

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) charitable trust

OMB No. 1545-0047

1992This Form is
Open to Public
Inspection**Note:** The organization may have to use a copy of this return to satisfy state reporting requirements.**A** For the calendar year 1992, or fiscal year beginning , 1992, and ending E007-3 , 19 E00.

Please use IRS label or print or type. See Specific Instructions.	B Name of organization E002		C Employer identification number E003
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite		D State registration number
	City, town, or post office, state, and ZIP code E009 E010		E If address changed, check box <input type="checkbox"/>

F Check type of organization—Exempt under section <input type="checkbox"/> 501(c) (insert number), OR <input type="checkbox"/> section 4947(a)(1) charitable trust	G If exemption application pending, check box <input type="checkbox"/>
H(a) Is this a group return filed for affiliates? <input type="checkbox"/> Yes <input type="checkbox"/> No	I If either box in H is checked "Yes," enter four-digit group exemption number (GEN) E014
(b) If "Yes," enter the number of affiliates for which this return is filed: E012	J Accounting method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
(c) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

Note: Form 990EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

Part I Statement of Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1 Contributions, gifts, grants, and similar amounts received:			
	a Direct public support	1a	E021	
	b Indirect public support	1b	E022	
	c Government grants	1c	E023	
	d Total (add lines 1a through 1c) (attach schedule—see instructions)	1d	E024	
	2 Program service revenue (from Part VII, line 93)	2	E025	
	3 Membership dues and assessments (see instructions)	3	E026	
	4 Interest on savings and temporary cash investments	4	E027	
	5 Dividends and interest from securities	5	E028	
	6a Gross rents	6a	E029	
	b Less: rental expenses	6b	E030	
	c Net rental income or (loss)	6c	E031	
7 Other investment income (describe ▶)	7	E032		
Revenue	8a Gross amount from sale of assets other than inventory	(A) Securities	(B) Other	
		E033	8a	E036
	b Less: cost or other basis and sales expenses	E034	8b	E037
	c Gain or (loss) (attach schedule)	E035	8c	E038
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	E039	
	9 Special fundraising events and activities (attach schedule—see instructions):			
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	E040	
	b Less: direct expenses	9b	E041	
	c Net income	9c	E042	
	10a Gross sales less returns and allowances	10a	E043	
b Less: cost of goods sold	10b	E044		
c Gross profit or (loss) (attach schedule)	10c	E045		
11 Other revenue (from Part VII, line 103)	11	E046		
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	E047		
Expenses	13 Program services (from line 44, column (B)) (see instructions)	13	E048	
	14 Management and general (from line 44, column (C)) (see instructions)	14	E049	
	15 Fundraising (from line 44, column (D)) (see instructions)	15	E050	
	16 Payments to affiliates (attach schedule—see instructions)	16	E051	
	17 Total expenses (add lines 16 and 44, column (A))	17	E052	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	E053	
	19 Net assets or fund balances at beginning of year (from line 74, column (A))	19	E054	
	20 Other changes in net assets or fund balances (attach explanation)	20	E055	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	E056	

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Cat. No. 11282Y

Form **990** (1992)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and 4947(a)(1) charitable trusts but optional for others. (See instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22	Grants and allocations (attach schedule)	22	E057			
23	Specific assistance to individuals (attach schedule)	23	E058			
24	Benefits paid to or for members (attach schedule)	24	E059			
25	Compensation of officers, directors, etc.	25	E060	E061	E062	E063
26	Other salaries and wages	26	E064	E065	E066	E067
27	Pension plan contributions	27	E068	E069	E070	E071
28	Other employee benefits	28	E072	E073	E074	E075
29	Payroll taxes	29	E076	E077	E078	E079
30	Professional fundraising fees	30	E080			
31	Accounting fees	31	E081	E082	E083	E084
32	Legal fees	32	E085	E086	E087	E088
33	Supplies	33	E089	E090	E091	E092
34	Telephone	34	E093	E094	E095	E096
35	Postage and shipping	35	E097	E098	E099	E100
36	Occupancy	36	E101	E102	E103	E104
37	Equipment rental and maintenance	37	E105	E106	E107	E108
38	Printing and publications	38	E109	E110	E111	E112
39	Travel	39	E113	E114	E115	E116
40	Conferences, conventions, and meetings	40	E117	E118	E119	E120
41	Interest	41	E121	E122	E123	E124
42	Depreciation, depletion, etc. (attach schedule)	42	E125	E126	E127	E128
43	Other expenses (itemize): a	43a				
b		43b				
c		43c				
d		43d				
e		43e				
f		43f	E149	E150	E151	E152
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	E153	E154	E155	E156

Reporting of Joint Costs.—Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ▶ ☐ Yes ☐ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to program services \$ _____; (iii) the amount allocated to management and general \$ _____; and (iv) the amount allocated to fundraising \$ _____.

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

Describe what was achieved in carrying out the organization's exempt purposes. Fully describe the services provided; the number of persons benefited; or other relevant information for each program title. Section 501(c)(3) and (4) organizations and section 4947(a)(1) charitable trusts must also enter the amount of grants and allocations to others.

Expenses
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

a		
	(Grants and allocations \$ _____)	
b		
	(Grants and allocations \$ _____)	
c		
	(Grants and allocations \$ _____)	
d		
	(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)
f	Total (add lines a through e) (should equal line 44, column (B))	▶

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets			
45	Cash—non-interest-bearing	45	E161
46	Savings and temporary cash investments	46	E162
47a	Accounts receivable	47a	E163
b	Less: allowance for doubtful accounts	47b	
48a	Pledges receivable	48a	E164
b	Less: allowance for doubtful accounts	48b	
49	Grants receivable	49	E165
50	Receivables due from officers, directors, trustees, and key employees (attach schedule)	50	E166
51a	Other notes and loans receivable (attach schedule)	51a	E167
b	Less: allowance for doubtful accounts	51b	
52	Inventories for sale or use	E168	E169
53	Prepaid expenses and deferred charges	53	E170
54	Investments—securities (attach schedule)	E171	E172
55a	Investments—land, buildings, and equipment: basis	55a	E173
b	Less: accumulated depreciation (attach schedule)	55b	
56	Investments—other (attach schedule)	56	E174
57a	Land, buildings, and equipment: basis	57a	E175
b	Less: accumulated depreciation (attach schedule)	57b	
58	Other assets (describe ►)	58	E176
59	Total assets (add lines 45 through 58) (must equal line 75)	E177	E178
Liabilities			
60	Accounts payable and accrued expenses	60	E179
61	Grants payable	61	E180
62	Support and revenue designated for future periods (attach schedule)	62	E181
63	Loans from officers, directors, trustees, and key employees (attach schedule)	63	E182
64	Mortgages and other notes payable (attach schedule)	64	E183
65	Other liabilities (describe ►)	65	E184
66	Total liabilities (add lines 60 through 65)	E185	E186
Fund Balances or Net Assets			
Organizations that use fund accounting, check here ► <input type="checkbox"/> and complete lines 67 through 70 and lines 74 and 75 (see instructions).			
67a	Current unrestricted fund	67a	
b	Current restricted fund	67b	
68	Land, buildings, and equipment fund	68	
69	Endowment fund	69	
70	Other funds (describe ►)	70	
Organizations that do not use fund accounting, check here ► <input type="checkbox"/> and complete lines 71 through 75 (see instructions).			
71	Capital stock or trust principal	71	
72	Paid-in or capital surplus	72	
74	Total fund balances or net assets (add lines 67a through 70 OR lines 71 through 73: column (A) must equal line 19 and column (B) must equal line 21)	E194	E195
75	Total liabilities and fund balances/net assets (add lines 66 and 74)	75	E196

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about 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 the organization's programs and accomplishments.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans	(E) Expense account and other allowances
		V001	V002	V003

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

Part VI Other Information

Note: Section 501(c)(3) organizations and section 4947(a)(1) trusts must also complete and attach Schedule A (Form 990).

	Yes	No
76 Did the organization engage in any activity not previously reported to the Internal Revenue Service? 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? If "Yes," attach a conformed copy of the changes.	77	
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	E015
c 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.	78c	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (See instructions.) If "Yes," attach a statement as described in the instructions.	79	E016
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 non-exempt organization? (See instructions.)	80a	E017
b If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81a Enter amount of political expenditures, direct or indirect, as described in the instructions 81a E205	81a	E205
b Did the organization file Form 1120-POL , U.S. Income Tax Return for Certain Political Organizations, for this year?	81b	E206
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	
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 for reporting in Part III 82b	82b	
83a Did anyone request to see either the organization's annual return or exemption application (or both)?	83a	
b If "Yes," did the organization comply as described in the instructions? (See General Instruction L.)	83b	
84a 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 or gifts were not tax deductible? (See General Instruction M.)	84b	
85a Section 501(c)(5) or (6) organizations. —Did the organization spend any amounts in attempts to influence public opinion about legislative matters or referendums? (See instructions and Regulations section 1.162-20(c).)	85a	
b If "Yes," enter the total amount spent for this purpose 85b E208	85b	E208
86 Section 501(c)(7) organizations. —Enter:		
a Initiation fees and capital contributions included on line 12 86a E209	86a	E209
b Gross receipts, included on line 12, for public use of club facilities (see instructions) 86b E210	86b	E210
c Does the club's governing instrument or any written policy statement provide for discrimination against any person because of race, color, or religion? (If "Yes," attach statement. See instructions.) 86c	86c	
87 Section 501(c)(12) organizations. —Enter amount of:		
a Gross income received from members or shareholders 87a	87a	
b Gross income received from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b	87b	
88 Public interest law firms. —Attach information described in the instructions.		
89 List the states with which a copy of this return is filed 89	89	
90 During this tax year did the organization maintain any part of its accounting / tax records on a computerized system? 90 E211	90	E211
91 The books are in care of 91 Telephone no. 91	91	
Located at 91 ZIP code 91	91	
92 Section 4947(a)(1) charitable trusts filing Form 990 in lieu of Form 1041, U.S. Fiduciary Income Tax Return. should check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92	92	

Part VII Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
93 Program service revenue:					
(a) _____	P601	P602	P603	P604	P605
(b) _____	P611	P612	P613	P614	P615
(c) _____	P621	P622	P623	P624	P625
(d) _____	P631	P632	P633	P634	P635
(e) _____	P641	P642	P643	P644	P645
(f) _____	P651	P652	P653	P654	P655
(g) Fees from government agencies	P661	P662	P663	P664	P665
94 Membership dues and assessments	P671	P672	P673	P674	P675
95 Interest on savings and temporary cash investments	P681	P682	P683	P684	P685
96 Dividends and interest from securities	P691	P692	P693	P694	P695
97 Net rental income or (loss) from real estate:					
(a) debt-financed property	P701	P702	P703	P704	P705
(b) not debt-financed property	P711	P712	P713	P714	P715
98 Net rental income or (loss) from personal property	P721	P722	P723	P724	P725
99 Other investment income	P731	P732	P733	P734	P735
100 Gain or (loss) from sales of assets other than inventory	P741	P742	P743	P744	P745
101 Net income from special fundraising events	P751	P752	P753	P754	P755
102 Gross profit or (loss) from sales of inventory	P761	P762	P763	P764	P765
103 Other revenue: (a) _____					
(b) _____					
(c) _____					
(d) _____					
(e) <u>sum of (a) - (c)</u>	P771	P772	P773	P774	P775
104 Subtotal (add columns (b), (d), and (e))		P782		P784	P785

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part IX Information Regarding Taxable Subsidiaries (Complete this Part if the "Yes" box on 78c is checked.)

Name, address, and employer identification number of corporation or partnership	Percentage of ownership interest	Nature of business activities	Total income	End-of-year assets
P801 (FIN)	P802		P803	P804
P805 (FIN)	P806		P807	P808
P809 (FIN)	P810		P811	P812
P813 (FIN)	P814		P815	P816

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

Signature of officer _____ Date _____ Title _____

**Paid
Preparer's
Use Only**

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>
Firm's name (or yours if self-employed) and address	ZIP code	

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation), 501(e), 501(f), 501(k), or Section 4947(a)(1) Charitable Trust
Supplementary Information

► Attach to Form 990 (or Form 990EZ).

OMB No. 1545-0047

1992

Employer identification number

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See specific instructions.) (List each one. If there are none, enter "None.")

(a) Name and address of employees paid more than \$30,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account and other allowances
		S001	S002	S003
		S004	S005	S006
		S007	S008	S009
		S010	S011	S012
		S013	S014	S015
Total number of other employees paid over \$30,000	S016			

Part II Compensation of the Five Highest Paid Persons for Professional Services
(See specific instructions.) (List each one. If there are none, enter "None.")

(a) Name and address of persons paid more than \$30,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$30,000 for professional services		

Part III Statements About Activities

- 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? \$ SI97
If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities. \$
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.
- 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, principal officers, or creators, or with any taxable organization or corporation with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:
- a Sale, exchange, or leasing of property?
 - b Lending of money or other extension of credit?
 - c Furnishing of goods, services, or facilities?
 - d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
 - e Transfer of any part of its income or assets?
- If the answer to any question is "Yes," attach a detailed statement explaining the transactions.
- 3 Does the organization make grants for scholarships, fellowships, student loans, etc.?
- 4 Attach a statement explaining how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See specific instructions.)

	Yes	No
1		
2a		
2b		
2c		
2d		
2e		
3		

Part IV Reason for Non-Private Foundation Status (See instructions for definitions.)The organization is not a private foundation because it is (please check only **ONE** applicable box):

- 5** ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 3.)
- 7** ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter name, city, and state of hospital ►
- 10** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete Support Schedule.)
- 11a** ☐ 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 Support Schedule.)
- 11b** ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete Support Schedule.)
- 12** ☐ An organization that normally receives: (a) no more than 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, and (b) more than 1/3 of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions. See section 509(a)(2). (Also complete Support Schedule.)
- 13** ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) boxes 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 instructions for Part IV, box 13.)

(a) Name(s) of supported organization(s)	(b) Box number from above

- 14** ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See specific instructions.)

Support Schedule (Complete only if you checked box 10, 11, or 12 above.) *Use cash method of accounting.*

Calendar year (or fiscal year beginning in) ►	(a) 1991	(b) 1990	(c) 1989	(d) 1988	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	\$198				\$199
16 Membership fees received	\$200				\$201
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose	\$202				\$203
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.	\$204				\$205
19 Net income from unrelated business activities not included in line 18	\$206				\$207
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	\$208				\$209
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.	\$210				\$211
22 Other income. Attach schedule. Do not include gain or (loss) from sale of capital assets.	\$212				\$213
23 Total of lines 15 through 22.	\$214				\$215
24 Line 23 minus line 17.	\$216				\$217
25 Enter 1% of line 23	\$218				
26 Organizations described in box 10 or 11: a Enter 2% of amount in column (e), line 24 b Attach a list (not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1988 through 1991 exceeded the amount shown in line 26a. Enter the sum of all excess amounts here ►					

(Continued on page 3)

Part IV Support Schedule (continued) (Complete only if you checked box 10, 11, or 12 on page 2.)**27** Organizations described in box 12, page 2:

- a** Attach a list for amounts shown on lines 15, 16, and 17, showing the name of, and total amounts received in each year from, each "disqualified person," and enter the sum of such amounts for each year:

(1991) (1990) (1989) (1988)

- b** Attach a list showing, for 1988 through 1991, the name of, and amount included in line 17 for, each person (other than a "disqualified person") from whom the organization received more during that year than the larger of: (1) the amount on line 25 for the year; or (2) \$5,000. Include organizations described in boxes 5 through 11 as well as individuals. Enter the sum of these excess amounts for each year:

(1991) (1990) (1989) (1988)

- 28** For an organization described in box 10, 11, or 12, page 2, that received any unusual grants during 1988 through 1991, attach a list (not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See specific instructions.)

Part V Private School Questionnaire
(To be completed ONLY by schools that checked box 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	3020
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	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during 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? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	31	
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance? (See instructions.)	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 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. (See instructions for Part V.)	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (see instructions)
(To be completed **ONLY** by an eligible organization that filed Form 5768)Check here ☐ **a** If the organization belongs to an affiliated group (see instructions).Check here ☐ **b** If you checked **a** and "limited control" provisions apply (see instructions).

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
("Expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures (see Part VI-A instructions)	39	
40	Total exempt purpose expenditures (add lines 38 and 39) (see instructions)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table— <div style="display: flex; justify-content: space-between;"> <div> If the amount on line 40 is— Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 </div> <div> The lobbying nontaxable amount is— 20% of the amount on line 40 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000 </div> </div>	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: File Form 4720 if there is an amount on either line 43 or line 44.**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45–50 for details.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1992	(b) 1991	(c) 1990	(d) 1989	(e) Total
45 Lobbying nontaxable amount (see instructions)					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures (see instructions)					
48 Grassroots nontaxable amount (see instructions)					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures (see instructions)					

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting by organizations that did not complete Part VI-A.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h)			

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

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- | | | Yes | No |
|---|--|-----|----|
| a | Transfers from the reporting organization to a noncharitable exempt organization of: | | |
| | (i) Cash | | |
| | (ii) Other assets | | |
| b | Other Transactions: | | |
| | (i) Sales of assets to a noncharitable exempt organization | | |
| | (ii) Purchases of assets from a noncharitable exempt organization | | |
| | (iii) Rental of facilities or equipment | | |
| | (iv) Reimbursement arrangements | | |
| | (v) Loans or loan guarantees | | |
| | (vi) Performance of services or membership or fundraising solicitations | | |
| c | Sharing of facilities, equipment, mailing lists or other assets, or paid employees | | |
| d | If the answer to any of the above is "Yes," complete the following schedule. The "Amount involved" column below should always indicate the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, indicate in column (d) the value of the goods, other assets, or services received. | | |

[illegible]

- 52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☐ No
- b If "Yes," complete the following schedule.

[illegible]

Form **990EZ**Department of the Treasury
Internal Revenue Service**Short Form****Return of Organization Exempt From Income Tax**

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

▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

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

A For the calendar year 1992, or fiscal year beginning , 1992, and ending

Please use IRS label or print or type. See Specific Instructions.	B Name of organization EZ02	C EIN
	Number and street (or P.O. box no., if mail is not delivered to street address) Room/suite	D State
	City, town, or post office, state, and ZIP code EZ09 EZ10	E ZIP code

F Check type of organization—Exempt under section ▶ ☐ 501(c) (EZ11) (insert number), OR ▶ ☐**G** Check ▶ ☐ if exemption application pending. **H** C**I** Accounting method: ☐ Cash ☐ Accrual ☐ Other (specify) ▶**J** Check ▶ ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return if it received a Form 990 Package in the mail, the organization should file a return without financial data. Some states require filing a return.**K** Enter the organization's 1992 gross receipts (add back lines 5b, 6b, and 7b, to line 9) . . . ▶
If \$100,000 or more, the organization must file Form 990 instead of Form 990EZ.**Part I Statement of Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received (attach schedule—see instructions)			
	2	Program service revenue			
	3	Membership dues and assessments (see instructions)			
	4	Investment income			
	5a	Gross amount from sale of assets other than inventory	5a	EZ21	
	b	Less: cost or other basis and sales expenses	5b	EZ22	
	c	Gain or (loss) (line 5a less line 5b) (attach schedule)			
	6	Special events and activities (attach schedule—see instructions):			
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	EZ24	
Expenses	b	Less: direct expenses	6b	EZ25	
	c	Net income or (loss) (line 6a less line 6b)			
	7a	Gross sales less returns and allowances	7a	EZ27	
	b	Less: cost of goods sold	7b	EZ28	
	c	Gross profit or (loss) (line 7a less line 7b)			
	8	Other revenue (describe ▶ _____)			
	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)			
	Expenses	10	Grants and similar amounts paid (attach schedule)		
		11	Benefits paid to or for members		
12		Salaries, other compensation, and employee benefits			
13		Professional fees and other payments to independent contractors			
14		Occupancy, rent, utilities, and maintenance			
15		Printing, publications, postage, and shipping			
16		Other expenses (describe ▶ _____)			
17		Total expenses (add lines 10 through 16)			
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)			
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			
	20	Other changes in net assets or fund balances (attach explanation)			
	21	Net assets or fund balances at end of year (combine lines 18 through 20) (must agree with line 27, column (B))			

Part II Balance Sheets—If Total assets on line 25, column (B) are \$250,000 or more, Form 990

22	Cash, savings, and investments	(A)
23	Land and buildings	
24	Other assets (describe ▶ _____)	
25	Total assets	
26	Total liabilities (describe ▶ _____)	
27	Net assets or fund balances (column (B) must agree with line 21)	

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Cat. No. 1

If "Yes," attach a statement as described in the instructions.

- 37a** Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ **37a** | EZ201
- b** Did the organization file **Form 1120-POL**, U.S. Income Tax Return for Certain Political Organizations, for
- 38a** Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee, or such loans made in a prior year and still unpaid at the start of the period covered by this return? . . .
- b** If "Yes," attach the schedule specified in the instructions and enter the amount involved . . . **38b** |
- 39** **Section 501(c)(7) organizations.**—Enter:
- a** Initiation fees and capital contributions included on line 9 **39a** | EZ201
- b** Gross receipts, included on line 9, for public use of club facilities (see instructions). . . . **39b** | EZ211
- c** Does the club's governing instrument or any written policy statement provide for discrimination against because of race, color, or religion? (If "Yes," attach statement; see instructions.)
- 40** List the states with which a copy of this return is filed. ▶
- 41** The books are in care of ▶ Telephone no. ▶
Located at ▶ ZIP code ▶
- 42** **Section 4947(a)(1) charitable trusts filing Form 990EZ in lieu of Form 1041**, U.S. Fiduciary Income Tax Return and enter the amount of tax-exempt interest received or accrued during the tax year . . . ▶ **42** |

**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 officer) is based on all information of which

Signature of officer _____ Date _____ Title _____

**Paid
Preparer's
Use Only**

Preparer's signature ▶	Date
Firm's name (or yours if self-employed) and address ▶	ZIP code