Name of Exempt Organization	Employer identification number
pri	nt	International Academy of Detoxification Specialists	94 3382902
	by the	Number, street, and room or suite no. If a P O. box, see instructions.	For IRS use only
due	date for	4801 Wilshire Blvd., Suite 216	
retu	rn. See ructions	City, town or post office, state, and ZIP code For a foreign address, see instructions.	
_		Los Angeles, CA 90010 of return to be filed (File a separate application for each return):	
	Form 990		["] F 5007
	Form 990	= 1 0111 000 1 (000, 101(a) 01 400(a) (100)	Form 5227
Ħ	Form 990		☐ Form 6069 ☐ Form 8870
	Form 990)-PF	
STO	P: Do no	t complete Part II if you were not already granted an automatic 3-month e	
• T.	he books	are in the care of ▶ Ali Datardina	
		No. ▶ (323) 937-9911 # 258 FAX No. ▶ (323)	937-7440
● If	the organ	nization does not have an office or place of business in the United States,	check this box ▶ □
		a Group Return, enter the organization's four digit Group Exemption Num	
		group, check this box 🕨 🔲. If it is for part of the group, check this b	ox 🕨 🔲 and attach a list with the
		INs of all members the extension is for.	
4	I reques	st an additional 3-month extension of time until 15 November	, 20 05 .
5		ndar year 2004, or other tax year beginning , 20 , 20 ,	
6 7	State in	ax year is for less than 12 months, check reason: I Initial return I Findetail why you need the extension The information needed to prepare led date of August 15, 2005 is not available.	a complete and accurate return by the
8a		pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the todable credits. See instructions	
h		i i	RECEIVED
U		pplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refunda ble ments made. Include any prior year overpayment allowed as a credit a	
c		Due. Subtract line 8b from line 8a. Include your payment with this form,	AUG 1 8 2005: [S]
	with FT[) coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Sys	(em) See instructions:- (*)
		Signature and Verification C	GDEN, UT
Unde it is t	er penalties o rue, correct,	of perjury, I declare that I have examined this form, including accompanying schedules and state and complete, and that I am authorized to prepare this form.	ements, and to the best of my knowledge and belief,
Signa	ature >	(// Title ➤ Secretary	Date > 8//2/05
ΔZ		Notice to Applicant—To Be Completed by th	e IRS
		approved this application. Please attach this form to the organization's return.	
IJ	date of the	not approved this application. However, we have granted a 10-day grace period from e organization's return (including any prior extensions). This grace period is conside required to be made on a timely return. Please attach this form to the organization.	red to be a valid extension of time for elections
	We have	not approved this application. After considering the reasons stated in item 7, we car a are not granting a 10-day grace period.	
		ot consider this application because it was filed after the extended due date of the	EXTENSION APPROVED
_	••		
		Ву [.]	SED A 7 2005
Direc			<u> </u>
Alte	rnate Ma	iling Address — Enter the address if you want the copy of this application address different than the one entered above.	<u> </u>

Number and street (include suite, room, or apt. no.) or a P.O. box number

City or town, province or state, and country (including postal or ZIP code)

Type or print