Form **99**0

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

4	roi ui	ie 1995 C	alendar	year, OR tax year period beg	inning	, 19	95, and end	ing	, 19
В	Check		Please use IRS	C Name of organization				D Employer ide	entification number
\neg	-	of address	label or print or	Number and street (or D.O. boy	if mail is not delivered to a	troot addrace	N Doom/suito	E State registr	ation number
\neg	nitial re	type.					E State registr	ation number	
_	Final ret		See Specific						
(required	ed return d also for porting)	Instruc- tions.	City, town, or post office, state,	and ZIP code			F Check ►	if exemption application is pending
			ation—▶	Exempt under section 501	(c)() 	umber) OR I	► sectio	n 4947(a)(1) nor	nexempt charitable trust
		_		empt organizations and 4947(a					
						_			
н(а)	is this	a group re	eturn tilea	for affiliates?	L Yes L	I ON I			'es," enter four-digit group
	16								
				r of affiliates for which this return is		_	Accounting m		ash
(c)	Is this	a separate	e return fi	led by an organization covered by a	group ruling? Yes	_ No _	U Other (sp	ecity) ►	
<				organization's gross receipts are nor ne mail, it should file a return withou	•	-			th the IRS; but if it received
Vot			-	e used by organizations with gro					.000 at end of year.
	art I			xpenses, and Changes	· · · · · · · · · · · · · · · · · · ·				
				•		una Daio	11003 (300	, motractions	on pages 7 14.)
	1			gifts, grants, and similar am		4.			
				upport		1a			
			•	support		1b			
	С	Govern	ment co	ontributions (grants)	L	1c			
	d	Total (a	dd lines	1a through 1c) (attach sched	lule of contributors)				
		(cash \$		noncash \$)			. 1d	
	2			e revenue including governme					
	3			ues and assessments				3	
	4			ings and temporary cash in				4	
								5	
	5	Dividends and interest from securities						.	
	6a							_	
				penses		6b			
	l _			me or (loss) (subtract line 6	o from line 6a)			. 6c	
ne	7			ent income (describe >	(A) Securities	(P)	Other) 7	
Revenue	8a			from sale of assets other			Other		
Re		than inv	-			8a			
	b	Less: co	st or oth	ner basis and sales expenses.		8b		_	
	С	Gain or	(loss) (attach schedule)		8c			
	d	Net gair	า or (los	s) (combine line 8c, columns	(A) and (B))			. 8d	
	9	Special	events	and activities (attach sched	dule)				
	a	Gross r	evenue	(not including \$	of				
		contribu	utions r	eported on line 1a)		9a			
	b	Less: d	lirect ex	penses other than fundraisi	ng expenses . L	9b			
	С	Net inc	ome or	(loss) from special events (s	subtract line 9b from	line 9a)		9c	
				inventory, less returns and	1	I0a			
	b			goods sold		l0b			
	c			loss) from sales of inventory (at		t line 10h fr	om line 10a)	10c	
	11								
	12			(add lines 1d, 2, 3, 4, 5, 6c, 7					
	13			ces (from line 44, column (B				13	
es		•			•				
Expenses	14								
ğ	15								
Ш	16 17	Total a	nis to a	ffiliates (attach schedule) . es (add lines 16 and 44, colu				10	
,-									
Net Assets	18			icit) for the year (subtract lin					
Ass	19								
et	20			in net assets or fund balar					
Z	21	Net ass	ets or fu	und balances at end of year (combine lines 18, 19,	and 20)		. 21	

Form 990 (1995) 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 instructions on page 14.)

	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 \$ noncash \$)	22					
23	Specific assistance to individuals (attach schedule)	23					
24	Benefits paid to or for members (attach schedule).	24					
25	Compensation of officers, directors, etc	25					
26	Other salaries and wages	26					
27	Pension plan contributions	27					
28	Other employee benefits	28					
29	Payroll taxes	29					
30	Professional fundraising fees	30					
31	Accounting fees	31					
32	Legal fees	32					
33	Supplies	33					
34	Telephone	34					
35	Postage and shipping	35					
36	Occupancy	36					
37	Equipment rental and maintenance	37					
38	Printing and publications	38					
39	Travel	39					
40	Conferences, conventions, and meetings	40					
41	Interest	41					
42	Depreciation, depletion, etc. (attach schedule)	42					
43	Other expenses (itemize): a	43a					
b	•	43b					
С		43c					
d		43d					
е		43e					
44	Total functional expenses (add lines 22 through 43) Organizations						
	completing columns (B)-(D), carry these totals to lines 13-15 .	44					
	orting of Joint Costs.—Did you report in column						
educational campaign and fundraising solicitation? $$							
	es," enter (i) the aggregate amount of these joint cost					\$ \$;	
	the amount allocated to Management and general \$						
	rt III Statement of Program Service Acco					D	
Wha	at is the organization's primary exempt purpose?	▶				Program Service Expenses	
All (organizations must describe their exempt purp	ose a	achievements. Sta	ite the number o	of clients served,	(Required for 501(c)(3) and	
	lications issued, etc. Discuss achievements that a 4947(a)(1) nonexempt charitable trusts must also					(4) orgs., and 4947(a)(1) trusts; but optional for	
una	+747(a)(1) Hollexempt chantable trusts must also	CITE	i the amount or gi	and anocation	ons to others.	others.)	
а							
	(0	rants	and allocations	\$			
				Ψ	,		
b							
	(0	rants	and allocations	\$	······		
•	(-			*	,		
C							
	(Grants and allocations \$)						
٦	(-				,		
d							
	(0	Fants	and allocations	\$)		
e	<u>_</u>		and allocations	\$)		
-	Total of Program Service Expenses (should equ			Program services)			

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Part IV Balance Sheets (See instructions on pages 17-19.)

Ν	lote:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year	
	45	Cash—non-interest-bearing		45		
	46	Savings and temporary cash investments .		46		
	70	Savings and temporary cash investments :				
	47a	Accounts receivable	47a			
		Less: allowance for doubtful accounts	47b	4	47c	
		Less. unowance for doubtrar decounts				
	48a	Pledges receivable	48a			
		Less: allowance for doubtful accounts	48b		48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, truste				
		(attach schedule)			50	
	51a	Other notes and loans receivable (attach	51a			
Assets		schedule)				
SS		Less: allowance for doubtful accounts			51c	
1	52	Inventories for sale or use			52 53	
	53	Prepaid expenses and deferred charges .			54	
	54	Investments—securities (attach schedule)			34	
	55a	Investments—land, buildings, and equipment: basis	55a			
	h	Less: accumulated depreciation (attach				
	b	schedule)	5	55c		
	56	Investments—other (attach schedule)			56	
	57a	Land, buildings, and equipment: basis	57a			
	b	Less: accumulated depreciation (attach				
		•	57b		57c	
	58	Other assets (describe ►)		58	
	59	Total assets (add lines 45 through 58) (must	t equal line 74)		59	
	60	Accounts payable and accrued expenses .			60	
	61	Grants payable			61	
S	62	Deferred revenue		62		
Liabilities	63	Loans from officers, directors, trustees, and				
ig		schedule)		63		
Ë		Tax-exempt bond liabilities (attach schedule)		64a		
		Mortgages and other notes payable (attach		64b 65		
	65	Other liabilities (describe ►		65		
	66	Total liabilities (add lines 60 through 65).		66		
	Orga	nizations that follow SFAS 117, check here ▶				
	Jiya	67 through 69 and lines 73 and 74.	and complete lines			
es	67	Unrestricted			67	
anc	68	Temporarily restricted			68	
3al	69	Permanently restricted		69		
Þ	Orga	nizations that do not follow SFAS 117, check				
필		complete lines 70 through 74.			70	
Net Assets or Fund Balances	70	Capital stock, trust principal, or current fund		70 71		
şts	71 72	Paid-in or capital surplus, or land, bldg., and Retained earnings, accumulated income, en		72		
SS		G			-	
¥Α	73	Total net assets or fund balances (add line 70 through 72; column (A) must equal line				
ž		equal line 21)		73		
	74	Total liabilities and net assets/fund balance	ces (add lines 66 and 73)		74	

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Pai	rt IV-A		liation of Revenu I Statements witl			Part	F	econciliation of inancial Stater eturn			
а			and other support			а		enses and lo			
b		included or	statements > n line a but not on	а		b	Amounts i	nancial statemen ncluded on line , Form 990:		а	
(1)	Net unrea	ilized gains	\$			(1)	Donated and use of	services			
(2)	Donated					(2)	Prior year acreported on	ljustments			
(3)		es of prior	\$			(2)	Form 990 .	<u>\$</u>			
(4)	Other (sp	ecify):	<u>*</u>				Losses rep	rm 990 . <u>\$</u>			
			\$			(4)	Other (spe	•			
	Add amou	unts on lines	s (1) through (4) ►	b			Δdd amour		rough (4)>	b	
c d	Amounts	inus line b. included o) but not oi	n line 12,	С		c d	Line a min Amounts i	nus line b ncluded on line but not on line	▶ 17,	С	
	Investmen not includ 6b, Form	t expenses led on line 990					Investment not include 6b, Form 99	expenses d on line 90 \$			
(2)		:	\$			(2)	Other (spe				
e Pai	Add amo Total reve (line c plu rt V Lis	unts on line enue per li us line d) .	es (1) and (2) ne 12, Form 990	e rustees, ar	nd Key E	e mplo	Add amou Total expe (line c plus	nts on lines (1) nses per line 17, s line d)	Form 990 ▶	d e ated	see instructions
		(A) Nam	e and address		(B) Title ar week de	nd avera	age hours per to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions employee benefit pl deferred compens	lans &	(E) Expense account and other allowances
75	organizatio	on and all re	or, trustee, or key en lated organizations, o edule—see instruct	of which mor	e than \$10	ate coi ,000 w	mpensation oras provided	of more than \$100 by the related org),000 from yo anizations? I	ur ▶	☐ Yes ☐ No

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Par	t VI Other Information (See instructions on pages 20–23.)		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		
77	Were any changes made in the organizing or governing documents but not reported to the IRS? $$. $$.	77		
	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		
b	If "Yes," has it filed a tax return on Form 990-T , Exempt Organization Business Income Tax Return, for this			
	year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach	70		
	a statement	79		
80a	Is the organization related (other than by association with a statewide or nationwide organization) through			
	common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		
b	If "Yes," enter the name of the organization ▶			
	and check whether it is \square exempt OR \square nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the			
	instructions for line 81	-		
b	Did the organization file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for	81b		
	this year?	010		
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		
h	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 for reporting in Part III.).			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a		
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b		
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	84b		
85	or gifts were not tax deductible?	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	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.			
	Dues, assessments, and similar amounts from members	-		
	Section 162(e) lobbying and political expenditures	-		
	riggiogate heriacadeticio dinediti el section escoto, (i), i daes notices	-		
	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85g		
_	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its			
"	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following			
	tax year?	85h		
86	Section 501(c)(7) organizations.—Enter:			
	Initiation fees and capital contributions included on line 12	-		
	of 033 receipts, included of time 12, for public use of club facilities.	-		
87 h	Section 501(c)(12) organizations.—Enter: a Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources	1		
b	against amounts due or received from them.)			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX	88		
89	Public interest law firms.—Attach information described in the instructions.			
90	List the states with which a copy of this return is filed ▶			
91	The books are in care of ►			
	Located at ► ZIP code ►			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 , U.S. Income Tax Retu and Trusts.—Check here			

Part VII	Analysis of Income-Producing I	Activities (See in	structions or	, 		_
_	oss amounts unless otherwise		siness income		ion 512, 513, or 514	(E) Related or
indicated		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	exempt function income
	ogram service revenue:	Business code	, unount	Exclusion code	, , , , , , , , , , , , , , , , , , ,	liicome
_						
f						
g Fee	es and contracts from government agenci	es				
94 Me	mbership dues and assessments					
	erest on savings and temporary cash investmer					
	ridends and interest from securities					
	t rental income or (loss) from real estate:					
	ot-financed property					
	debt-financed property					
	rental income or (loss) from personal proper ner investment income					
	n or (loss) from sales of assets other than inventor					
	t income or (loss) from special events	·				
	oss profit or (loss) from sales of inventory					
	ner revenue: a					
c						
d						
е						
	otal (add columns (B), (D), and (E))					
	I (add line 104, columns (B), (D), and (E))				.▶	
Part VII	ne 105 plus line 1d, Part I, should equal t Relationship of Activities to the			t Durnosas		
Line No.	·				montantly to the	accomplishment
Line No. ▼	of the organization's exempt purposes (or					
		31	<u> </u>	1 1 / 1		,
Part IX	Information Regarding Taxable S	uhsidiaries (Com	nlete this Da	rt if the "Ves	" hay on line 8	18 is checked)
	<u> </u>	•	Natu		Total	T
	ue, address, and employer identification umber of corporation or partnership	Percentage of ownership interest	business		income	End-of-year assets
		%				
		%				
		%				
		%				
	Under penalties of perjury, I declare that I have a knowledge and belief, it is true, correct, and con					
	any knowledge. (See Specific Instructions, page		(otiloi tilali	os., 15 basea C	aomidion of v	o properor ries
Sign						
Here	Signature of officer	Date		Type or print nam		
Paid	Preparer's		Date	Check self-		social security no.
Preparer's	signature Signature			employ	· .	i
Use Only	yours if self-employed)			EIN	<u> </u>	
	and address			ZIP cod	ie 🖊	