Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

inte	mai Reven	ue Serv	rce		The organiz	tation may hav	e to use a cor	by of this return	to satisfy	/ state	report	ıng reqi	uireme	nts		Inspection
Α	For the	2001	calendar	year, O	R tax year	beginning				, and	endın	g				
В	Check if	applica	able Γ		118693	0044	**************************************	T0++5-D1G	IT 8453	32			Emple	yer ident	fication nur	mber
X	Address		_ P	lease se IRS		GARDEN PI					174	1	D568			568051
\vdash		•	la	ibel or	7500	100	•				, .	R		 /		
	Name ch	nange		rint or	350 S		-2472			В	88	S	ı elep	hone nun	1DBT	
L	Initial ref	บท		type See	HOAB (JT 84532	-2032						5) 25	9-2326		
	Final ret	um		pecific istruc- ,	H.J.J.	J.J.J., J.L.J								inting me	thod 🔽	
=	1			tions		**************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		*			,	_	-		Cash Accrual
	Amende	d retur	" <u>L</u>		MOAB			UT		8450	32		<u></u>	ther (spec	ofy)	
	Applicati	ол рел	ding	Section	1 501(c)(3) o	rganizations a	nd 4947(a)(1) r	nonexempt cha	ritable	Н	andil	ere not a	applical	ble to sec	tion 527 org	janizations_
				trusts r	must attach	a completed S	chedule A (Fo	rm 990 or 990-E	Z)		H(a)	is this a	group	return for	affiliates?	Yes X No
G	Web site	è								1	H(b)	If "Yes,"	enter r	number of	effiliates	
											H(c)	Are all a	affiliates	ıncluded	?	Yes No
J	Organiza	ation tv	pe (check d	only one)	X 501	(c) (3) (insa	ert no) 494	17(a)(1) or	527						Instruction	
_			, , , , , , , , , , , , , , , , , , , ,	····, ·····,		(0) () (····	(=)(1) &. [─┤,	H(d)	•			filed by an o	•
к	Check h	ere [if the or	canzahon	s arass receip	ts are normally no	of more than \$25 (MO The						by a grou	•	Yes X No
				-	-	ne organization re				⊢					b ramity.	<u></u>
_						Some states req				—⊢		Enter 4	aigii Gi	- 1A		
											М	Check	n	the organ	ization is no	beriuper to
_		ceipts	Add lines	6b <u>, 8b, 9</u> l	b, and 10b to	line <u>12</u>			145,3	303		to attaci	h Sch E	3 (Form 9	90 <u>, 9</u> 90-EZ	or 990-PF)
Pa	ırt I I	Reve	nue, E	xpens	es, and	Changes i	n Net Ass	ets or Fun	d Balan	ices	<u>(</u> Se	e Spe	cific I	nstructi	ons on p	age 16)
		1	Contribu	itions,	gifts, gran	ts, and sim	lar amounts	received								
7			Direct pr									1a		35	,333	
.o			Indirect									1b				
ر.		1		•		ıs (grants)						1c				
ب					s 1a throu		(cash \$		35,333	noi	ncasi	h 🔽	;) 1d	35,333
Ť							•	fees and cor	tracts (f	_		-	93)		7 2	98,609
						ssessments			•				,		3	2,015
			Intoroct		and and		。	ients							4	1
		5	Dividend	ds and	interest fr	om securitie	S 1	2002							5	267
		6a	Gross re	ents	+		JŲL ~ '	FAAF				6a				
	R		Less re		penses	4	ENTITLE	4644244				6b	1			
	e	_			•	s) (subtract									6c	1 o
	v				-	e (describe							١		7	†
	ė					s of assets	other		(A)	Secur	ities		T (8) Othe		
	n l		than inv		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.00000	J		(, ,/			8a	1	7		
	"			•	ther basis	s and sales	expenses					8b	1	-	—- <i>/////</i>	
	e				attach sc		CAPCHISCS					0 8c	+		o	
	,					ine line 8c,	columns (A)	and (B))				-, 00				1 0
	<u>'</u>					ities (attach		(0)/								
	•				(not inclu		Jonedule)	of								
					eported or							9a	1	7	,900	
						her than fun	draising evr	enses				9b	7	<u>_</u>	,	
		Ь	Meticas	me er	llace) from	n enacial a	ente leubtra	ict line 9b fro	m line 0	a)		30	ш.			7,900
		C 40-	Cross C	oloo of	(1055) IIOI	ii apeciai ev	e and allows	ot mie 30 ili ancae	an une 3	· · · /		10 <u>a</u>	.1			,,550
V 1						, less return	s and allowe	4110 63				10a		_		
9009		b	Cres C		oods sold	i m color of::	wantan/at	tach cahadul	a) /eub+	ract lu	ne 10			10a)	10c	
7								tach schedul	e) (zanti	act III	16 16	ווטוו עינ	, mie	(Ja)	· ·	1,179
`-	į				•	t VII, line 10	-	0- 40	J 441						11	
-								9c, 10c, an	<u> </u>						12	92,964
屰	Ì					line 44, colu		(C))		<u></u>			-		13	37,137
0	۲-					al (from line		(C))	!h	4EC	Eli	VED	ادروس			5,706
\Box	n-					4, column (i			1				ျပ	i	15	3,700
岁	s					ttach sched			2	1111	0.9	2002	Ÿ	Ī	16	135,807
Ē		17	Total ex	penses	(add line	s 16 and 44	column (A	<u>))</u>		, U L	- 0				17	
SCANNED SEY 1 /		18	Excess	or (defi	cit) for the	e year (subti	act line 17 f	rom line 12)	ا ا				#5	6 RES	SOR !!	9,496
ပ္က	et	19	Net asse	ets or fo	und balan	ces at begin	ining of year	r (from line 7	S, COIN	CD)	EN	. ปริ	_		19	22,089
<i>(</i>	, sets	20	Other ch	nanges	in net ass	sets or fund	balances (a	ittach explan	ation)				AUL	2.1	200221	31,585
								bine lines 18	s, 19, <u>a</u> n	<u>a 20)</u>				~ 1	<u> ՀՍՍ/ 21</u>	
Ear	Paneru	nrk R	eduction 4	ct Natio	e, see the s	separate instru	ictions					(HTA	١)			Form 990 (2001

r 41	Functional Expenses and section 4947(a)(1) nonexempted					128110115	
	Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundr	215100
	6b, 8b, 9b, 10b, or 16 of Part I		(//) TO(2)	services	and general	(D) Fundi	aising
22				Scivices	and general		
	(cash \$ noncash\$)	22	o				
23	<u> </u>	23	0				
24	Benefits paid to or for members (attach schedule)	24	0				
25	Compensation of officers, directors, etc	25	29,695	9,841	19,854	***************************************	
26	Other salaries and wages	26	67,464	56,567	9,268		1,629
27	Pension plan contributions	27	0	•			
28	Other employee benefits	28	2,301	497	1,804		
29		29	8,343	5,614	2,595		134
30	<u> </u>	30	0				_
31	Accounting fees	31	1,517	391	1,126		
32	· ·	32	0				
33	• •	33	9,843	7,049	1,396		1,398
	Telephone	34	2,295	2,295			
35		35	0				
36	Occupancy	36	5,562	3,650			1,912
37	Equipment rental and maintenance	37	0		200		
38	5 .	38	200	2.425	200		
39	Conferences, conventions, and meetings	39	3,616 598	3,435 598	181		
40 41	Interest	40	296	296		 -	
42	Depreciation, depletion, etc. (attach schedule)	42	1,515	1,515			
43	A DI JEDTIONIO		618	155			463
b	LICENSES & PERMITS	43b	356	165	21		170
c	INSURANCE	43c	1,087	395	692		
ď	TRAINING	43d	513	513			
e	UNIFORMS	43e	284	284			
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	135,807	92,964	37,137		5,706
Are : If "Y (III) t Par	t III Statement of Program Service Accomplis	shme	(II) the amo		gram services \$ indraising \$	Yes [X No ervice
Wha	it is the organization's primary exempt purpose? EDUCAT	ION				Expens	
	rganizations must describe their exempt purpose achievements in		and concise manne	r State the number	r	(Required for 5	501(c)(3)
of cl	ents served, publications issued, etc. Discuss achievements that	are no	t measurable (Section	on 501(c)(3) and (4))	and (4) orgs	and
orga	nizations and 4947(a)(1) nonexempt charitable trusts must also er	nter the	amount of grants an	nd		4947(a)(1) tru	sts but
	ations to others)					optional for o	thers)
a	SEE ATTACHED						
				·			
			(Coopte and allege				2,964
			(Grants and alloca	itions \$			2,304
Þ				-	-		
					-		
			(Grants and elloca	tions \$)		
С							
•							
			(Grants and alloca	itions \$)		
d							
			(Grants and alloca	tions \$			
				_			
e	Other program services (attach schedule)		(Grants and alloca		}		
e f	Other program services (attach schedule) Total of Program Service Expenses (should equal line	44, co			<u> </u>	Form 990	2,964

Pan	(See Specific Instructions on page	24)			
Note	Where required, attached schedules and amounts within	the description	(A)		(B)
	column should be for end-of-year amounts only		Beginning of year		End of year
	Assets		-		
45	Cash - non-interest-bearing		8,932	45	11,801
46	Savings and temporary cash investments			46	11,077
		1 1			
47a	Accounts receivable	47a			_
b	Less allowance for doubtful accounts	47b	0	47c	0
40-	Diodose receivable				
	Pledges receivable Less allowance for doubtful accounts	48a 48b	o	48c	0
49	Grants receivable	460		49	
	Receivables from officers, directors, trustees, and key employe	ees			
	(attach schedule)			50	
51a	Other notes and loans receivable (attach schedule)	61a			
	Less allowance for doubtful accounts	51b	0	51c	0
52	Inventories for sale or use			52	
53	Prepaid expenses and deferred charges	[53	
54	Investments - securities (attach schedule)	∭FMV [54	
65a	Investments - land, buildings, and equipment	_ , _ ,			
	basis	55a			
b	Less accumulated depreciation (attach				_
	schedule)	65b		55c	0
	investments - other (attach schedule)	40.470	0	56	0
	Land, buildings, and equipment basis	57a 18,178 57b 4,369	14 204		12 900
	Less accumulated depreciation (attach schedule) Other assets (describe	576 4,369	14,304 0	57c 58	13,8 <u>09</u> 0
58	Other assets (describe	 /	<u>_</u>	08	
59	Total assets (add lines 45 through 58) (must equal line 74)		23,236	59	36,687
	Liabilities				
60	Accounts payable and accrued expenses		1,147	60	5,102
61	Grants payable			61	
62	Deferred revenue			62	
63	Loans from officers, directors, trustees, and key employees (a	ttach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)			64a	
b	Mortgages and other notes payable (attach schedule)	,		64b	
65	Other liabilities (describe)	. 0	65	0
	Total liabilities (add lines 60 through 65)		1,147	ee	5,102
66_	Net Assets or Fund Balances		1,177		J, 102
Orga		mplete lines			
Oiga	67 through 69 and lines 73 and 74	inpiete inies			
67	Unrestricted		22,089	67	31,585
68	Temporarily restricted			68	
69	Permanently restricted			69	
Orga	nizations that do not follow SFAS 117, check here	and			
J. 3-	complete lines 70 through 74				
70	Capital stock, trust principal, or current funds			70	
71	Paid-in or capital surplus, or land, building, and equipment fur	nd		71	
72	Retained earnings, endowment, accumulated income, or other			72	
73	Total net assets or fund balances (add lines 67 through 69 OF	? lines			
	70 through 72,				_
	column (A) must equal line 19, column (B) must equal line 21		22,089		31,585
74_	Total liabilities and net assets/fund balances (add lines 66 and	1 73)	23,236	74	36,687

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.

Par	IV-A Reconciliation of Revenue	er Audited	Part IV-B Reconciliation of Expenses per					
	Financial Statements with F	levenue per		Audited	Financial State	ements with		
	Réturn (See Specific Instruc	tions, page 26)		Expense	s per Return		N/A	
а	Total revenue, gains, and other support		а	Total expenses a	and losses per a	audited		
	per audited financial statements	a		financial stateme	ents		a	
ь	Amounts included on line a but		b	Amounts include	ed on line a but	not on		
	not on line 12, Form 990	A Company		line 17, Form 99	0			
(1)	Net unrealized gains on		(1)	Donated services	s and			
	investments \$			use of facilities		\$		
(2)	Donated services and		(2)	Prior year adjust	lments reported	1		
	use of facilities			on line 20, Form	990	\$		
(3)	Recoveries of prior	A Company of the Comp	(3)	Losses reported	on line 20,			
	year grants			Form 990		\$		
(4)	Other (specify)		(4)	(4) Other (specify)				
	<u></u>							
	<u>\$</u>					\$		
	Add amounts on lines (1) thru (4)	b 0	ł	Add amounts on	lines (1) thru (4)	b 0	
c	Line a minus line b	c 0	С	Line a minus line	e b		с 0	
d	Amounts included on line 12,	A Company of the Comp	d	Amounts include	ed on line 17,			
	Form 990 but not on line a			Form 990 but no	ot on line a			
(1)	Investment expenses not included on		(1)	Investment expense	es not			
	line 6b, Form 990			included on line 6b,	Form 990	\$		
(2)	Other (specify)		(2)	Other (specify)				
	s					\$		
	Add amounts on lines (1) and (2)	d 0		Add amounts on	lines (1) and (2	2)	d 0	
e	Total revenue per line 12,		e	Total expenses p	per line 17,			
	Form 990 (line c plus line d)	<u>e</u> 0		Form 990 (line o	plus line d)		e 0	
Par	t V List of Officers, Directors,	Trustees, and Ke	y Er	nployees	(List each one ev	en if not	_	
	compensated, see Specific Instruction	s on page 26)						
			(B)	Title and average	(C) Compen-	(D) Contributions to	(E) Expense	
	(A) Name and address		1	hours per week	sation (If not	employee benefit plans &	account and other	
				evoted to position	paid, enter -0-)	deferred compensation	allowances	
	SHULTZ		1	SIDENT		_	_	
	1 MURPHY LANE, MOAB, UT 84532		_	RSWK	0	_0		
	GILLES SOUTH 300 EAST, MOAB, UT 8453	<u></u>	4	E PRESIDENT RS/WK	ا ا	^	0	
	ER LAWSON	<u></u>		RETARY				
	64 BOX 1803, MOAB, UT 84532			RS/WK	l o	0	0	
	K SHERWOOD		_	ASURER		<u></u>		
	CRETARY		5 H	RS/WK	o	0	0	
CAF	RI MILITANO		EXE	CUTIVE DIR				
	BOX 1314, MOAB, UT 84532			RS/WK	19,854	0	0	
	RA DOHRENWEND		4	ARD MEMBER]	_	_	
	BOX 672, MOAB, UT 84532			RWK	0	0	0	
	INIFER REDDING 34 BOX 2803, MOAB, UT 84532	· · · · · · · · · · · · · · · · · · ·	4	RD MEMBER RAWK	أه	o	_	
	POTTORFF			RD MEMBER	 		0	
	E THREE FOUNTAINS CIRCLE, SL	C UT 84107	4	RWK	ا ا	0	0	
<u> </u>	E TIMEET GOTTIFME GITTEE, GE	<u> </u>	, , , , ,			_ _	<u>-</u> <u>-</u>	
			L		<u> </u>			
			<u> </u>					
75	Did any officer, director, trustee, or ke	ev emplovee receive	900	regate compensa	tion of more the	an		
	\$100,000 from your organization and							
	provided by the related organizations		, 5		Yes	X No		
	If "Yes," attach schedule - see Specif		ige 2	7			۰۰۰۰	
			-5- £	·			Form 990 (2001)	
							LARM OUN /2001	

Form	990 (2001) YOUTH GARDEN PROJECT	87-0568051			Page 5
Par		nstructions on page 27)			Yes or No
76	Did the organization engage in any activity not previously re		on of each activity	76	
77	Were any changes made in the organizing or government		·	77	No
	If "Yes," attach a conformed copy of the changes				
78a	Did the organization have unrelated business gro	ss income of \$1,000 or more during the year o	overed		
	by this return?			78a	No
	If "Yes," has it filed a tax return on Form 990-T for	•		78b	
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 associa				
	through common membership, governing bodies	trustees, onicers, etc., to any other exempt of			
ъ	nonexempt organization? If "Yes," enter the name of the organization			80a	
U					
			xempt		
	Enter direct or indirect political expenditures See Did the organization file Form 1120-POL for this		81a		
b	Did the organization receive donated services or			81b	No
62 a	no charge or at substantially less than fair rental			82a	No
ь	If "Yes," you may indicate the value of these item				
	as revenue in Part I or as an expense in Part II (82b		
83a	Did the organization comply with the public inspe			83a	YES
ь	Did the organization comply with the disclosure re			83b	YES
84a	Did the organization solicit any contributions or g			84a	NO
ь	If "Yes," did the organization include with every se				
	contributions or gifts were not tax deductible?			84b	N/A
85	501(c)(4), (5), or (6) organizations a Were sub	stantially all dues nondeductible by members?	•	85a	N/A
b	Did the organization make only in-house lobbying			85b	N/A
	If "Yes" was answered to either 85a or 85b, do no	•	organization		
	received a waiver for proxy tax owed for the prior		1		
С	Dues, assessments, and similar amounts from m		85c		
d	Section 162(e) lobbying and political expenditure		85d		
e	Aggregate nondeductible amount of section 6033 Taxable amount of lobbying and political expendi		85e 0		
<u>'</u>	Does the organization elect to pay the section 60		85f O	85g	WWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWW
g h	If section 6033(e)(1)(A) dues notices were sent, of		on line 85f to its	039	10/-
••	reasonable estimate of dues allocable to nonded			1	
	year?	,	. .	85h	N/A
86	501(c)(7) orgs Enter a Initiation fees and capital con-	tributions			
	included on line 12		86a		
b	Gross receipts, included on line 12, for public use of club	facilities	86b		
87	501(c)(12) orgs Enter a Gross income from memb	pers or shareholders	87a		
b	Gross income from other sources (Do not net amounts d	ue or paid to other			
	sources against amounts due or received from them)	Į	87b		
88	At any time during the year, did the organization own a 509			أيرا	
	disregarded as separate from the organization under Regu		complete Part IX	88	NO
89a	501(c)(3) organizations Enter Amount of tax imposed on section 4911 0 , section 4912		0		
	section 4911 U , section 4912 501(c)(3) and 501(c)(4) orgs Did the organization engage			<i>1140110</i>	
b	It become aware of an excess benefit transaction from a pa			89ь	No
С	Enter Amount of tax imposed on the organization manage	· ·	dioceon	000	710
·	sections 4912, 4955, and 4958	to or disqualities persons during the your street			
d	Enter Amount of tax on line 89c, above, reimbur	sed by the organization			
-	List the states with which a copy of this return is				
b	Number of employees employed in the pay period		ns) 90b		4
91	The books are in care of YOUTH GARDEN PROJ		phone no ()		<u></u> -
٠.	Located at MOAB, UTAH		4 84532		
92	Section 4947(a)(1) nonexempt chantable trusts filing Form				
72	and enter the amount of tax-exempt interest received or ac		92	1	
				Fo	rm 990 (2001)

Par	<u>t VII Analys</u>	is of Income-Producing Activ	vities		_	(See Specific Insti	ructions on page 32)
Note	Enter gross amor	unts unless otherwise	Unrelated bus	iness income	Excluded by section 5		(E)
ındıc	ated '	•	(A)	(B)	(C)	(D)	Related or exempt
93	Program service	ce revenue	Business code	Amount	Exclusion code	Amount	function income
a	PROGRAM US	SER FEES					2,660
b						1	
C							
d							
e				_			
f	Medicare/Medi	caid payments					
g	Fees and contrac	ts from government agencies			•		95,949
94	Membership di	ues and assessments					2.015
95	Interest on saving	s and temporary cash investments					267
96		interest from securities					
97	Net rental inco	me or (loss) from real estate					
a	debt-financed p	, ,					
b	not debt-finance			· · · · · · · · · · · · · · · · · · ·			-
98		or (loss) from personal property					
99	Other investme					 	
		n sales of assets other than inventory					
	` '	(loss) from special events					7,900
		(loss) from sales of inventory					7,500
	•	a MISCELLANEOUS					1,041
	T-SHIRT SALE		 				138
c	T-OTHER OFFICE				<u>_</u>	 	
d			 				
e		c.				l -	
	Subtotal (add o	cols (B), (D), and (E))		<u> </u>		0	109,970
	-	104, columns (B), (D), and (E))		<u>_</u>		, v	109,970
		line 1d, Part I, should equal the a	mount on line 1	2 Part I		•	
		onship of Activities to the Ac			Pumoses	/San Spanific Inst	ructions on page 32)
		plain how each activity for which income					uctions on page 32)
		complishment of the organization's exem	-		•		
SEE	ATTACHE	complishment of the organization's exem	pr purposes (orner	man by providing	turius for sucri purpose	<u> </u>	
<u>JL</u> L	ALIACIL	· · · · · · · · · · · · · · · · · · ·					
				-			
Da.	t IX Informa	ition Regarding Taxable Sub	eidianes and	Dicrogarded	Entition		
rai	LIA IIIIOIIIIa		sidiai les allu				ructions on page 33)
		(A)		(8)	(C)	(D)	(E)
	Na	ame, address, and EIN of corporation,		Percentage of	Nature of activities	Total	End-of-year
		partnership, or disregarded entity		ownership interest		income	assets
N/A				%			
		<u> </u>		%		<u> </u>	
				%			
				<u>%</u>			
Par	t X Informa	tion Regarding Transfers As	sociated with	<u>Personal Be</u>	enefit Contracts	(See Specific Insti	ructions on page 33)
(a)	Did the organizati	on, during the year, receive any funds, d	irectly or indirectly,	to pay premiums	on a personal benefit co	ontract?	Yes X No
	•	on, during the year, pay premiums, direc	_				Yes X No
(b)	•	- · · · · · · · · · · · · · · · · · · ·		a personal benen	Contidoct		المريث ١٠٠٠ ـــــ
NOTE	: ii 162 (D), III(Form 8870 and Form 4720 (see instruction 8870 and Form 4720 and Fo		n including secompan	ving schedules and statement	s and to the best of m	y knowledge
		and belief it is true correct, and complete	Declaration of preparer	(other than officer) is	based on all information of wh	ich preparer has any k	nowledge
علا		\ \(\cdot \ \cdot \				11.11-	
						0/20/00	
				tive Dir	Date	', _	
			<u> </u>	TIVE DIV	<u> </u>	01201	

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information - (See separate instructions)

OMB No 1545-0047_

2001

Department of the Treasury MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Internal Revenue Service Name of the organization Employer identification number YOUTH GARDEN PROJECT 87-0568051 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 (e) Expense account (b) Title and average (d) Contributions to employee paid more than \$50,000 hours per week (c) Compensation and other employee benefit plans & devoted to position allowances deferred compensation N/A Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor (b) Type of service (c) Compensation paid more than \$50,000 N/A Total number of others receiving over

\$50,000 for professional services

Scheau	IR A (FORM 990 OF 99U-EZ) 2001 FOOTH GARDEN PROJECT 87-0568051		P	age 2
Part I	II Statements About Activities (See page 2 of the instructions)		Yes	No
a ^r	turing the year; has the organization attempted to influence national, state, or local legislation, including any tempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid r incurred in connection with the lobbying activities (Must equal amounts on line 38, art VI-A, or line i of Part VI-B)	1		×
P si 2 D si w o'	organizations that made an election under section 501(h) by filing Form 5768 must complete art VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a tatement giving a detailed description of the lobbying activities buring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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 where, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining			
	ne transactions) ale, exchange, or leasing of property?	2a		X
b L	ending of money or other extension of credit?	2b	ļ	×
c F	urnishing of goods, services, or facilities?	2c		x
d P	ayment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	х	<u> </u>
e T	ransfer of any part of its income or assets?	2e	_	X
4 D Note	oes the organization make grants for scholarships, fellowships, student loans, etc? (See Note below) to you have a section 403(b) annuity plan for your employees? Attach a statement to explain how the organization determines that individuals or organizations receiving grants are from it in furtherance of its charitable programs "qualify" to receive payments	3		X
Part I			<u> </u>	
5	ganization is not a private foundation because it is. (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the liname, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.) 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.) 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.) 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. (a) Name(s) of supported organizations.	ss		
_				<u>-</u>
14 [An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instru	ctions	;)	

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) 2000 (b) 1999 (c) 1998 (e) Total 15 Gifts, grants, and contributions received not include unusual grants See line 28) 104,236 108,324 83,875 14,558 310,993 16 Membership fees received 3,108 2,160 2,569 7,837 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose 5,666 4,003 5.589 1.424 16,682 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 111 111 Net income from unrelated business activities not included in line 18 0 Tax revenues levied for the organization's benefit 0 and either paid to it or expended on its behalf 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 22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets 0 113,121 23 Total of lines 15 through 22 92.033 15.982 335,623 114,487 24 Line 23 minus line 17 107,455 110,484 86.444 14,558 318.941 25 Enter 1% of line 23 1,131 1,145 160 a Enter 2% of amount in column (e), line 24 26 Organizations described on lines 10 or 11. 26a 6,379 b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 62,257 26b c Total support for section 509(a)(1) test Enter line 24, column (e) 26c 318,941 18 111 19 0 22 0 26b 62,257 d Add Amounts from column (e) for lines 26d 62,368 e Public support (line 26c minus line 26d total) 26e 256,573 f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 80 45% 27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year (1999)(1998)b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records 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.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (1997)(1999)(1998)(2000)17 0 20 0 21 0 and line 27b total c Add Amounts from column (e) for lines d Add Line 27a total 27e e Public support (line 27c total minus line 27d total) 27f f Total support for section 509(a)(2) test Enter amount from line 23, column (e) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) **27**g 0 00% h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 0 00% 28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000. prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Par	t V Private School Questionnaire (See page 7 of the instructions) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
	(To be completed ONE) by schools that checked the box on the o in Fait iv)	I	Yes	N/A No
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	29 30 31		
а		32a		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32b 32c 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			
а	a Students' rights or privileges?	33a		
b	Admissions policies?	33Ь		
c	Employment of faculty or administrative staff?	33c		<u> </u>
d	1 Scholarships or other financial assistance?	33d		
e	e Educational policies?	33e		
f	f Use of facilities?	33f		_
g	3 Athletic programs?	33g		L
h	o Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate 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? 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.	35		

40 Total exempt purpose experiments (add lines 38 and 39) 41 Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - Not over \$500,000	41 Lobbying nontaxable amount	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 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) 43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36
41 Lobbying nontaxable amount	41 Lobbying nontaxable amount	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 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000
41 Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 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	41 Lobbying nontaxable amount	Over \$500,000 but not over \$1 000,000 \$100,000 plus 15% of the excess over \$500,000
10 10 10 10 10 10 10 10 10 10 10 10 10 1		· · · · · · · · · · · · · · · · · · ·
39 Other exempt purpose expenditures 40 Total exempt purpose expenditures (add lines 38 and 39) 40 0		40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount Enter the amount from the following table -

	(i of toporting only by organizations that the total protest and t	· ·		11.001.01.0
Dur	ng 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
а	Volunteers			
Ь	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			
е	Publications, or published or broadcast statements			
f	Grants to other organizations for lobbying purposes		1	
g	Direct contact with legislators, their staffs, government officials, or a legislative body			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
,	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	lobbyin	g act	vities

Schedule A	(Form 990 or 990-E	Z) 2001	YOUTH GARDEN PROJEC	т	87-0568051		Р	age 6
Part VII			nsfers To and Transact	ions and Relationsh	ips With			
	Noncharitable			page 12 of the instruc				
			or indirectly engage in any					
			section 501(c)(3) organiza		relating to political orga	inizations		
		oorting organiza	tion to a noncharitable exen	npt organization of			Yes	No
	Cash					51a(ı)	<u> </u>	X
` '	Other assets					<u>a(II)</u>		Х
	r transactions					1		
			th a noncharitable exempt o			b(ı)	<u> </u>	X.
٠,			charitable exempt organizat	ion		b(11)		X
٠,,	Rental of facilities		rother assets			b(III)	-	X
, ,	Reimbursement	=				b(IV)		X
	Loans or loan gu		bership or fundraising solic	stations		b(v)		Ŷ
						b(vi)	_	^
			ng lists, other assets, or pai 'es," complete the following		chauld always show	c		_^
					-			
			ner assets, or services giver arket value in any transacti					
•			ts, or services received	on or snaring arrangem	ent, snow in column			
	(b)	ous, other asse	(C)		(d)			
(a) Line no		Name of panel		Description of transfe	ש) rs, transactions, and sha	.rina arrai	aam.	onte
Line no	Amount involved	Name of Honci	nantable exempt organization	Description of transfer	is, transactions, and sile	ining arrai	igenn	eiits
								-
•								
								
				· · · · <u>- · · · · · · · · · · · · · · ·</u>				
								
F2n is th	o organization dir	actly or indirect	y affiliated with, or related t	o one or more tax ever	nnt organizations	· · · · ·		
			de (other than section 501(c			Yes	X	No
	es," complete the			(A)	L			,
	(a)	tollowing conce	(b)		(c)	·		
	Name of organization	ation	Type of organization	l De	escription of relationship			
·	traine et arganna							
-								
	_							
				 				
				 				
				 				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of organization

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

2001

Employer identification number

YOUTH GARDEN PROJECT 87-0568051 Organization type (check one) Filers of Section Form 990 or 990-EZ X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General rule or a Special rule (Note Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General rule and a Special rule - see instructions) General Rule -For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II) Special Rules -X For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 331/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and ((() For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year) Caution Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

	1 990, 990-EZ, or 990-PF) (2001)		Page 1 to 1 of Part
Name of organ		Er	nployer identification number 87-0568051
	ributors (See Specific Instructions)		07-0300031
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		- \$	Person X Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
2		- _ \$10,000	Person X Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		_	Person Payroli

Complete Part II if there is a noncash contribution)

Noncash

Schedule B (Fe	orm 990, 990-EZ, or 990-PF) (2001)		Page 1 to 1 of Part II
Name of org		 	Employer identification number
	RDEN PROJECT		87-0568051
Part II No	ncash Property (See Specific Instructions)		
(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
		s	
(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
į			

	organization		Employer identification number
	ARDEN PROJECT	ridual agetebistics	87-0568051
Part III	Exclusively religious, charitable, etc., indivorganizations aggregating more than \$1,00	/idual contribution	is to section 501(c)(/), (o), or (10)
	(Complete columns (a) through (e) and the fol		
	• • • • • • • • • • • • • • • • • • • •	• • •	
	For organizations completing Part III, enter the total		
	contributions of \$1,000 or less for the year (Enter t	his information once-	see instructions) \$
(a) No			
from	(b)	(c)	(d)
Part I	Purpose of gift	Use of gift	Description of how gift is held
			
	 		
			
		(e)	<u> </u>
		Transfer of gift	
	Transferee's name, address, and ZIP + 4	mansier or gift	Relationship of transferor to transferee
	Tansieree s name, address, and ZIF + 4		Relationship of transferor to transferee
		—	
	_ 		
			
(a) No			
from	(b)	(c)	(d)
Part I	Purpose of gift	Use of gift	Description of how gift is held
		-	
		(e)	
		Transfer of gift	
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
(a) No			
(a) No from	(b)	(c)	(d)
Part I	Purpose of gift	Use of gift	Description of how gift is held
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	
		, 	
			
		(e)	
		Transfer of gift	
	Transferee's name, address, and ZiP + 4		Relationship of transferor to transferee
(a) No		· .	
from	(b)	(c)	(d)
Part I	Purpose of gift	Use of gift	Description of how gift is held
	<u> </u>		
		(e)	
	.	Transfer of gift	Dalaharahan akkan akan ak
	Transferee's name, address, and ZIP + 4	 -	Relationship of transferor to transferee
			
			·
	<u> </u>		Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

Page

1 to

1 of Part III

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

YOUTH GARDEN PROJECT 1999 Form 990 87-0568051

Statement 1 990 Page 2, Part III Statement of Program Service Accomplishments	
High School Learning Program Engages high school students as AmeriCorps members to serve the community while earning school credit 17 students participated in the program GRANTS \$ 20,689 00	\$ 30,772
Plugging In Juvenile Service Program Juvenile offenders fulfill court-ordered community service in an educational setting designed to assist them in realizing their full potential 250 youth participated in the program GRANTS \$ 17,016 00	\$ 7,436
Service Projects in the Community Youth of all ages participate community projects while earning money and learning responsibility Approximately 500 community residents were served GRANTS \$ -	\$ 1,496
Americorp Training 16 Americorps members attended conferences and training camps related to providing service projects in the community GRANTS \$ 8,187.00	\$ 13,725
Garden Classroom Elementary and Junior High youth are given opportunities to explore science and health topics in the garden 560 students participated in the program GRANTS \$ 2,313 00	\$ 3,710
Garden Coordination and Site Development Oversight of garden functions and minor construction projects Approximately 1,150 individuals participated in the design and construction of a new greenhouse GRANTS \$ 7,500 00	\$ 6,087
Capacity Building Volunteer coordination, fundraising, and staff evaluation required by Americorps funding GRANTS \$ -	\$ 8,802
Total	\$ 72,028

YOUTH GARDEN PROJECT

99(), Part VIII Relationship of Activities to Accomplishment of Exempt Purpose Total		0
1	93a The Youth Garden Project relocated the garden facilities and with the assistance of volunteers and	1	
2	Americorp members, built a greenhouse to expand the effectiveness of the garden project	2	
3		3	
4	93b An individual donation of \$1,000 helped the organization to write grants and solicit additional funding	4	
5	***************************************	5	
6	93c Corporate and individual donations enabled YGP to meet the matching requirements of their Americorp	6 —	
7	grant and programs as well as fund necessary administrative functions not govered by the Americorps gra	7	
8	***************************************	8	
9	93g. The Americorp grant and funding from local government agencies enabled YGP to create, develop and	9	
10	administer the programs outlined in Part III Americorp funds educational programs for youth. The progra		
11	funded by local agencies included those that serve at-risk and incarcerated youth as well as low-income	11 —	
12	Vouth	12	
13	Journ	13	
	94 Membership dues enable YGP meet its matching requirement from Americorps and also provides	14	
	a network of community supporters and volunteer corps	15	
16	a network of confinding supporters and volunteer corps	16	<u> </u>
	101 Fundraising events provides community outreach and brings the Americorps members and staff in	17 —	
	more direct contact with the general community	18	
19	indie direct contact with the general community	19	
	103 Other revenue represents funds generated from the sale of produce from the garden. Youth participati	20	
	<u> </u>	_	
	in the various programs share in the process of growing, harvesting, selling and allocation of profits	21	
22		22	
23		23	
24		24	
25		25	

87-0568051

YOUTH GARDEN PROJECT DEPRECIATION SCHEDULE

				Current Depreciation			
DATE	DESCRIPTION	LIFE	COST	1998	1999	2000	2001
12/31/99	SCARECROW SCULPTURES	10	\$458 00		\$45 80	\$45 80	\$45 80
12/31/00	SCARECROW SCULPTURES	10	\$1,608 00			\$160 80	\$160 80
12/31/98	EQUIPMENT	5	\$3,344 00	\$668 80	\$668 80	\$668 80	\$668 80
12/31/00	EQUIPMENT	5	\$49 00			\$9 80	
12/31/00	GREENHOUSE	20	\$11,699 00			\$584 95	\$584 95
12/31/01	GREENHOUSE	10	\$70 00				\$7 00
12/31/01	SHED	20	\$950 00	<u> </u>			\$47.50
			\$18,178 00	\$668 80	\$714 60	\$1,470 15	\$1,514 85

Accumulated Depreciation

\$91 60 \$160 80

\$2,006 40 \$9 80

\$584 95

\$0 00 \$0 00

\$4,368 40