

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

2002**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning **01/01/02**, 2002, and ending **12/31/02**, 20**B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization**The Boaz Project, Inc**

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

PO Box 47188

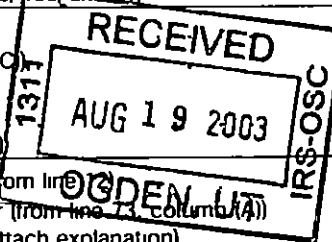
City or town state or country and ZIP + 4

Indianapolis, IN 46227-0188**D** Employer identification number**35 2093306****E** Telephone number**(317) 889-7606****F** Accounting method: ☒ Cash ☐ Accrual☐ Other (specify) ▶

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

G Web site: ▶ **http://www.boazproject.org****J** Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**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.**H** and **I** are not applicable to section 527 organizations**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes" enter number of affiliates ▶**H(c)** Are all affiliates included? ☐ Yes ☒ No

(If "No" attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Enter 4-digit GEN ▶**M** Check ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **214,497****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 17 of the instructions)**1** Contributions, gifts, grants, and similar amounts received**a** Direct public support**b** Indirect public support**c** Government contributions (grants)**d** Total (add lines 1a through 1c) (cash \$ **214,497** noncash \$ **0**)**2** Program service revenue including government fees and contracts (from Part VII, line 93)**3** Membership dues and assessments**4** Interest on savings and temporary cash investments**5** Dividends and interest from securities**6a** Gross rents**b** Less rental expenses**c** Net rental income or (loss) (subtract line 6b from line 6a)**7** Other investment income (describe ▶)**8a** Gross amount from sales of assets other than inventory**b** Less cost or other basis and sales expenses**c** Gain or (loss) (attach schedule)**d** Net gain or (loss) (combine line 8c, columns (A) and (B))**9** Special events and activities (attach schedule)**a** Gross revenue (not including \$ _____ of contributions reported on line 1a)**b** Less direct expenses other than fundraising expenses**c** Net income or (loss) from special events (subtract line 9b from line 9a)**10a** Gross sales of inventory, less returns and allowances**b** Less cost of goods sold**c** Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)**11** Other revenue (from Part VII, line 103)**12** Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)**13** Program services (from line 44, column (B))**14** Management and general (from line 44, column (C))**15** Fundraising (from line 44, column (D))**16** Payments to affiliates (attach schedule)**17** Total expenses (add lines 16 and 44, column (A))**18** Excess or (deficit) for the year (subtract line 17 from line 12)**19** Net assets or fund balances at beginning of year (from line 13, column (A))**20** Other changes in net assets or fund balances (attach explanation)**21** Net assets or fund balances at end of year (combine lines 18, 19, and 20)**1a** **214,497****1b** **0****1c** **0****1d** **214,497****2** **0****3** **0****4** **0****5** **0****6a** **0****6b** **0****6c** **0****7** **0****8a** **0****8b** **0****8c** **0****8d** **0****9a** **0****9b** **0****9c** **0****10a** **0****10b** **0****10c** **0****11** **0****12** **214,497****13** **130,046****14** **65,026****15** **4,193****16** **199,265****17** **15,232****18** **13,818****19** **29,050****20** **29,050****21** **29,050**

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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 page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____ 0)	0			
23	Specific assistance to individuals (schedule)	0	0		
24	Benefits paid to or for members (schedule)	0			
25	Compensation of officers, directors, etc	68,628	17,120	51,508	
26	Other salaries and wages	0			
27	Pension plan contributions	0			
28	Other employee benefits	0			
29	Payroll taxes	0			
30	Professional fundraising fees	0			
31	Accounting fees	37			37
32	Legal fees	0			
33	Supplies	46,551	39,235	5,720	1,596
34	Telephone	185	170	15	
35	Postage and shipping	3,271	49	1,613	1,609
36	Occupancy	7,535	7,535		
37	Equipment rental and maintenance	0			
38	Printing and publications	620			620
39	Travel	68,457	65,709	2,672	76
40	Conferences, conventions, and meetings	0			
41	Interest	0			
42	Depreciation, depletion, etc (schedule)	0			
43a	Other expenses not covered above (itemize) a	3,981	228	3,498	255
b	See Statement 1				
c					
d					
e					
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	199,265	130,046	65,026	4,193

Joint Costs Check ☐ if you are following SOP 98-2Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ 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 page 24 of the instructions)What is the organization's primary exempt purpose? **Humanitarian Aid**

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	See Statement 2 (Grants and allocations \$ _____)
b	(Grants and allocations \$ _____)
c	(Grants and allocations \$ _____)
d	(Grants and allocations \$ _____)
e	Other program services (attach schedule) (Grants and allocations \$ _____)
f	Total of Program Service Expenses (should equal line 44 column (B), Program services) 130,046

Part IV Balance Sheets (See page 24 of the instructions)

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
45	Cash—non-interest-bearing	13,818	45	29,050
46	Savings and temporary cash investments	0	46	0
47a	Accounts receivable	0		
47b	Less allowance for doubtful accounts	0	47c	0
48a	Pledges receivable	0		
48b	Less allowance for doubtful accounts	0	48c	0
49	Grants receivable	0	49	0
50	Receivables from officers, directors, trustees, and key employees (attach schedule)	0	50	
51a	Other notes and loans receivable (attach schedule)	0		
51b	Less allowance for doubtful accounts	0	51c	0
52	Inventories for sale or use	0	52	0
53	Prepaid expenses and deferred charges	0	53	0
54	Investments—securities (schedule) ☐ Cost ☐ FMV	0	54	
55a	Investments—land, buildings, and equipment basis			
55b	Less accumulated depreciation (attach schedule)	0	55c	0
56	Investments—other (attach schedule)	0	56	
57a	Land, buildings, and equipment basis			
57b	Less accumulated depreciation (attach schedule)	0	57c	0
58	Other assets (describe ☐)	0	58	
59	Total assets (add lines 45 through 58) (must equal line 74)	13,818	59	29,050
60	Accounts payable and accrued expenses	0	60	0
61	Grants payable	0	61	0
62	Deferred revenue	0	62	0
63	Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	
64a	Tax-exempt bond liabilities (attach schedule)	0	64a	
64b	Mortgages and other notes payable (attach schedule)	0	64b	
65	Other liabilities (describe ☐)	0	65	
66	Total liabilities (add lines 60 through 65)	0	66	0
	Organizations that follow SFAS 117, check here ☒ and complete lines 67 through 69 and lines 73 and 74	690	67	1,452
67	Unrestricted	0	68	0
68	Temporarily restricted	13,128	69	27,598
69	Permanently restricted			
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 70 through 74		70	
70	Capital stock, trust principal, or current funds		71	
71	Paid-in or capital surplus, or land, building, and equipment fund		72	
72	Retained earnings, endowment, accumulated income, or other funds			
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	13,818	73	29,050
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	13,818	74	29,050

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 VI Other Information (See page 27 of the instructions)

	Yes	No	N/A
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a description of each activity	☒		
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	☒		
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	☒		
b If "Yes," has it filed a tax return on Form 990-T for this year?	☒		
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," statement	☒		
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?	☒		
b If "Yes" enter the name of the organization: _____ and check whether it is ☐ exempt OR ☐ nonexempt			
81a Enter direct or indirect political expenditures. See line 81 instructions	0		
b Did the organization file Form 1120-POL for this year?	☒		
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?	☒		
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 in Part III.)	28,059		
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	☒		
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	☒		
84a Did the organization solicit any contributions or gifts that were not tax deductible?	☒		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?			
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
c Dues, assessments, and similar amounts from members	85c		
d Section 162(e) lobbying and political expenditures	85d		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86 501(c)(7) orgs a Initiation fees and capital contributions included on line 12	86a		
b Gross receipts, included on line 12, for public use of club facilities	86b		
87 501(c)(12) orgs a Gross income from members or shareholders	87a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b		
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		☒	
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911: 0, section 4912: 0, section 4955: 0	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	89b		☒
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0	
d Enter Amount of tax on line 89c, above, reimbursed by the organization		0	
90a List the states with which a copy of this return is filed: IN			
b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	1	
91 The books are in care of: James Jurgensen Telephone no: () 317-889-7606 Located at: 3529 Mechanicsburg DR, Indianapolis, IN ZIP + 4: 46227			
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year: 92			☐

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

2002

Department of the Treasury •
Internal Revenue Service

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

Name of the organization
The Boaz Project, Inc

Employer identification number
35 2093306

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
None				
Total number of other employees paid over \$50,000 ▶	0			

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 paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions)

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 ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

- 2** During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any 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 owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

a Sale, exchange, or leasing of property?

b Lending of money or other extension of credit?

c Furnishing of goods, services, or facilities?

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?

e Transfer of any part of its income or assets?

- 3** Does the organization make grants for scholarships, fellowships, student loans, etc.? (See **Note** below.)

- 4** Do you have a section 403(b) annuity plan for your employees?

Note. 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.

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 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.)
- 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** ☐ 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** in Part IV-A.)
- 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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	214,497	15,864	0	0	230,361
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 related to the organization's charitable, etc., purpose	0	0	0	0	0
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	0	0	0	0	0
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.					0
23 Total of lines 15 through 22	214,497	15,864	0	0	230,361
24 Line 23 minus line 17	214,497	15,864	0	0	230,361
25 Enter 1% of line 23	2,145	159	0	0	

- 26 Organizations described on lines 10 or 11** **a** Enter 2% of amount in column (e) line 24 **▶** **26a**
- 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 1998 through 2001 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts **▶** **26b**
- c** Total support for section 509(a)(1) test. Enter line 24, column (e) **▶** **26c**
- d** Add: Amounts from column (e) for lines 18 _____ 19 _____
22 _____ 26b _____ **▶** **26d**
- e** Public support (line 26c minus line 26d total) **▶** **26e**
- f** Public support percentage (line 26e (numerator) divided by line 26c (denominator)) **▶** **26f** %

- 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:

(2001) 0 (2000) 0 (1999) 0 (1998) 0

- 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:

(2001) 0 (2000) 0 (1999) 0 (1998) 0

- c** Add: Amounts from column (e) for lines 15 _____ 16 _____
17 _____ 20 _____ 21 _____ **▶** **27c** 230,361
- d** Add: Line 27a total _____ and line 27b total _____ **▶** **27d** 0
- e** Public support (line 27c total minus line 27d total) **▶** **27e** 230,361
- f** Total support for section 509(a)(2) test. Enter amount from line 23, column (e) **▶** **27f** 230,361
- g** Public support percentage (line 27e (numerator) divided by line 27f (denominator)) **▶** **27g** 100 %
- h** Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) **▶** **27h** 0 %

- 28 Unusual Grants** For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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.

Part 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)

	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?		
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?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
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?		
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.		
35 Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation.		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ☐ **a** if the organization belongs to an affiliated group Check ☐ **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
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 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		41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter 0 if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must 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 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 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		✓	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		✓	
c Media advertisements		✓	
d Mailings to members legislators or the public		✓	
e Publications or published or broadcast statements		✓	
f Grants to other organizations for lobbying purposes		✓	
g Direct contact with legislators, their staffs, government officials, or a legislative body		✓	
h Rallies, demonstrations seminars, conventions, speeches, lectures, or any other means		✓	
i Total lobbying expenditures (Add lines c through h)			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 12 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?

- a Transfers from the reporting organization to a noncharitable exempt organization of**

(1) Cash

(ii) Other assets

b Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

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.

	Yes	No
51a(i)		✓
a(ii)		✓
b(i)		✓
b(ii)		✓
b(iii)		✓
b(iv)		✓
b(v)		✓
b(vi)		✓
c		✓

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶

► ☐ Yes ☒ No

b If "Yes," complete the following schedule

[illegible]

Statement 1
Form 990
Page 2
Part II
Question 43

The Boaz Project, Inc
35-2093306

Attachment listing other expenses for Part II

Description	Total	Pgm Services	Mgt and General	Fundraising
Bank Charges	\$275 00	\$63 00	\$0 00	\$212 00
Training Program	\$141 00	\$141 00	\$0 00	\$0 00
Hospitality	\$429 00	\$24 00	\$362 00	\$43 00
Miscellaneous	\$31 00	\$0 00	\$31 00	\$0 00
Technology	\$3,105 00	\$0 00	\$3,105 00	\$0 00
Total	\$3,981 00	\$228 00	\$3,498.00	\$255.00

Statement 2
Form 990
Page 2
Part III
Question

The Boaz Project, Inc
35-2093306

Program Services

Achievement	Pgm. Svc Exp
The mission of The Boaz Project is to have a positive impact on the spiritual and physical conditions of orphans in Russia by providing Biblical education, medical, personal, & educational supplies, & Christian families. We service 1,000 orphans.	\$130,046.00
Grants and Allocations: \$0.00	
Total.	\$130,046.00

Statement 3
Form 990
Page 4
Part V
Question

The Boaz Project, Inc
35-2093306

Officers, Directors, Trustees, and Key Employees

Name and Address	Title	Hrs	Comp	Benefits	Expenses
Gary Boring 1832 Broadleaf Court Greenwood IN 46143	Chairman	0	\$0 00	\$0 00	\$0 00
Thor Thomsen N4492 Ware Road Waupaca, WI 54981	Vice President	0	\$0 00	\$0 00	\$0 00
Jill Wickham 4630 Del Mar Court Greenwood, IN 46142	Treasurer	0	\$0 00	\$0 00	\$0 00
Patty Collins 1527 S 575 W Morgantown, IN 46160	Secretary	0	\$0 00	\$0 00	\$0 00
James Jurgensen 3529 Mechanicsburg DR Indianapolis, IN 46227	Staff	60	\$54 479 56	\$0 00	\$0 00
April Jurgensen 3529 Mechanicsburg DR Indianapolis, IN 46227	Staff	15	\$0 00	\$0 00	\$0 00