Form 990

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

OMB No 1545-0047 2002

Open to Public Inspection

Dep Inte	artment i	of the Treasury enue Service		penefit trust or private four ave to use a copy of this return to			ing regulremen	nta		Open to P Inspecti	
A			ear, or tax year beginning	, and end			-ng jedementer				
В		f applicable Pleas	C Name of organization					D	Emplo	yer ID numbe	—- >r
	Addre	ess change label	1							552780	
	Name	change print	TOTAL O COLUMNA	LL FOLK SCHOOL	i, 1	INC.		E		one number	_
	Indial	return type	Number and street (or P O box if	mail is not delivered to street add	iress)		Room/suite		828-	-837-27	75
	Final	return See	ONE FORK SCHOO	L ROAD				<u></u>	Accoun	ting method	Cast
Ĺ	Amer	nded return Speci	City or town state or country and	ZIP + 4			·		Accrual	Other (specify)
L	Appin	cation pending tions	DDACCMOINI	NC 2890)2			▶_			
		•	Section 501(c)(3) organizations and 494	7(a)(1) nonexempt charitable	н	and I are no	ot applicable to	section 5	27 organ	zations	
			trusts must attach a completed Schedul	e A (Form 990 or 990-EZ)	н	(a) Is this	a group return	for affiliat	es?	Yes	X N
G	Web s	ite 🕨 www.f	olkschool.com		_ н	(b) If Yes	," enter no of a	affiliates	•	_	_
J	Organ.	ization type			Н	(C) Are all	affiliates includ	ted?		Yes	∐ N
				4947(a)(1) or 527	_	(If "No	"att. a list. See	e instr)			
K	Check		the organization's gross receipts are n	•	н	(d) Is this	a separate retu	ım filed b	y an		_
		_	n need not file a return with the IRS, bi	•	<u> </u>	organi	ation covered	by a grou	ip ruling?	Yes	N-
			kage in the mail, it should file a return	without financial data	<u> </u>		4-digit GEN	<u> </u>			
_		states require a c		2 244 65	_	M Check		•		is not require	
			6b, 8b, 9b, and 10b to line 12	3,344,67						Z, or 990-PF)	
	art I		Expenses, and Changes in I		alanc	es (See	page 17	ot the	<u>instruc</u>	itions)	
	1	_	fts, grants, and similar amounts receive	e d	١.	1	114 0	E 0			
	a	Direct public sup	•		1a		114,2	<u>50</u>			
	b	Indirect public su	• • •		1b	<u> </u>	<u> </u>				
	C		Inbutions (grants)	L59,021 noncash \$	_ <u>1c</u>	1	<u>50,0</u> 5,229		.	104	250
	d 2		1a through 1c) (cash \$				<u>5,229</u>	· -	d	2,552	<u>,250</u>
	3		s and assessments	io contracts (from Part VII II	ne 93)			2		2,332	,220
	4		gs and temporary cash investments					3	_		, 620
	5		terest from secunties					5	_		<u>, 620</u> , 481
	6a	Gross rents	terest from securities		6a	1	2,0	——	+		, 401
	Ь	Less rental expe	neec		6b		2,0	3 /	ŀ		
	_ c		e or (loss) (subtract line 6b from line 6a	a)				─ 6	. ا	2	,097
]; }	7		t income (describe	-,)				7	_		, 0 5 .
3,1,2003	8a	_	om sales of assets other	(A) Securities	Ι	(B) Other	·- -		_	
قر		than inventory			8a	1-	-71,7	86			
₹	Ь	Less cost or other	er basis and sales expenses		8b		•				
Ξ,	c	Gain or (loss) (at	tach schedule)		8c		-71,7	86			
_	d	Net gain or (loss)	(combine line 8c columns (A) and (B)))		See	Stmt 1	8	d	-71	,786
Θ.	9	Special events a	nd activities (attach schedule)								
*	a	Gross revenue (r	not including \$	of				ŀ			
		contributions rep	•		9a		65,0				
(a)	Ь		nses other than fundraising expenses		9b		12,0	<u>79</u>			
3	C		ess) from special events (subtract line s	9b from line 9a)	,	1		90	<u>: </u>	52	<u>, 990</u>
	102-		ventory, less returns and allowances		10a		567,7				
	<i> </i>	Les cost of goo			10b		533,4				
	<i> </i> c	Gross profit DI	from sales of inventory (att. sch.) (subtract line 10b from line 1	0a)		Stmt 2			<u>34</u>	<u>,282</u>
	18		om Part VII, (ne 103)					1			
_	1g	Total Yevenue (a	ndd lines 152 k, 3, 4, 5 6c, 7, 8d 9c, 10	oc, and 11)				12		2,799	
E	13 L		(Irom Imp 4, column (B))					13		1,847	
P	14	Canagement and	general from line 44 column (C))					14			721
n		runormenta Aron	jme 44, column (D))					18		14_	<u>, 782</u>
8	16	Payments to attili	ates (attach schedule)					16	- Y		477
<u>s</u>	17		(add lines 16 and 44, column (A))	- 12)	••••			17	\rightarrow	2,664 134	
A N S	18 19		i) for the year (subtract line 17 from line	•				18			<u>, 681</u>
Ns e e t t	20		d balances at beginning of year (from linet assets or fund balances (attach ex					19	_	4,681	<u>, 231</u>
l t S	21		net assets or fund balances (attach e) d balances at end of year (combine lin					20		A 01F	012
_		0000013 01 1011	a paieures er eur oi Aest Compiue nu	CS 10, 13, ANU 20)				. 21		4,815	<u>, ,,,,,,,</u>

Form 990 (2002) JOHN C. CAMPBELL FOL			<u> 56-055</u>			Page 2
•		nplete column (A) Columni				•
Functional Expenses and section 4947(Do not include amounts reported on line	a)(1) no	nexempt chantable trusts b	_			-
6b, 8b, 9b, 10b, or 16 of Part I	1	(A) Total	(B) Prog		(C) Management	(D) Fundraising
22 Grants and allocations (attach schedule)	 		servi	æs	and general	-
(cash \$ cash \$)	22				:	
23 Specific assistance to individuals	23					
24 Benefits paid to or for members	24					
25 Compensation of officers, directors, etc	25	132,569			132,569	
26 Other salanes and wages	26	832,690		,801	212,889	
27 Pension plan contributions	27	73,467		,019		
28 Other employee benefits	28	184,603		,146		
29 Payroll taxes	29	78,987	48	,972	30,015	
30 Professional fundraising fees	30					_
31 Accounting fees	31	6,675			6,675	· -
32 Legal fees	32	4,350			4,350	
33 Supplies	33	244,510		,704	94,806	
34 Telephone	34	31,885		,914	7,971	_
35 Postage and shipping	35	28,228		<u>,171</u>	7,057	
36 Occupancy	36	95,368	71	<u>, 526</u>	23,842	
37 Equipment rental and maintenance	37	400 645		6-4		
38 Printing and publications	38	192,641		, 859 401	0.444	14,782
39 Travel	39	121,862	119	<u>, 421</u>	2,441	
40 Conferences, conventions, and meetings	40					
41 Interest	41	146,601	102	, 621	43,980	
42 Depreciation, depletion, etc. (attach schedule) 43 Other expenses not covered above (itemize) a	43a	140,001	102	,021	43,360	
b See Statement 3	43b	490,037	347	,816	142,221	
c	43c	490,037	347	,010		.
d	43d					- . .
0	43e			-		
44 Total functional expenses (add lines 22 - 43) Organizations	1					
completing columns (B)-(D), carry these totals to lines 13-15	44	2,664,473	1,847	.970	801,721	14,782
Joint Costs Check ▶ ☐ if you are following SOP 98-2						
Are any joint costs from a combined educational campaign and	fundrais	sing solicitation reported	d in (B) Prograi	m service	es?	▶ 🗌 Yes 🔀 No
If "Yes" enter (i) the aggregate amount of these joint costs		(II) the	amount allocate	d to Progr	am services \$	
(iii) the amount allocated to Management and general \$			amount allocate			
Part III Statement of Program Service Acco	mpli	shments (See pag	<u>e 24 of the</u>	ınstru	ctions)	
What is the organization's primary exempt purpose?						Program Service Expenses
See Statement 4			Ci-i- ib-			(Required for 501(c)(3) &
All organizations must describe their exempt purpose achievement of clients served publications issued, etc. Discuss achievement	s that a	re not measurable (Sei	ction 501(c)(3)	and (4)		(4) orgs & 4947(a)(1) trusts but optional for
organizations and 4947(a)(1) nonexempt charitable trusts must in	also ent	ter the amount of grants	s and allocation	<u>is to othe</u>		others)
a PROVIDING OVER 300 COURSES V				NG O	VER	
4000 STUDENTS FROM ALL OVER	THE	UNITED STA	TES.			
		ال ا				1 047 070
h		(Grants and all	ocations \$			1,847,970
b						
		(Grants and all	ocations \$,	
С.		(Orants and an	ocations 9			
		(Grants and all	ocations \$,	
d		(Orallo and an				
		(Grants and all	ocations \$			
Other program services (attach schedule)		(Grants and all	ocations \$)	
f Total of Program Service Expenses (should equal line 44,	column	(B), Program services)		_	1,847,970
)AA						Form 990 (200)

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

	Note	Where required, attached schedules and amounts column should be for end-of-year amounts only	within the description	on	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing			8,239	45	34,800
	46	Savings and temporary cash investments		ļ	597,187		582,338
			احدا	6 000			
	47a	Accounts receivable	47a	6,922	6 306		<i>c</i> 000
	Ь	Less allowance for doubtful accounts	47b		6,396	47c	6,922
	48a	Pledges receivable	48a				
	ь	Less allowance for doubtful accounts	48b			48c	
	49	Grants receivable				49	25,000
	50	Receivables from officers, directors, trustees, and	l key employees				
A	ŀ	(attach schedule)				50	
\$	51a	Other notes and loans receivable (attach					
s		schedule)	51a				
0	ь	Less allowance for doubtful accounts	51b			51c	
t	52	Inventones for sale or use		L	137,139		147,113
9	53	Prepaid expenses and deferred charges			46,388	53	
	54	Investments-securities	▶ ∐	Cost FMV		54	<u>-</u> -
	55a	Investments-land, buildings and				İ	
	i	equipment basis	55a				
	Ь	Less accumulated depreciation (attach					
	l	schedule)	55b			55¢	
	56	investments-other (attach schedule)	, See	Stant 5	1,723,571	56	1,895,634
	57a	Land, buildings, and equipment basis	57a	3,933,667			
	Ь	Less accumulated depreciation (attach					
		schedule)	57b	1,431,107	2,530,740		<u>2,502,560</u>
	58	Other assets (describe	:_6)	<u> </u>	25,062	58	44,709
	59	Total assets (add lines 45 through 58) (must equ	at line 74)		5,074,722	59	5,239,076
	60	Accounts payable and accrued expenses	47 mic 1-47		210,583		193,854
L i	61	Grants payable	ŗ		61		
ı a	62	Deferred revenue		-	182,908		229,310
b	63	Loans from officers directors, trustees, and key e	mplovees (attach				
i		schedule)	, , , , , , , , , , , , , , , , , , ,			63	
i	64a	Tax-exempt bond liabilities (attach schedule)			-	64a	
t	ь	Mortgages and other notes payable (attach sched	ule)	-		64b	
i e	65	Other liabilities (describe	,	-		65	
S							
	66	Total liabilities (add lines 60 through 65)			393,491	66	423,164
	Orga	nizations that follow SFAS 117, check here	and complete	lines	_		
		67 through 69 and lines 73 and 74					
NF	67	Unrestricted			4,587,188	67	4,753,714
e u t n	68	Temporanly restricted			6 <u>4,</u> 857	68	31,271
ď	69	Permanently restricted	_		29,186	69	<u>30,927</u>
A	Orga	nizations that do not follow SFAS 117, check he	ere 🕨 📙 and				
s B		complete lines 70 through 74					
3 A	70	Capital stock trust principal or current funds				70	
e i ta	71	Paid-in or capital surplus, or land, building, and eq	uipment fund			71	
5 N	72	Retained earnings, endowment, accumulated inco	me, or other funds	L	<u>.</u>	72	
C	73	Total net assets or fund balances (add lines 67	through 69 or lines				
о _ө	[70 through 72,		<u> </u>			
Ĭ	[column (A) must equal line 19, column (B) must e		L	4,681,231		4,815,912
	74	Total liabilities and net assets / fund balances	(add lines 66 and 73)	5,074,722	74	5,239,076

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.

al Statements	wit	te per Audited h Revenue per he instructions) 2,663,6	56	a Total expenses audited financia	I statements ed on line a but not n 990 es and use tments			
e Stmt 7 -135,498 through (4)	of ti	ne instructions)	56	a Total expenses audited financia b Amounts include on line 17, Form (1) Donated service of facilities \$ (2) Prior year adjust reported on line Form 990 \$	Return and losses per I statements ed on line a but not n 990 es and use tments	•nts	a a	
e Stmt 7 -135,498 through (4)	a		56	a Total expenses audited financia b Amounts include on line 17, Form (1) Donated service of facilities \$ (2) Pποτ year adjust reported on line Form 990 \$	and losses per I statements ed on line a but not n 990 es and use tments	•	a	2,664,473
ements a but not on e Stmt 7 -135,498 through (4)		2,663,6	56	audited financia b Amounts include on line 17, Form (1) Donated service of facilities \$ (2) Prior year adjust reported on line Form 990 \$	I statements ed on line a but not n 990 es and use tments	•	a	2,664,473
e Stmt 7 -135,498 through (4)		2,663,6	56	b Amounts include on line 17, Form (1) Donated service of facilities \$ (2) Prior year adjust reported on line Form 990 \$	ed on line a but not n 990 es and use tments	<u> </u>	а	<u>2,664,473</u>
e Stmt 7 -135,498 through (4)	1			on line 17, Form (1) Donated service of facilities \$ (2) Prior year adjust reported on line Form 990 \$	n 990 es and use trnents			
e Stmt 7 -135,498 through (4)	1			(1) Donated service of facilities \$\frac{\sqrt{2}}{2}\$ Pnor year adjust reported on line Form 990 \$\frac{\sqrt{2}}{2}\$	es and use tments			
e Stmt 7 -135,498 through (4)	1			of facilities \$\frac{\sqrt{\sq}}}}}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}} \simptintiles{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sqrt{\sq}	tments			
e Stmt 7 -135,498 through (4)	1			(2) Pnor year adjust reported on line Form 990	tments			
e Stmt 7 -135,498 through (4)	1			reported on line Form 990			1	
-135,498 through (4) ► 12	1			Form 990 §	20,			
-135,498 through (4) ► 12	1							
-135,498 through (4) ► 12	1				Lon line 20			
-135,498 through (4) ► 12	1			Form 990 \$				
-135,498 through (4) ► 12	1			(4) Other (specify)				
through (4) through (4)	1			(4) Cirici (opedily)				
12		-135,4	98	s			i i	
				Add amounts or	lines (1) through (4)		Ы	
	c	2,799,1	54		.,	•	С	2,664,473
8	Г			d Amounts include	ed on line 17,			
=				Form 990 but no	ot on line a			
				(1) Investment expe	enses			
				not included on	line 6b,			
	ļ			Form 990 §				
			Ì	(2) Other (specify)				
	١.			<u>\$</u>				
and (2)	d	· · · · · · · · · · · · · · · · · · ·			lines (1) and (2)		0	
Form 990	l _,	2 700 1	5 A		per line 17, Form 990			2,664,473
cers Directors						20212	• • • • • • • • • • • • • • • • • • •	
	, '	rustees, and hey		proyees (List each)	one even is not compe	isatet	r, see pag	5 20 OI
·/	-		1	B) Title and average	(C) Compensation	(D)	Contrib to	(E) Expense
Name and address			ho	irs per week devoted to	(If not paid, enter	plans	oyee benefit & deferred	account and other
_					1 -			
8								ļ
								
								
								
								-
		i						
								_
	loye	e receive aggregate coi	mpe	sation of more than \$	100,000 from your			.
	whi							
			was	provided by the related	d organizations?		•	Yes 🔀 No
	Name and address 8	eers, Directors, To) Name and address 8	Pers, Directors, Trustees, and Key Name and address 8 ustee, or key employee receive aggregate co	Piers, Directors, Trustees, and Key Employee and address how the state of the state	Sees, Directors, Trustees, and Key Employees (List each of sees) Name and address (B) Title and average hours per week devoted to position	e 2,799,154 (line c plus line d) ters, Directors, Trustees, and Key Employees (List each one even if not compe) Name and address (B) Title and average hours per week devoted to position (If not paid, enter -0) 8	Sers, Directors, Trustees, and Key Employees (List each one even if not compensated hours per week devoted to position (C) Compensation (if not paid, enter position (if not paid, enter position (if not paid, enter posi	e 2,799,154 (line c plus line d) cers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page) Name and address (C) Compensation (If not paid, enter plans & deferred compensation) (B) Tritle and average hours per week devoted to position (If not paid, enter plans & deferred compensation) (B) Contrib to employee benefit plans & deferred compensation.

Form	990 (2002) JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780		Pi	age 5
_Pa	ort VI Other Information (See page 27 of the instructions)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of			
	each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		Х
	If "Yes," attach a conformed copy of the changes			
78a	Did the organization have unrelated business gross inc. of \$1,000 or more during the year covered by this return?	78a		х
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation dissolution, termination, or substantial contraction during the year? If "Yes," attach a			
	statement	79		X
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		X
ь	If "Yes," enter the name of the organization			
	and check whether it is exempt or nonexempt	1		
81a	Enter direct or indirect political expenditures. See line 81 instr.	j		
ь	Did the organization file Form 1120-POL for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	ļ		į
	or at substantially less than fair rental value?	82a		X
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)			ł
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	l .		
	or gifts were not tax deductible? N/A	84b		
85	501(c)(4) (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		
þ	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	l i		
	received a waiver for proxy tax owed for the prior year			
C	Dues assessments, and similar amounts from members 85c	1		
d	Section 162(e) lobbying and political expenditures	1		
8	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) [85f]	1		
9	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g		
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? N/A	85h		
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12.			
ь	Gross receipts included on line 12 for public use of club facilities	4		
87	501(c)(12) orgs Enter a Gross income from members or shareholders	4		
b	The state of the s			
	sources against amounts due or received from them)			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			
	partnership, 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		<u> </u>
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			
Ь	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	l		
	a statement explaining each transaction	89b		X
С	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			_
	sections 4912, 4955, and 4958			<u> </u>
d				<u> </u>
90a	List the states with which a copy of this return is filed NC			
ь	Number of employees employed in the pay period that includes March 12 2002 (See instructions) 90b		43	
91	The books are in care of ▶ JOHN CAMPBELL FOLK SCHOOL Telephone no ▶ 828-	·83/	-27	/5
	Located at ► ONE FOLK SCHOOL ROAD, BRASSTOWN, NC ZIP+4 ► 28902			
92	Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in tieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92			- L
	and enter the amount of tax-exempt interest received or accrued during the tax year 92		000	

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

2002

Name of the organization			Employer identific	ation number
JOHN C. CAMPBELL FOLK SCHOOL, I	INC.		56-055278	0
Part I Compensation of the Five Highest Pa	id Employees Other Tha		ctors, and Truste	
(See page 1 of the instructions List ea		e, enter "None "		(a) Europea
(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 ben plans & deferred compensation	(e) Expense account and other allowances
KAREN E. BEATY 5556 12 POINT ROAD	PROGRAM MGR	54,263	2,223	0
Total number of other employees paid over	0			
Part II Compensation of the Five Highest Pa (See page 2 of the instr. List each one				ne ")
(a) Name and address of each independent contractor p	aid more than \$ 50 000	(b) Туре	of service	(c) Compensation
None				
		-		
Total number of others receiving over \$50,000 for			·	<u>.</u> ·
professional services	<u></u>			

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2002

<u>Sch</u> e	dule	A (Form 990 or 990-EZ) 2002 JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780		P	age 2
Pa	art I	II Statements About Activities (See page 2 of the instructions)		Yes	No
1	Du	ring the year, has the organization attempted to influence national, state, or local legislation, including any	T		
		empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid	1	<u> </u>	X
		incurred in connection with the lobbying activities (Must equal amount on line 38,		ļ	
		rt VI-A, or line I of Part VI-B) ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other			
		partizations that made an election under section 50 km by limit of the 5700 mast complete Part VI-A Other participants of the complete Part VI-B AND attach a statement giving a detailed description of			
	_	lobbying activities			
2		ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
	sub	ostantial contributors, trustees, directors, officers, creators, key employees or members of their families, or			
	with	h any taxable organization with which any such person is affiliated as an officer, director, trustee, majority			Į
	ow	пег, or pппcipal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the			
		nsactions)			
a	Sal	le exchange, or leasing of property?	2a	<u>. </u>	X
b	Ler	nding of money or other extension of credit?	2b		х
С	Fur	mishing of goods services or facilities?	2c		x
	_				
đ	Pay	yment of compensation (or payment or reimbursement of exp. if more than \$1 000)?	2d		Х
0	Tra	insfer of any part of its income or assets?	2ө		X
3	Doe	es the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below.)	3		x
4	Do	you have a section 403(b) annuity plan for your employees?	4		Х
Note	Atta	ach a statement to explain how the organization determines that individuals or organizations receiving grants			
or loa	ns f	rom it in furtherance of its chantable programs "qualify" to receive payments			
Pa	ırt l'	V Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)			
The (orgar	nization is not a private foundation because it is. (Please check only ONE applicable box.)			
5	Ш	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)			
6	X	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7	Н	A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(III)			
8	Н	A Federal state, or local government or governmental unit Section 170(b)(1)(A)(v)			
9	Ц	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	Ц	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)	1		
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	Ц	A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12	Ш	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			
42	П	by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13	Ц	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)	1,000		
		(a) Name(s) of supported organization(s)	Line n		
14	Π	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			

Schedule A (Form 990 or 990-EZ) 2002

Pa	rt 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)			
29	Does the organization have a radially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29	Х	
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,			Ì
	programs, and scholarships?	30	X	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during		1	
	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	X	
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) THE RACIALLY NONDISCRIMINATORY POLICY FOR JOHN C. CAMPBELL FOLK SCHOOL, INC. IS PUBILICIZED ANNUALLY IN THE COURSE CATLOG.			
32	Does the organization maintain the following		 	
a	Records indicating the racial composition of the student body, faculty and administrative staff?	32a		X
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			_
	basis?	32b	X	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions programs, and scholarships?	32c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	X	
	If you answered "No" to any of the above, please explain (If you need more space attach a separate statement) See Statement 9			
33	Does the organization discriminate by race in any way with respect to			
а	Students' nghts or privileges?	33a		х
b	Admissions policies?	33ь		х
c	Employment of faculty or administrative staff?	33c		Х
d	Scholarships or other financial assistance?	33d		X
0	Educational policies?	33е		x
f	Use of facilities?	33f		х
g	Athletic programs?	33g		Х
h	Other extracumcular activities?	33h		х
	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		x
_				
Ь	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or bi please explain using an attached statement	34b		X
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	135	ı X l	

JOHN C. CAMPBELL FOLK SCHOOL, INC.

56-0552780

Page 4_

To be completed ONLY by an eligible organization that filed Form 5768) N/A (a) (b) (b) (c) (d) (e)	Schedule A (Form 990 or 990-EZ) 2002 Part VI-A Lobbying Expend (To be completed)		Public Charitie	s (See pag	ge 9 c	of the instru			780	Page 5
Limits on Lobbying Expenditures (The term *espenditures' means amounts page or incurred) (The considered for Alt Research To total lobbying expenditures to influence public opinion (grassroots lobbying) 35 Total lobbying expenditures (and lines 36 and 37) 36 Total lobbying expenditures (and lines 36 and 37) 37 Total lobbying propose expenditures (and lines 36 and 37) 38 Total lobbying propose expenditures (and lines 36 and 37) 39 Total lobbying propose expenditures (and lines 36 and 37) 30 The exempt purpose expenditures (and lines 36 and 39) 40 Total exempt purpose expenditures (and lines 36 and 39) 40 Total exempt purpose expenditures (and lines 36 and 39) 40 Total exempt purpose expenditures (and lines 36 and 39) 40 Total exempt purpose expenditures (and lines 36 and 39) 40 Total exempt purpose expenditures (and lines 36 and 39) 40 Total exempt purpose expenditures (and lines 36 and 39) 40 Total exempt purpose expenditures (and lines 36 and 39) 40 Total exempt purpose expenditures (and lines 36 and 39) 41 Total lobbying nontrates and an analysis of the excess over \$500,000 Civer \$1,000 000 42 Carastroots nontrateable amount form the following lable— 43 Subtract line 42 from line 38 Enter 4-0 fline 42 is more than line 36 44 Subtract line 42 from line 38 Enter 4-0 fline 42 is more than line 36 45 Subtract line 42 from line 38 Enter 4-0 fline 41 is more than line 38 46 Caution. If there is an amount on either line 43 or time 44, you must fills Form 4720 47 Year Averaging Period Under Section 501) (lines 45 through 50 or page 11 of the instructions 501(h) (Some organizations that make a section 501) (leiction of not have to complete all of the five columns below See the matructions for lines 45 through 50 or page 11 of the instructions 501(h) (Some organization stempt to milenome organization attempt to milenome public opinion organization atte									ol" provisions app	ŀv
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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 instr.) 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 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 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.)	47 Total lobbying expenditures									
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Volunteers Paid staff or management (include compensation in expenses reported on lines c through h) Media advertisements Mailings to members, legislators or the public Publications, or published or broadcast statements Grants to other organizations for lobbying purposes Direct contact with legislators, their staffs, government officials, or a legislative body Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means Total lobbying expenditures (add lines c through h.)			-	-	ııy		Yes	No	Amount	
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.)		Idii4¢ IIIditei Oi Telefelii	din, anough the use	UI .				\vdash		
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.)		nnensation in eynenses	reported on lines c t	hrough h						
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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.)	-	-								
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.)	•									
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means i Total lobbying expenditures (add lines c through h.)	-		s, or a legislative bod	v						
i Total lobbying expenditures (add lines c through h.)	_	_								
· · · · · · · · · · · · · · · · · · ·		•								
		* ·	detailed description o	f the lobbying	activiti	es				

Schedule A (Form 990 or 990-EZ) 2002

	orm 990 or 990-EZ) 2002		N C. CAMPBELL FO					P	age 6
Part VII			ansfers To and Transaction in the contraction in th		ionships V	Vith Noncharitab	əle		
51 Did the			tly engage in any of the following		anızatıon des	cribed in section			
) organizations) or in section 527						
a Transfer	rs from the reporting organ	ization to a n	ioncharitable exempt organization	ı of				Yes	No
• • • • • • • • • • • • • • • • • • • •	ash						51a(ı)	ļ.,	X
• • •	ther assets						a(11)	 	X
b Other tra			-ht-t				1		
	ales or exchanges of asset urchases of assets from a		chantable exempt organization				b(i)	 	X
	ental of facilities, equipmen		. •				<u>b(н)</u>	+	X
	eimbursement arrangemer		13013				b(III) b(IV)		X
	oans or loan guarantees						b(v)		X
	erformance of services or r	nembership	or fundraising solicitations				b(vi)		×
			ner assets or paid employees				c		х
d If the an	swer to any of the above is	"Yes," comp	plete the following schedule. Colu	mn (b) should alw:	ays show the	fair market value of th	ie		
		-	porting organization. If the organi						
transact	ion or sharing arrangemen	t, show in co	lumn (d) the value of the goods, o	ther assets, or se	vices receive	<u>d</u>			
(a)	(b)		(c)			(d)			
Line no	Amount involved	Name o	of nonchantable exempt organization	Descrip	tion of transfers	transactions and shann	ig arrangem	ents	
N/A		 	···						
- 				 					
_		-			·				
-		_		_		·			
			· · · · · · · · · · · · · · · · · · ·			<u> </u>			
		-							
									
						-			
		 							
				 					
describe		ode (other th	with, or related to, one or more to han section 501(c)(3)) or in section (b)		ations	•		es 🔀	No
	Name of organization		Type of organization		Desc	(c) cription of relationship			
N/A	<u>-</u>								
							_		
	·								
						··			
		_ -							
			<u> </u>						
				+					
									
	·			+					
						<u> </u>			
									

JOHN C. CAMPBELL FOLK SCHOOL, INC.

56-0552780

_

000	S	pecial Events So	chedule		-
Form 990 For calend	ar year 2002, or tax year	beginging	, and endi	na	2002
ame	<u>an 1001 2002, 07 tan 1001</u>	<u> </u>	, and char		dentification Number
JOHN C. CAMPBELL	FOLK SCHOOL,	INC.		56-05	52780
	(A)	(B)	(C)	Others	Total
Gross receipts	44,653	20,416	0	0	65,069
Less contributions	0	0	0	0	0
Gross revenue	44,653	20,416	0	0	65,069
Less direct expenses	12,079	0	0	0	12,079
Net income (loss)	32,574	20,416	0	0	52,990
Descriptions					
A) <u>FALL FES</u>	TIVAL				
B) <u>CRAFT AU</u>	CTION				
C)					
Others					
<u> </u>					

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions

Attach to your tax return

OMB No 1545-0172 2002

Attachment Sequence No 67

Department of the Treasury Internal Revenue Service Name(s) shown on return

JOHN C. CAMPBELL FOLK SCHOOL, INC.

Identifying number 56-0552780

	ess or activity to which this for										
	ndirect Depre			gible Property I	Under S	ection 1					
			-	rty, complete P				plete Pa	art I		
1	Maximum amount See p									1	24,000
2	Total cost of section 179	property pla	aced in service (sei	e page 2 of the instr	uctions)					2	
3	Threshold cost of section	n 179 prope	rty before reduction	n in limitation						3	200,000
4	Reduction in limitation S	Subtract line	3 from line 2 If zer	o or less, enter -0-						4	
5	Dollar limitation for tax year	Subtract line	4 from line 1 If zero o	r less enter -0- If man	ned filing se	parately see	pg 2 o	f the instr		5	
_	(a)	Description	of property		(b) Cost	(business us	e only)	(c)	Elected cos	<u> </u>	
6	·										į
_							r				
7	Listed property Enter the						7			· -	
8 9	Total elected cost of sec	· -	•	, ,.	s 6 and 7					8	
9 10	Tentative deduction Enter Carryover of disallowed									9	<u> </u>
11	Business income limitation		-		than zora)	or line E (e		~.at.a~a\		10	
12	Section 179 expense de						iee aisi	ructions)		11	
13	Carryover of disallowed					` `	13			12	·
	Do not use Part II or Par			 _							
				nd Other Depre	eciation	(Do not	ınclu	de liste	d proper	lv)	•
14	Special depreciation allowan									14	
15	Property subject to section	-			_	,			,	15	
16	Other depreciation (inclu	ding ACRS)	(see page 4 of the	instructions)						16	121,047
Pa				ude listed prope	erty) (Se	ee page	4 of t	he instr	uctions)		
			- · <u>-</u>	Secti	ion A						
17	MACRS deductions for a	issets place	d in service in tax y	ears beginning befo	re 2002				•	17	25,554
18	If you are electing under	section 168	(i)(4) to group any	assets placed in ser	vice dunn	g the tax			_		
	year into one or more ge	neral asset	accounts, check he	ere					▶		
	Se-	ction B-Ass	sets Placed in Ser	vice During 2002 T	ax Year U	sing the G	enera	Depreci	ation Syste	em	, -
	(a) Classification of propert	ty	(b) Month and year placed in service	(c) Basis for depre- (business/investme only-see instruct	ent use 📄	d) Recovery period	(e) Co	nvention	(f) Metho	od	(g) Depreciation deduction
<u>19a</u>	3-year property			<u> </u>					<u> </u>		
<u> </u>	5-year property						 				
	7-year property										<u> </u>
d	10-year property										
<u>e</u>	_15-year property										
<u> </u>	20-year property			} —							-
<u>g</u>	25-year property	+		 		25 yrs			S/L		
п	Residential rental	+	<u></u>			27 5 yrs		MM	S/L		
	property Nonresidential real					27 5 yrs		MM MM	S/L		
•	property	F		 	+	39 yrs		MM	S/L S/L		<u> </u>
	• • • • • • • • • • • • • • • • • • • •	ion C-Asse	ts Placed in Service	ce Dunng 2002 Tax	r Yoar He	na tha Alti				tom	
 20a	Class life	1011 O-A336	CS T INCOUNT OF THE	Co Duning 2002 Tax	k real Osi	ing the Ait	or iiau	e Debiec	S/L	tem.	
	12-year					12 yrs			S/L		
	40-year		•	1 -		40 yrs		MM	S/L		
		see page	e 6 of the instru	ictions)					, 5,2		<u>. </u>
21	Listed property Enter an									21	
22	Total Add amounts from			nes 19 and 20 in col	lumn (a), a	nd line 21				:-	
	Enter here and on the ap									22	146,601
23	For assets shown above				-	1					
	enter the portion of the ba		-	•			23		<u></u>		
D	Sanamuadi Badasita - Aai	4 Bl-41									4500

Form 4562 (2002)

Part V

(a)

Type of prop

(list vehicles

first)

JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780

Special depreciation allowance for qualified listed property placed in service during the tax

Do you have evidence to support the business/investment use claimed?

(b)

Date placed in

service

(c)

Business/

investment

percentage

24a, 24b, columns (a) through (c) of Section A all of Section B, and Section C if applicable.

Section A-Depreciation and Other Information (Caution See page 8 of the instructions for limits for passenger automobiles)

(d)

Cost or other

basis

	year and used more than 50% in a qualified	i pasiriess us	<u>e (see h</u>	age o	UIC RISH	00000			2	<u> </u>					
26	Property used more than 50% in a qualified	business us	e (see p	age 7 of	the instr	uctions)									
	9	4													
				ļ			ļ	ļ							
	9	4		_!			l			<u> </u>			i		
27	Property used 50% or less in a qualified bu	siness use (s T	ee page	7 of the	instructi	ons)	1			 _			1		
													1		
		4					 	S/I		+-		· · · · · ·	ł		
		_						S/I	1_						
28	Add amounts in column (h), lines 25 throug	h 27 Enter h	ore and	on line 2	1 0200	1	<u> </u>	3/1	2	-	-		1		
29	Add amounts in column (i), line 26 Enter he				i, page	•			<u>. 4</u>	<u> </u>		29	 		
<u></u>	And amounts in colonia (i), into 20 Enter in				ion on l	lee of V	hicles					1 23			
Соп	nplete this section for vehicles used by a sole							elated n	erson						
	u provided vehicles to your employees first answer the							-		for those	vehicles				
30	Total business/investment miles driven duri			3)		b)		c)		d)	, 	9)	(f)		
	the year (do not include commuting miles-		cle 1	· ·	cle 2		cle 3	1	icle 4	1	Vehicle 5		de 6		
	see page 2 of the instructions)														
31	Total commuting miles driven during the ye	ar]						
32	Total other personal (noncommuting) miles driven										}				
33	Total miles driven during the year								1		1				
	Add lines 30 through 32				ļ						<u> </u>				
34	Was the vehicle available for personal		Yes_	_No_	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
	use during off-duty hours?					-			-	ļ					
35	Was the vehicle used primarily by a												•		
	more than 5% owner or related person?				 				 	<u> </u>	<u> </u>		!		
36	Is another vehicle available for personal use?		L		ł	<u> </u>	<u> </u>		<u> </u>	<u></u>		<u>!</u>			
A 0.00	Section C-Que														
	wer these questions to determine if you meet not more than 5% owners or related persons			_		or venic	ies usea	by emp	ioyees w	по					
are i	not more than 5% owners of related persons	(see page o	or the ins	struction	5)								Yes	No	
37	Do you maintain a written coliny statement that our	shibite all perco	ool use of	vehicles	indudina	~~mmutu	a buvon	r employe	?				183	No	
37 Do you maintain a written policy statement that prohibits all personal use of vehicles including commuting by your employees?															
		hat prohibite	nersona	luse of						0vees2					
38	Do you maintain a written policy statement				vehicles	except	commuti	ng by y		oyees?					
38	Do you maintain a written policy statement to See page 8 of the instructions for vehicles up	ised by corpo	rate offi		vehicles	except	commuti	ng by y		oyees?					
	Do you maintain a written policy statement of See page 8 of the instructions for vehicles to Do you treat all use of vehicles by employed	ised by corpo es as persona	rate official use?	cers dire	vehicles ectors, o	except r 1% or i	commuti nore own	ng by y ners		oyees?					
38 39	Do you maintain a written policy statement to See page 8 of the instructions for vehicles up	ised by corpo es as persona our employee	rate official use? es, obtain	cers dire	vehicles ectors, o	except r 1% or i	commuti nore own	ng by y ners		oyees?					
38 39	Do you maintain a written policy statement in See page 8 of the instructions for vehicles to Do you treat all use of vehicles by employed Do you provide more than five vehicles to you	ised by corpo es as persona our employee nation receive	orate office al use? es, obtained?	cers dire	vehicles ectors, o	except r 1% or i n your e	commuti nore owi	ng by yo ners s about	our empl						
38 39 40	Do you maintain a written policy statement in See page 8 of the instructions for vehicles it. Do you treat all use of vehicles by employed Do you provide more than five vehicles to you the use of the vehicles, and retain the information.	ised by corpo es as persona our employee nation receive qualified autor	orate official use? es, obtained? mobile d	cers dire	vehicles ectors, o ation from ation use	except r 1% or i n your e	commuti more own mployee: page 9 o	ng by yoners s about I the insi	our empl						
38 39 40 41	Do you maintain a written policy statement of See page 8 of the instructions for vehicles to Do you treat all use of vehicles by employed Do you provide more than five vehicles to you the use of the vehicles, and retain the inform Do you meet the requirements concerning to	ised by corpo es as persona our employee nation receive qualified autor	orate official use? es, obtained? mobile d	cers dire	vehicles ectors, o ation from ation use	except r 1% or i n your e	commuti more own mployee: page 9 o	ng by yoners s about I the insi	our empl						
38 39 40 41	Do you maintain a written policy statement if See page 8 of the instructions for vehicles to Do you treat all use of vehicles by employed Do you provide more than five vehicles to you the use of the vehicles, and retain the inform Do you meet the requirements concerning of Note If your answer to 37, 38, 39, 40, or 41	ised by corpores as personal our employee nation received qualified autoral is "Yes," do	orate official use? es, obtained? mobile dinot com	cers dire	vehicles ectors, o ation from ation use ction B for	except r 1% or r n your e e? (See or the co	commuti more own mployee: page 9 o	ng by yoners s about the insi	our empl) (e)			(6)		
38 39 40 41	Do you maintain a written policy statement is See page 8 of the instructions for vehicles to Do you treat all use of vehicles by employed Do you provide more than five vehicles to you the use of the vehicles, and retain the inform Do you meet the requirements concerning to Note If your answer to 37, 38, 39, 40, or 41 art VI Amortization	ised by corpo es as persona our employee nation receive qualified autor	orate official use? es, obtained? mobile d	cers dire	vehicles ectors, or ation from ation use ction B fe	except r 1% or i n your e	commuti more own mployee: page 9 o	ng by yoners s about I the insi	tructions) (e) Amortiza	tion	Ame	(f) prizabon fi		
38 39 40 41 Pa	Do you maintain a written policy statement is See page 8 of the instructions for vehicles it. Do you treat all use of vehicles by employed Do you provide more than five vehicles to you the use of the vehicles, and retain the inform Do you meet the requirements concerning on Note If your answer to 37, 38, 39, 40, or 41 art VI Amortization (a) Description of costs	used by corpores as personal our employee mation receive qualified autoin is "Yes," do (b) Date amore begin	orate official use? es, obtained? mobile d not com	emonstr	vehicles ectors, o ation fron ation use ction B fi	except r 1% or i n your e e? (See or the co (c) ruzable nount	commuti more own mployee: page 9 o	ng by yoners s about the instablictes	tructions) (e)	tion or			or	
38 39 40 41	Do you maintain a written policy statement is See page 8 of the instructions for vehicles to Do you treat all use of vehicles by employed Do you provide more than five vehicles to you the use of the vehicles, and retain the inform Do you meet the requirements concerning to Note If your answer to 37, 38, 39, 40, or 41 art VI Amortization	used by corpores as personal our employee mation receive qualified autoin is "Yes," do (b) Date amore begin	orate official use? es, obtained? mobile d not com	emonstr	vehicles ectors, o ation fron ation use ction B fi	except r 1% or i n your e e? (See or the co (c) ruzable nount	commuti more own mployee: page 9 o	ng by yoners s about the insi- hicles (d)	tructions	(e) Amortiza penod	tion or		rtization f	or .	
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Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

Note For any vehicle for which you are using the standard mileage rate or deducting lease expense complete only

Yes

(e)

Basis for depreciation

(business/investment

use only)

No 24b If "Yes," is the evidence written?

(g)

Convention

Method/

(f)

Recovery

period

Page 2

No

(i)

Elected

section 179

cost

Yes

(h)

Depreciation

deduction

1039 JOHN C CAMPBELL FOLK SCHOOL, INC 56-0552780 Federal Statements

FYE 12/31/2002

5/9/2003 12 02 PM

Statement 2 - Form 990, Line 10c - Sales of Inventory

Description	Gross Sales	cogs	Gross Profit			
CRAFT SHOP & DINING HALL	\$ 567,728	\$ 533,446	\$ 34,282			
Total	\$ <u>567,728</u>	\$ 533,446	\$ 34,282			

1039 JOHN C CAMPBELL FOLK SCHOOL, INC 56-0552780 Federal S

Federal Statements

FYE 12/31/2002

Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	<u></u>	\$	\$	\$
Expenses				
BANK CHARGES	961		961	
CREDIT CARD FEES	32,507		32,507	
HOST SUBSIDY	4,269		4,269	
INSTRUCTION	326,801	326,801	-	
INSURANCE	78,292	•	78,292	
INVESTMENT EXPENSES	8,233		8,233	
TAXES & LICENSES	871		871	
MISCELLANEOUS	389		389	
STUDENT TRANSPORTATION	11,915	11,915		
EMPLOYEE DEVELOPMENT	7,653	-	7,653	
AUTO EXPENSES	8,306		8,306	
OUTSIDE MAINTANENCE	740		740	
CONTRACT LABOR	9,100	9,100		
Total	\$ 490,037	\$ 347,816	\$ 142,221	\$ 0

Statement 4 - Form 990, Part III - Organization's Primary Exempt Purpose

THE JOHN C. CAMPBELL FOLK SCHOOL, INC. STRIVES TO ENCOURAGE INDIVIDUAL TALENT AND COMMUNITY LIFE THROUGH THE DEVELOPMENT OF CREATIVE EXPRESSION AND LEARNING BY DOING. ROOTED AS IT IS IN THE HISTORY AND CULTURE OF THE REGION, THE FOLK SCHOOL FOSTERS KNOWLEDGE AND APPRECIATION OF NATURE, MUSIC, DANCE, FOLKLORE, TRADITIONAL AND CONTEMPORARY CRAFTS THROUGH EDUCATION, MARKETING, RESEARCH, ARCHIVING, COMMUNITY SERVICE AND PUBLIC PROGRAMMING.

1039 JOHN C CAMPBELL FOLK SCHOOL, INC 56-0552780 Federal Statements

56-0552780 FYE 12/31/2002 5/9/2003 12 02 PM

Statement 5 - Form 990, Part IV, Line 56 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation
UNITED STATES TRUST COMPANY OF N.Y.	\$ 1,723,571	\$ 1,895,634	
Total	\$ 1,723,571	\$ 1,895,634	

Statement 6 - Form 990, Part IV, Line 58 - Other Assets

Description	E	Beginning of Year	 End of Year				
CONSTRUCTION IN PROGRESS UTILITY DEPOSIT MUSEUM COLLECTION EXHIBITS	\$	16,837 50 8,175	\$ 36,284 250 8,175				
Total	\$	25,062	\$ 44,709				

1039 JOHN C CAMPBELL FOLK SCHOOL, INC 56-0552780 Federal Statements

56-0552780 FYE 12/31/2002 5/9/2003 12 02 PM

Statement 7 - Form 990, Part IV-A - Other Revenue Included in Financial Statements

Description	Amount
UNREALIZED LOSSES ON INVESTMENTS	\$135,498
Total	\$

1039 JOHN C CAMPBELL FOLK SCHOOL, INC 56-0552780 FYE 12/31/2002

Federal Statements

Statement 8 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

	City, State, Zip	BRASSTOWN, NC 28902	2	7 0 7	LAKE TOXAWAY, NC 28747	ASHEVILLE, NC 28803	KNOXVILLE, TN 37919	HAYESVILLE, NC 28904	E	2	BRASSTOWN, NC 28902	MURPHY, NC 28906		MURPHY, NC 28906	BRASSTOWN, NC 28902	HAYESVILLE, NC 28904	HIDMASSER OF AN 30546	5	MURPHY, NC 28906	MIRPHY NO 28906) :	DENVER, CO 80202-1639	ATLANTA, GA 30324
Average Title Hours	Address	V. PRESIDENT AS NEEDED 618 DOG BRANCH ROAD	SECRETARY AS NEEDED		P.O. BOX 286 DIRECTOR AS NEEDED	IVE	KEE E	DIRECTOR AS NEEDED 136 BRIGADOON DRIVE	DIRECTOR AS NEEDED	DIRECTOR AS NEEDED	ი ი	DIRECTOR AS NEEDED P.O. BOX 556	TREASUR	F.O. BOX 9 CEO 40	BOX 157	BUS MANAGEK 40 695 CHATUGE VILLAGE	DIRECTOR AS NEEDED	ECTOR	STREET	DIRECTOR AS NEEDED P.O. BOX 136	DIRECTOR	1551 LARIMER STREET APT #2802 PIDECTOD AS NEEDED	TREE
	Expenses	0			0	0	0	0			0	0 0		5	0	0			0	0		0	0 0
Name	Benefits	0	c		0	0	0	0	0		0	0		-	.8 5,209	C .	0		0	0			
	Comp	BOB GROVE	NANCY TROXLER	TONY AUSTIN	MIMI CECIL	DATE TITES		۵	JILL RUANE	TIM RYAN	NO HERM		ANN H TAAFFEE	JAN A DAVIDSON	74, 198	. iñ	JACK SHULTZ	WILLIAM BLOCK		DAVID HILTON	CHARLES JACKSON	O RELEN SCHNERERER	

1039 JOHN C CAMPBELL FOLK SCHOOL, INC 56-0552780 Federal S

Federal Statements

FYE 12/31/2002

5/9/2003 12 02 PM

Schedule A, Part V, Line 31 - Publication of Nondiscriminatory Policy

THE RACIALLY NONDISCRIMINATORY POLICY FOR JOHN C. CAMPBELL FOLK SCHOOL, INC. IS PUBLICIZED ANNUALLY IN THE COURSE CATLOG.

Statement 9 - Schedule A, Part V, Line 32d - Records Maintenance Explanation

ALL STUDENTS ARE ACCEPTED ON A FIRST COME FIRST SERVE BASIS. CLASSES LAST A WEEK OR TWO AND INSTRUCTORS ARE HIRED ON A TEMPORARY BASIS.