

Department of the Treasury - Internal Revenue Service  
**Certification of Filing a Tax Return**

Taxpayer name (and spouse's, if joint return)

Taxpayer social security number

Spouse's social security number

I certify that the above taxpayer(s) has filed a U.S. individual income tax return, Form \_\_\_\_\_, for the tax year ended \_\_\_\_\_, which is a return required to be filed by a citizen or resident alien of the United States.  
*(Form 1040 series)*

Corporation name

Employer identification number

*World Institute of Scientology Enterprises* 95-3955907

I certify that the above corporation has filed a U.S. corporation (or S corporation) income tax return, Form 1120, as a domestic corporation for the tax year ended 12/31/90.  
*(Form 1120 series)*

Corporation name

Employer identification number

I certify that the above corporation was included in a consolidated Form 1120, U.S. Corporation Income Tax Return, for the tax year ended \_\_\_\_\_. The return was filed by the parent corporation shown below.

Parent corporation name

Employer identification no.

(Use the space provided below for all other statements of certification.)

(Signature)

(Date)

(for) District Director

(Official Stamp)

(Signature)

(Date)

(for) Director, Internal Revenue Service Center

U.S. Corporation Income Tax Return

For calendar 1991 or tax year beginning 01-01-91, 1991, ending 12-31-91, 19

OMB No. 1545-0023

1991

Instructions are separate. See page 1 for Paperwork Reduction Act Notice.

- A. Check if a--  
 (1) Consolidated return (attach Form 953)   
 (2) Personal holding co (attach Sch PH)   
 (3) Personal service corp (as defined in Temp. Regs. sec. 1.441-4T--see inst)

Use IRS label otherwise, please print or type.

WORLD INSTITUTE OF SCIENTOLOGY  
 ENTERPRISES AND SUBSIDIARY  
 6331 HOLLYWOOD BLVD #701  
 LOS ANGELES, CA 90028

- B Employer identification number  
 95-3955907  
 C Date incorporated  
 2/02/83  
 D Total assets (see Spec'fic Inst)

E Check applicable boxes: (1)  Initial return (2)  Final return (3)  Change in address

\$ 767,165

Income

Deductions

Tax and Payments

|     |  |           |                      |        |                   |     |           |
|-----|--|-----------|----------------------|--------|-------------------|-----|-----------|
| 1a  | Gross receipts or sales  | 3,737,090 | b Less returns/allow |        | c Bal             | 1c  | 3,737,090 |
| 2   | Cost of goods sold (Schedule A, line 7)  |           |                      |        |                   | 2   | 798,090   |
| 3   | Gross profit. Subtract line 2 from line 1c   |           |                      |        |                   | 3   | 2,939,000 |
| 4   | Dividends (Schedule C, line 19)  |           |                      |        |                   | 4   |           |
| 5   | Interest   |           |                      |        |                   | 5   | 7,819     |
| 6   | Gross rents  |           |                      |        |                   | 6   |           |
| 7   | Gross royalties  |           |                      |        |                   | 7   | 263,539   |
| 8   | Capital gain net income (attach Schedule D (Form 1120))  |           |                      |        |                   | 8   |           |
| 9   | Net gain or (loss) from Form 4797, Part II, line 18 (attach Form 4797)                                   |           |                      |        |                   | 9   |           |
| 10  | Other income   |           |                      |        | SEE STATEMENT A-1 | 10  | 2,930     |
| 11  | Total income. Add lines 3 through 10   |           |                      |        |                   | 11  | 3,213,288 |
| 12  | Compensation of officers (Schedule E, line 4)  |           |                      |        |                   | 12  | 67,320    |
| 13a | Salaries and wages   | 284,433   | b Less jobs credit   |        | c Bal             | 13c | 284,433   |
| 14  | Repairs  |           |                      |        |                   | 14  | 75,389    |
| 15  | Bad debts  |           |                      |        |                   | 15  |           |
| 16  | Rents  |           |                      |        |                   | 16  | 120,264   |
| 17  | Taxes  |           |                      |        | SEE STATEMENT T-1 | 17  | 87,601    |
| 18  | Interest   |           |                      |        |                   | 18  | 4,241     |
| 19  | Contributions (see Instructions for 10% limitation)  |           |                      |        | SEE STATEMENT A-1 | 19  | 17,098    |
| 20  | Depreciation (attach Form 4562)  |           | 20                   | 17,285 |                   | 20  |           |
| 21  | Less depreciation claimed on Schedule A and elsewhere on return  |           | 21a                  |        |                   | 21b | 17,285    |
| 22  | Depletion  |           |                      |        |                   | 22  |           |
| 23  | Advertising  |           |                      |        |                   | 23  | 386,429   |
| 24  | Pension, profit-sharing, etc., plans   |           |                      |        |                   | 24  |           |
| 25  | Employee benefit programs  |           |                      |        |                   | 25  |           |
| 26  | Other deductions   |           |                      |        | SEE STATEMENT A-1 | 26  | 1,999,342 |
| 27  | Total deductions. Add lines 12 through 26  |           |                      |        |                   | 27  | 3,059,402 |
| 28  | Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11 |           |                      |        |                   | 28  | 153,886   |
| 29  | Less: a Net operating loss deduction   |           | 29a                  |        |                   | 29a |           |
|     | b Special deductions (Schedule C, line 20)   |           | 29b                  |        |                   | 29b |           |
| 30  | Taxable income. Subtract line 29c from line 28   |           |                      |        |                   | 30  | 153,886   |
| 31  | Total tax (Schedule J, line 10)  |           |                      |        |                   | 31  | 43,265    |
| 32  | Payments: a '90 overpaid credited to 1991  | 32a       |                      |        |                   |     |           |
|     | b 1991 estimated tax payments  | 32b       | 2,370                |        |                   |     |           |
|     | c Less 1991 refund applied for on Form 4466  | 32c       |                      |        |                   |     |           |
|     | d Tax deposited with Form 7004   | 32d       |                      | 2,370  |                   |     |           |
|     | e Credit from regulated investment companies (attach Form 2439)  | 32e       |                      | 30,000 |                   |     |           |
|     | f Credit for Federal tax on fuels (attach Form 4136)   | 32f       |                      |        |                   |     |           |
|     | g Credit for Federal tax on fuels (attach Form 4136)   | 32g       |                      |        |                   | 32h | 32,370    |
| 33  | Estimated tax penalty. Check if Form 2220 is attached  |           |                      |        |                   | 33  | 69        |
| 34  | Tax due. If the total of lines 31 and 33 is larger than line 32h, enter amount owed                      |           |                      |        |                   | 34  | 10,964    |
| 35  | Overpayment. If line 32h is larger than the total of lines 31 and 33, enter amount overpaid              |           |                      |        |                   | 35  |           |
| 36  | Enter amount of ln 35 you want credited to 1992 estimated tax  |           |                      |        | Refunded          | 36  |           |

Please Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: \_\_\_\_\_ Date: \_\_\_\_\_ Title: \_\_\_\_\_

Paid Preparer's Use Only

Preparer's signature: \_\_\_\_\_  
 Firm's name for you, if self-employed and address: 2950 LOS FELIZ BLVD. #100  
 LOS ANGELES, CA

Check if self-employed

Preparer's social security number: 384-46-4498

EIN No. 95-3387333

Zip Code 90039-