Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), section 527, or section 4947(a)(1) nonexempt charitable trust

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

OMB No 1545 0047

2000

Open to Public Inspection

A For the 2000 calendar year OR tax year period beginning October 1 2000 and ending September 30 2001

B Check if
- [ ] Change of address
- [ ] Change of name
- [ ] Initial return
- [ ] Final return
- [ ] Amended return

C Name of organization: International Hearing Dog

Number and street (or P O box if mail is not delivered to street address): 5901 E 89th Ave | Room/suite

City or town: Henderson | State or Country: Colorado | ZIP code: 80640

D Employer identification number: 84-0779444

E Telephone number: ( )

F Check [ ] if application is pending

G Organization type (check only one) [X] 501(c) (3)(insert no) [ ] 527 or [ ] 4947(a)(1)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990 or 900 EZ)

J Accounting method [ ] Cash [X] Accrual [ ] Other (specify)

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

Note H and I are not applicable to section 527 orgs

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) If "Yes" enter number of affiliates N/A

H(c) Are all affiliates included? [ ] Yes [X] No (If "No" attach a list See Inst)

H(d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

I Enter 4 digit group exemption number (GEN) N/A

L Check this box if the organization is not required to attach Schedule B (Form 990 or 990 EZ) [ ]

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

(See Specific Instructions on page 16)

Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Direct public support	1a	489,023		
	b Indirect public support	1b	0		
	c Government contributions (grants)	1c	0		
	d Total (add lines 1a through 1c) (cash $ 489,023 noncash $)			1d	489,023
	2 Program service revenue including government fees and contracts (from Part VII, line 93)			2	0
	3 Membership dues and assessments			3	0
	4 Interest on savings and temporary cash investments			4	-35,548
	5 Dividends and interest from securities			5	0
	6a Gross rents	6a	0		
	b Less rental expenses	6b	0		
	c Net rental income or (loss) (subtract line 6b from line 6a)			6c	0
	7 Other investment income (describe)			7	0
	8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
			8a		
	b Less cost or other basis and sales expenses		8b		
	c Gain or (loss) (attach schedule)	0	8c	0	
	d Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	0
	9 Special events and activities (attach schedule) See Statement 1				
	a Gross revenue (not including $ of contributions reported on line 1a)	9a	43,257		
	b Less direct expenses other than fundraising expenses	9b	10,338		
	c Net income or (loss) from special events (subtract line 9b from line 9a)			9c	32,919
	10a Gross sales of inventory, less returns and allowances	10a	0		
	b Less cost of goods sold	10b	0		
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	0
	11 Other revenue (from Part VII, line 103)			11	3,213
	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	489,607
Expenses	13 Program services (from line 44, column (B))			13	391,823
	14 Management and general (from line 44, column (C))			14	59,440
	15 Fundraising (from line 44, column (D))			15	32,765
	16 Payments to affiliates (attach schedule)			16	
	17 Total expenses (add lines 16 and 44, column (A))			17	484,028
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)			18	5,579
	19 Net assets or fund balances at beginning of year (from line 73, column (A))			19	530,345
	20 Other changes in net assets or fund balances (attach explanation)			20	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	535,924

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For Paperwork Reduction Act Notice see page 1 of the separate instructions (HTA) Form 990 (2000)

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B) (C) and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See Specific Instructions on page 20)

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	0			
23 Specific assistance to individuals (attach schedule)	23	0			
24 Benefits paid to or for members (attach schedule)	24	0			
25 Compensation of officers, directors, etc	25	0			
26 Other salaries and wages	26	301,719	234,774	45,387	21,558
27 Pension plan contributions	27	0			
28 Other employee benefits	28	0			
29 Payroll taxes	29	0			
30 Professional fundraising fees	30	0			
31 Accounting fees	31	0			
32 Legal fees	32	0			
33 Supplies	33	0			
34 Telephone	34	2,889	2,529	110	250
35 Postage and shipping	35	2,178	1,654	89	435
36 Occupancy	36	20,549	20,050	499	0
37 Equipment rental and maintenance	37	4,889	4,729	0	160
38 Printing and publications	38	0			
39 Travel	39	6,059	4,079	0	1,980
40 Conferences, conventions, and meetings	40	0			
41 Interest	41	0			
42 Depreciation, depletion, etc (attach sc See Statement 2	42	11,173	6,592	3,799	782
43 Other expenses (itemize) a	43a	0			
b See Statement 3	43b	134,572	117,416	9,556	7,600
c	43c	0			
d	43d	0			
e	43e	0			
f	43f	0			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	484,028	391,823	59,440	32,765

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 Specific Instructions on page 23)

What is the organization's primary exempt purpose? To train and place hearing dogs at no cost to the recipient

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a Training - The training and placement of hearing dogs at no cost to the recipient (Grants and allocations $	381,655
b Education - To raise public awareness regarding the legal access rights of a hearing dog and the role of a hearing dog in assisting the deaf and hearing impaired (Grants and allocations $	10,168
c (Grants and allocations $	
d (Grants and allocations $	
e Other program services (attach schedule) (Grants and allocations $	
f Total of Program Service Expenses (should equal line 44 column (B), Program services)	391,823

Part IV Balance Sheets

(See Specific Instructions on page 23)

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			6,283	45	
46 Savings and temporary cash investments			1,112	46	17,820
47a Accounts receivable	47a	0			
b Less allowance for doubtful accounts	47b	0	0	47c	0
48a Pledges receivable	48a	8,219			
b Less allowance for doubtful accounts	48b	0	13,605	48c	8,219
49 Grants receivable			0	49	0
50 Receivables from officers, directors, trustees, and key employees (attach schedule)			0	50	0
51a Other notes and loans receivable (attach schedule)	51a	0			
b Less allowance for doubtful accounts	51b	0	0	51c	0
52 Inventories for sale or use			10,251	52	10,828
53 Prepaid expenses and deferred charges			6,359	53	8,378
54 Investments - sec See Statement 4 [ ] Cost [X] FMV			531,474	54	487,244
55a Investments - land, buildings, and equipment basis	55a	0			
b Less accumulated depreciation (attach schedule)	55b	0	0	55c	0
56 Investments - other (attach schedule)			0	56	0
57a Land, buildings, and equipment basis	57a	233,029			
b Less accumulated depreciation (attach schedule) See Statement 2	57b	188,127	36,042	57c	44,902
58 Other assets (describe Cash value - Life Insurance			22,770	58	25,983
59 Total assets (add lines 45 through 58) (must equal line 74)			627,896	59	603,374
Liabilities					
60 Accounts payable and accrued expenses			42,767	60	47,450
61 Grants payable			0	61	0
62 Deferred revenue			54,784	62	20,000
63 Loans from officers, directors, trustees, and key employees (attach schedule)			0	63	0
64a Tax-exempt bond liabilities (attach schedule)			0	64a	0
b Mortgages and other notes payable (attach schedule)			0	64b	0
65 Other liabilities (describe			0	65	0
66 Total liabilities (add lines 60 through 65)			97,551	66	67,450
Net Assets or Fund Balances					
Organizations that follow SFAS 117, check here [X] and complete lines 67 through 69 and lines 73 and 74					
67 Unrestricted			524,342	67	529,484
68 Temporarily restricted			6,003	68	6,440
69 Permanently restricted				69	
Organizations that do not follow SFAS 117, check here [ ] and complete lines 70 through 74					
70 Capital stock, trust principal, or current funds				70	
71 Paid-in or capital surplus, or land, bldg , and equipment fund				71	
72 Retained earnings, endowment, accumulated income, or other funds				72	
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)			530,345	73	535,924
74 Total liabilities and net assets/fund balances (add lines 66 and 73)			627,896	74	603,374

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 25)

a	Total revenue, gains, and other support per audited financial statements	a	497,587
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments	0	
(2)	Donated services and use of facilities	7,980	
(3)	Recoveries of prior year grants	0	
(4)	Other (specify)	0	
	Add amounts on lines (1) thru (4)	b	7,980
c	Line a minus line b	c	489,607
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b Form 990	0	
(2)	Other (specify)	0	
	Add amounts on lines (1) and (2)	d	0
e	Total revenue per line 12, Form 990 (line c plus line d)	e	489,607

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

a	Total expense and losses per audited financial statements	a	492,008
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities	7,980	
(2)	Prior year adjustments reported on line 20 Form 990	0	
(3)	Losses reported on line 20, Form 990	0	
(4)	Other (specify)	0	
	Add amounts on lines (1) thru (4)	b	7,980
c	Line a minus line b	c	484,028
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990	0	
(2)	Other (specify)	0	
	Add amounts on lines (1) and (2)	d	0
e	Total expenses per line 17, Form 990 (line c plus line d)	e	484,028

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 25)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See Statement 5				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ☐ Yes ☒ No

If "Yes," attach schedule - see Specific Instructions on page 26

Part VI Other Information (See Specific Instructions on pages 26)

			N/A	Yes or 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	No
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	No
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		78a	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?		78b	NA
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		79	No
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	No
b	If "Yes," enter the name of the organization ..... and check whether it is ☐ exempt OR ☐ nonexempt			
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81	81a 0		
b	Did the organization file Form 1120-POL for this year?		81b	No
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	Yes
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 7,980		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	Yes
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	Yes
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		84b	NA
85	501(c)(4), (5), or (6) organizations (a) Were substantially all dues nondeductible by members?		85a	NA
b	Did the organization make only in-house lobbying expenditures of $2,000 or less? If "Yes" to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		85b	NA
c	Dues, assessments, and similar amounts from members	85c NA		
d	Section 162(e) lobbying and political expenditures	85d NA		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e NA		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f NA		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?		85g	NA
h	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	NA
86	501(c)(7) orgs - Enter (a) Initiation fees and capital contributions included on line 12	86a NA		
b	Gross receipts, included on line 12, for public use of club facilities	86b NA		
87	501(c)(12) orgs - Enter a Gross income from members or shareholders	87a NA		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b NA		
88	At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX		88	No
89a	501(c)(3) organizations - Enter Amount of tax paid during the year under section 4911 0 , section 4912 0 , section 4955 0			
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes " attach a statement explaining each transaction		89	No
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under section 4912, 4955 and 4958			0
d	Enter Amount of tax in 89c, above, reimbursed by the organization			0
90a	List the states with which a copy of this return is filed (none)			
b	Number of employees employed in the pay period that includes March 12, 2000 (See inst)		90b	10

91 The books are in care of International Hearing Dog Telephone no ( )
Located at 5901 E 89th Ave , Henderson, Colorado ZIP code 80640

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041-- Check here ☐
enter the amount of tax-exempt interest received or accrued during the tax year 92

Part VII Analysis of Income-Producing Activities

(See Specific Instructions on pages 30)

Enter gross amounts unless otherwise indicated	Unrelated business income (A) Business code	(B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	-35,548	
96 Dividends and interest from securities					
97 Net rental income (loss) from real estate					
a debt financed property					
b not debt financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			1	32,919	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue Miscellaneous					3,213
b					
c					
d					
e					
104 Subtotal (add cols (B) (D), and (E))		0		-2,629	3,213
105 TOTAL (add line 104 columns (B) (D), and (E))					584

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

(See Specific Instructions on page 31)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
103	Incidental miscellaneous income

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities

(See Specific Instructions on page 31)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts

(See Specific Instructions on page 31)

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

(b) Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? [ ] Yes [X] No

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

Under penalties of perjury I declare that I have examined this return including accompanying schedules and statements and to the best of my knowledge

[redacted]

12-17-01 J Emlyne Wood Sr VP-Controller

Date Type or print name Title

[redacted]

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions)

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

OMB No 1545 0047

2000

Name of the organization
International Hearing Dog

Employer identification number
84-0779444

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Part V of 990				
Total number of other employees paid over $50,000				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 1 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over $50,000 for professional services		

Part III Statements About Activities

			Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities 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		1		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary				
a Sale, exchange, or leasing of property?		2a		X
b Lending of money or other extension of credit?		2b		X
c Furnishing of goods, services, or facilities?		2c		X
d Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	See Part V of 990	2d	X	
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		2e		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc ?		3		X
4a Do you have a section 403(b) annuity plan for your employees?		4a		X
b Attach a statement to explain 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 page 2 of the instructions)				

Part IV Reason for Non-Private Foundation Status (See pages 2 through 4 of the instructions)

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

5 [ ] A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 [ ] A school Section 170(b)(1)(A)(ii) (Also complete Part V, page 5)

7 [ ] A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 [ ] A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 [ ] A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state

10 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)

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 [ ] A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule below)

12 [ ] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions- subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)

13 [ ] An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

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

14 [ ] 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

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

Calendar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts grants, and contributions received (Do not include unusual grants See line 28)	468,132	433,584	533,951	314,356	1,750,023
16 Membership fees received	0	0	0	0	0
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	22,124	22,767	21,583	24,877	91,351
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	43,659	25,441	10,878	5,839	85,817
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	2,992	3,964	2,588	3,067	12,611
23 Total of lines 15 through 22	536,907	485,756	569,000	348,139	1,939,802
24 Line 23 minus line 17	514,783	462,989	547,417	323,262	1,848,451
25 Enter 1% of line 23	5,369	4,858	5,690	3,481	

26 Organizations described in lines 10 or 11 a Enter 2% of amount in column (e), line 24 — 26a: 36,969

b Attach a list (which is 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 1996 through 1999 exceeded the amount shown in line 26a Enter the sum of all these excess amounts — 26b: 348,705

See Statement 6

c Total support for section 509(a)(1) test Enter line 24, column (e) — 26c: 1,848,451

d Add Amounts from column (e) for lines 18 85,817 19 0 22 12,611 26b 348,705 — 26d: 447,133

e **Public support (line 26c minus line 26d total)** — 26e: 1,401,318

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** — 26f: 75 81%

27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person " Enter the sum of such amounts for each year

(1999) _____ (1998) _____ (1997) _____ (1996) _____

b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of all these differences (the excess amounts) for each year

(1999) _____ (1998) _____ (1997) _____ (1996) _____

c Add Amounts from column (e) for lines 15 0 16 0 17 0 20 0 21 0 — 27c: 0

d Add Line 27a total 0 and line 27b total 0 — 27d: 0

e Public support (line 27c minus line 27d total) — 27e: 0

f Total support for section 509(a)(2) test Enter amount on line 23, column (e) — 27f: 0

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** — 27g: 0 00%

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** — 27h: 0 00%

28 Unusual Grants For an organization described in line 10, 11 or 12 that received any unusual grants during 1996 through 1999 attach a list (which is 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 page 5 of the instructions)

Part V Private School Questionnaire (See page 5 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A

		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		
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?	31		
If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
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?	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			
a Students' rights or privileges?	33a		
b Admissions policies?	33b		
c Employment of faculty or administrative staff?	33c		
d Scholarships or other financial assistance?	33d		
e Educational policies?	33e		
f Use of facilities?	33f		
g Athletic programs?	33g		
h Other extracurricular activities?	33h		
If you answered "Yes" to any of the above, please explain (If you need more space, attach a statement)			
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?	34b		
If you answered "Yes" to either 34a or b, please explain using an attached statement			
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	35		

Part VI-A Lobbying Expenditures by Electing Public Charities

(See page 7 of the instructions)

(To be completed ONLY by an eligible organization that filed Form 5768) N/A

Check here a [ ] If the organization belongs to an affiliated group

Check here b [ ] If you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
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	0	0
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40	0	0
41 Lobbying nontaxable amount Enter the amount from the following table -			
If the amount on line 40 is - / **The lobbying nontaxable amount is -**			
Not over $500 000 — 20% of the amount on line 40			
Over $500,000 but not over $1 000 000 — $100 000 plus 15% of the excess over $500,000			
Over $1,000 000 but not over $1,500,000 — $175,000 plus 10% of the excess over $1,000 000	41	0	0
Over $1,500,000 but not over $17,000,000 — $225,000 plus 5% of the excess over $1,500,000			
Over $17 000,000 — $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42	0	0
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	0	0
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	0	0

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

4 - Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 9 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures					0
48 Grassroots nontaxable amount					0
49 Grassroots ceiling amount (150% of line 48(e))					0
50 Grassroots lobbying expenditures					0

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting by organizations that did not complete Part VI-A) (See page 9 of the instructions)

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

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

(See page 9 of the instructions)

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

	Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of		
(i) Cash		X
(ii) Other assets		X
b Other transactions		
(i) Sales or exchanges of assets with a noncharitable exempt organization		X
(ii) Purchases of assets from a noncharitable exempt organization		X
(iii) Rental of facilities, equipment, or other assets		X
(iv) Reimbursement arrangements		X
(v) Loans or loan guarantees		X
(vi) Performance of services or membership or fundraising solicitations		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

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 [X] No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Schedule B
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1d of Form 990 or line 1 of Form 990-EZ (see instructions)

OMB No 1545-0047

2000

Name of organization	Employer identification number
International Hearing Dog	84-0779444

Organization type (check one)-Section [X] 501(c)(3) (enter number) [ ] 527 or [ ] 4947(a)(1) nonexempt charitable trust

A Section 501(c)(7), (8), or (10) organizations-
Check this box if the organization had no charitable contributors who contributed more than $1,000 during the year (But see General rule below) [ ]
Enter here the total gifts received during the year for a religious, charitable, etc , purpose $

Note: This form is generally not open to public inspection except for section 527 organizations

Name of organization
International Hearing Dog

Employer identification number
84-0779444

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
1		$ 5,960	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
2		$ 19,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
3		$ 15,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
4		$ 13,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
5		$ 6,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
6		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)

Name of organization
International Hearing Dog

Employer identification number
84-0779444

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
7		$ 15,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	de	(c) Aggregate contributions	(d) Type of contribution
8		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	de	(c) Aggregate contributions	(d) Type of contribution
9		$ 10,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	de	(c) Aggregate contributions	(d) Type of contribution
10		$ 12,973	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	de	(c) Aggregate contributions	(d) Type of contribution
11		$ 41,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	de	(c) Aggregate contributions	(d) Type of contribution
12		$ 10,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)

Name of organization
International Hearing Dog

Employer identification number
84-0779444

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
19		$ 70,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
14		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
15		$ 5,178	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution.)
(a) No		(c) Aggregate contributions	(d) Type of contribution
16		$ 8,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
17		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
18		$ 10,920	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)

Name of organization
International Hearing Dog

Employer identification number
84-0779444

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
19		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	nd zip code	(c) Aggregate contributions	(d) Type of contribution
20		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	ınd zip code	(c) Aggregate contributions	(d) Type of contribution
21		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	ınd zip code	(c) Aggregate contributions	(d) Type of contribution
22		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	and zip code	(c) Aggregate contributions	(d) Type of contribution
23		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	and zip code	(c) Aggregate contributions	(d) Type of contribution
24		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)

Name of organization
International Hearing Dog

Employer identification number
84-0779444

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
25		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	de	(c) Aggregate contributions	(d) Type of contribution
26		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	de	(c) Aggregate contributions	(d) Type of contribution
27		$ 5,000	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
		$	Individual [ ] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
		$	Individual [ ] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
		$	Individual [ ] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)

Name of organization N/A
International Hearing Dog

Employer identification number
84-0779444

Part II Noncash Property

(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	/ /
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	/ /
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	/ /
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	/ /
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	/ /
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	/ /

Name of organization	N/A	Employer identification number
International Hearing Dog		84-0779444

Part III Section 501(c)(7), (8), or (10) orgs that received more than $1,000 in charitable gifts during the year-

* Enter the total gifts that were from contributors who gave $1,000 or less during the year for a religious, charitable, etc , purpose (see instructions) $

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
____			

(e) Transfer of gift

Transferee's name, address, and zip code	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
____			

(e) Transfer of gift

Transferee's name, address, and zip code	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
____			

(e) Transfer of gift

Transferee's name, address, and zip code	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
____			

(e) Transfer of gift

Transferee's name, address, and zip code	Relationship of transferor to transferee

Statement 6

International Hearing Dog, Inc
84-0779444
Form 990
9/30/2001

Schedule A, Page 3, Part IV-A, Line 26b
Contributions over 2%

Contributor	00-99	98-99	97-98	96-97	Total	Limit	Excess
	$25,000	$42,000	$20,000	$20,000	$107,000	$36,969	$70,031
	20,000	18,000	19,000	18,500	75,500	36,969	38,531
	25,000	20,500	20,000	15,000	80,500	36,969	43,531
	20,550	10,000	200,000	0	230,550	36,969	193,581
	40,000	0	0	0	40,000	36,969	3,031
							$348,705

Statement 1

International Hearing Dog, Inc
84-0779444
Form 990
9/30/2001

Page 1, Part I, Line 9
Fund-raising

Description	Amount
Gross Revenue	$43,257
Less Direct Expenses	(10,338)
Net Fund-raising	$32,919

Statement 2

International Hearing Dog, Inc
84-0779444
Form 990
9/30/2001

Page 2, Part II, Line 42
Depreciation Expense

Depreciation expense for the year ended September 30, 2001 was	$11,173

Page 3, Part IV, Line 57c
Property and Equipment

At September 30, 2001, the cost of assets and their related accumulated depreciation was

Leasehold improvements	$86,778
Building improvements	82,479
Kennels	23,516
Office equipment	24,137
Vehicles	16,119
Total	233,029
Accumulated depreciation	(188,127)
Net property and equipment	$44,902

Statement 3

International Hearing Dog, Inc
84-0779444
Form 990
9/30/2001

Page 2, Part II, Line 43b
Other Expenses

Description	Total	Program Services	Management and General	Fund-raising
Payroll taxes and benefits	$74,135	$60,647	$8,495	$4,993
Dog delivery and supplies	38,658	38,658	0	0
Professional fees	7,855	6,895	560	400
Office operations	3,939	3,071	490	378
Dog operations	2,225	2,225	0	0
Test mailing	1,766	292	0	1,474
Improvements	1,355	1,355	0	0
Promotion	799	559	0	240
License and fees	2,953	2,953	0	0
Other	887	761	11	115
	$134,572	$117,416	$9,556	$7,600

Statement 4

International Hearing Dog, Inc
84-0779444
Form 990
9/30/2001

Page 3, Part IV, Line 54
Investments

Cash and Short-term Cash Funds	$43,606
Common, Preferred Stock	141,320
Mutual Funds	302,318
	$487,244

Statement 5

International Hearing Dog, Inc
84-0779444
Form 990
9/30/2001

Page 4, Part VI
List of Officers and Directors

Name and Address	Title and Time	Compensation	Contributions to Employee Benefit Plan	Expense Account
Martha A Foss International Hearing Dog, Inc 5901 East 89th Ave Henderson, CO 80640	Executive Director As Required	59,347	6,321	0
June Lockhart Los Angeles, CA	Honorary Chairperson & National Spokesperson As Required	0	0	0
Samuel D Cheris, Esq Relera Internet Centers & Solutions 8055 E Tufts Ave , #900 Denver, CO 80237-2842	Vice Chairperson As Required	0	0	0
J Emlynn Wood Sr Vice President International Hearing Dog, Inc 5901 East 89th Ave Henderson, CO 80640	Treasurer As Required	0	0	0
Valerie Foss-Brugger President & Director of Training International Hearing Dog, Inc 5901 E 89th Ave Henderson, CO 80640	Secretary As Required	0	0	0
Linda Leadbetter, DVM Leadbetter Small Animal Hospital 9400 Brighton Road Henderson, CO 80640	Member As Required	0	0	0
Margaret Montana, M D 141 S Humboldt St Denver, CO 80209	Member As Required	0	0	0
Ed Stammel, CLU ISU Insurance Services of Colorado 1050 17th St , #400 Denver, CO 80265-1050	Member As Required	0	0	0