

Return of Organization Exempt from Income Tax

2002

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

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 1/01, 2002, and ending 6/30, 2002

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

College Station ISD Education Foundation Inc, 1812 Welsh Avenue, College Station, TX 77840-4800

D Employer identification number 74-2909634, E Telephone number (979) 764-5455, F Accounting method Cash [X] Accrual

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

- H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? No [X]. H(b) If Yes enter number of affiliates. H(c) Are all affiliates included? No [X]. H(d) Is this a separate return filed by an organization covered by a group ruling? No [X].

G Web site N/A

J Organization type (check only one) [X] 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.

I Enter 4 digit GEN. M Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 54,451

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See instructions)

Table with 21 rows and multiple columns for revenue and expenses. Includes a 'RECEIVED' stamp from Ogden, UT dated NOV 18 2003.

SCANNED DEC 03 2003

Handwritten number 913-17

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

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 (att sch) See Stmt 3 (cash \$ 46,596 non cash \$)	22 46,596	46,596		
23 Specific assistance to individuals (att sch)	23			
24 Benefits paid to or for members (att sch)	24			
25 Compensation of officers, directors, etc	25			
26 Other salaries and wages	26			
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31 690		690	
32 Legal fees	32			
33 Supplies	33			
34 Telephone	34			
35 Postage and shipping	35 118		118	
36 Occupancy	36			
37 Equipment rental and maintenance	37			
38 Printing and publications	38 120		120	
39 Travel	39			
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42			
43 Other expenses not covered above (itemize)				
a See Statement 4	43a 4,471	1,661	2,810	
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 - 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44 51,995	48,257	3,738	0

Joint Costs Check if you are following SOP 98 2

Are 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

What is the organization's primary exempt purpose? See Statement 5
 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) & (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others)

Program Service Expenses
 (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts but optional for others)

a EDUCATIONAL AND CHARITABLE CONTRIBUTIONS			
(Grants and allocations \$)			48,257
b			
(Grants and allocations \$)			
c			
(Grants and allocations \$)			
d			
(Grants and allocations \$)			
e Other program services			
(Grants and allocations \$)			
f Total of Program Service Expenses (should equal line 44 column (B), program services)			48,257

Part IV Balance Sheets (See 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	
ASSETS	45 Cash – non interest bearing	212,410	45	235,810	
	46 Savings and temporary cash investments		46		
	47a Accounts receivable	47a 3,160			
	b Less allowance for doubtful accounts	47b	47c	3,160	
	48a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b	48c		
	49 Grants receivable		49		
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50		
	51a Other notes & loans receivable (attach sch)	51a			
	b Less allowance for doubtful accounts	51b	51c		
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges		53		
	54 Investments – securities (attach schedule)	<input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	63,482	54	63,395
	55a Investments – land, buildings, & equipment basis	55a			
	b Less accumulated depreciation (attach schedule)	55b		55c	
	56 Investments – other (attach schedule)			56	
	57a Land, buildings, and equipment basis	57a			
	b Less accumulated depreciation (attach schedule)	57b		57c	
	58 Other assets (describe ▶ _____)			58	
59 Total assets (add lines 45 through 58) (must equal line 74)		275,892	59	302,365	
LIABILITIES	60 Accounts payable and accrued expenses		60	2,580	
	61 Grants payable		61	24,596	
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a Tax exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule)		64b		
	65 Other liabilities (describe ▶ <u>See Statement 6</u>)			65	22,000
66 Total liabilities (add lines 60 through 65)		0	66	49,176	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	275,892	67	232,018	
	68 Temporarily restricted		68		
	69 Permanently restricted		69	21,171	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and 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 fund		71		
	72 Retained earnings, endowment accumulated income, or other funds		72		
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	275,892	73	253,189	
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	275,892	74	302,365	

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.

BAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions)

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

a	Total revenue, gains, and other support per audited financial statements	a	60,109
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$ 5,658		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify)		
	See Stmt 7 \$ 7,011		
	Add amounts on lines (1) through (4)	b	12,669
c	Line a minus line b	c	47,440
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify)		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	47,440

a	Total expenses and losses per audited financial statements	a	64,664
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities \$ 5,658		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify)		
	See Stmt 8 \$ 7,011		
	Add amounts on lines (1) through (4)	b	12,669
c	Line a minus line b	c	51,995
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify)		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	51,995

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
See Statement 9		0	0	0

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

Part VI Other Information (See 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? If 'Yes,' attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
78b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	78b	N/A	
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
81a	Enter direct or indirect political expenditures See line 81 instructions	81a	0	
81b	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 or at substantially less than fair rental value?	82a	X	
82b	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)	82b	5,658	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
83b	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		X
84b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85a	501(c)(4), (5), or (6) organizations Were substantially all dues nondeductible by members?	85a	N/A	
85b	Did the organization make only in house lobbying expenditures of \$2,000 or less?	85b	N/A	
	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			
85c	Dues, assessments, and similar amounts from members	85c	N/A	
85d	Section 162(e) lobbying and political expenditures	85d	N/A	
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A	
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A	
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
85h	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	N/A	
86a	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	N/A	
86b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A	
87a	501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A	
87b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A	
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		X
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	89a		
89b	501(c)(3) and 501(c)(4) organizations 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		X
90a	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0
90b	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 ▶ None	90a		
90b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b		0
91	The books are in care of ▶ Chris Billings Telephone number ▶ Located at ▶ C/o CSISD, 1812 Welsh, College Station, ZIP + 4 ▶ 77840-4800	91		
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	N/A	<input type="checkbox"/>

Part VII Analysis of Income Producing Activities (See instructions)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities			14	176	
97 Net rental income or (loss) from real estate					
a debt financed property					
b not debt financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			1	29,479	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				29,655	
105 Total (add line 104, columns (B), (D), and (E))					29,655

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions)

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

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions)

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

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

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

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Date 11/13/03

GR

Date _____ Check if _____ Preparer's SSN or PTIN (see General Instruction W) _____

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under
Section 501(c)(3)

OMB No 1545-0047

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

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 **College Station ISD Education Foundation**
Inc

Employer identification number
74-2909634

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See 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 and 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 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 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 ▶ \$ <u> N/A </u> (Must equal amounts on line 38, Part VI A, or line I 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	1	X
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?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3 Does 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	X
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 instructions)								
The organization is not a private foundation because it is (Please check only ONE applicable box)								
5 <input type="checkbox"/> A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)								
6 <input type="checkbox"/> A school Section 170(b)(1)(A)(ii) (Also complete Part V)								
7 <input type="checkbox"/> A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)								
8 <input type="checkbox"/> A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)								
9 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV A)								
12 <input type="checkbox"/> 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 <input type="checkbox"/> 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 instructions)								
<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%; border-bottom: none;">(a) Name(s) of supported organization(s)</th> <th style="width:20%; border-bottom: none;">(b) Line number from above</th> </tr> </thead> <tbody> <tr> <td style="border-bottom: none;"> </td> <td style="border-bottom: none;"> </td> </tr> <tr> <td style="border-bottom: none;"> </td> <td style="border-bottom: none;"> </td> </tr> <tr> <td style="border-bottom: none;"> </td> <td style="border-bottom: none;"> </td> </tr> </tbody> </table>	(a) Name(s) of supported organization(s)	(b) Line number from above						
(a) Name(s) of supported organization(s)	(b) Line number from above							
14 <input type="checkbox"/> An organization organized and operated to test for public safety Section 509(a)(4) (See 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)	176,265	154,796	79,789		410,850
16 Membership fees received					
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					
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	6,537				6,537
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit 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					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	182,802	154,796	79,789		417,387
24 Line 23 minus line 17	182,802	154,796	79,789		417,387
25 Enter 1% of line 23	1,828	1,548	798		

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

26a	8,348
26b	
26c	417,387
26d	6,537
26e	410,850
26f	98.43 %

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

c Total support for section 509(a)(1) test Enter line 24 column (e)

d Add Amounts from column (e) for lines 18 6,537 19 _____ 22 _____ 26b _____

e Public support (line 26c minus line 26d total)

f Public support percentage (line 26e (numerator) divided by line 26c (denominator))

27 Organizations described on line 12 N/A

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) _____ (2000) _____ (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

(2001) _____ (2000) _____ (1999) _____ (1998) _____

c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____

d Add Line 27a total _____ and line 27b total _____

e Public support (line 27c total minus line 27d total)

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) 27f

g Public support percentage (line 27e (numerator) divided by line 27f (denominator))

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

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 instructions)
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument or in a resolution of its governing body?		
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 4.01 through 4.05 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 instructions)
 (To be completed ONLY by an eligible organization that filed Form 5768)

N/A

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

(The term 'expenditures' means amounts paid or incurred)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
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 -		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
The lobbying nontaxable amount is -		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000	41	
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
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)

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 non taxable 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 instructions)

N/A

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

- 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)

Yes	No	Amount

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

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Statement 1
Form 990, Part I, Line 9
Net Income (Loss) from Special Events

<u>Special Events</u>	<u>Gross Receipts</u>	<u>Less Contributions</u>	<u>Gross Revenue</u>	<u>Less Direct Expenses</u>	<u>Net Income (Loss)</u>
NO-GOLF GOLF	36,490	0	36,490	7,011	29,479
WALK OUR WALK-TALK OUR TALK	0	0	0	0	0
STAR PROJECT	0	0	0	0	0
Total	<u>\$ 36,490</u>	<u>\$ 0</u>	<u>\$ 36,490</u>	<u>\$ 7,011</u>	<u>\$ 29,479</u>

Statement 2
Form 990, Part I, Line 20
Other Changes in Net Assets or Fund Balances

AUDIT ADJUSTMENT					\$ -18,148
				Total	<u>\$ -18,148</u>

Statement 3
Form 990, Part II, Line 22
Grants and Allocations

Cash Grants and Allocations

Donee's Name	SCHOLARSHIPS				
Amount Given				\$	27,000
Donee's Name	GRANTS TO TEACHERS				
Amount Given					19,596
				Total Grants and Allocations	<u>\$ 46,596</u>

Statement 4
Form 990, Part II, Line 43
Other Expenses

	(A) <u>Total</u>	(B) <u>Program Services</u>	(C) <u>Management & General</u>	(D) <u>Fundraising</u>
ACADEMIC RECOG EXP	1,413	1,413		
ADMINISTRATIVE EXP	1,434		1,434	
ALUMNI ASSOC EXP	248	248		
BANK CHARGES	310		310	
INSURANCE	965		965	
MISCELLANEOUS	101		101	
Total	<u>\$ 4,471</u>	<u>\$ 1,661</u>	<u>\$ 2,810</u>	<u>\$ 0</u>

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Statement 5
Form 990, Part III
Organization's Primary Exempt Purpose

SUPPORT EDUCATIONAL PROGRAMS IN THE COLLEGE STATION ISD

Statement 6
Form 990, Part IV, Line 65
Other Liabilities

Rounding
SCHOLARSHIPS PAYABLE

	\$	1
		22,000
Total	\$	<u>22,001</u>

Statement 7
Form 990, Part IV-A, Line b(4)
Other Amounts

FUNDRAISING EXPENSES

	\$	7,011
Total	\$	<u>7,011</u>

Statement 8
Form 990, Part IV-B, Line b(4)
Other Amounts

FUNDRAISING EXPENSES

	\$	7,011
Total	\$	<u>7,011</u>

Statement 9
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Gene Joyce 1812 Welsh Ave College Station, TX 77840	President None	\$ 0	\$ 0	\$ 0
Greg Katt 5010 Congressional Ct College Station, TX 77845	Vice President None	0	0	0
Janet Briaud 1812 Welsh Ave College Station, TX 77840	Treasurer None	0	0	0

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Statement 9 (continued)
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
Steve Johnson 1812 Welsh Ave College Station, TX 77840	Secretary None	\$ 0	\$ 0	\$ 0
Steve Aldrich 707 Honeysuckle College Station, TX 77845	None	0	0	0
P J Miller 2007 Quail Hollow Dr Bryan, TX 77802	None	0	0	0
Jimmy Holder 2002 Pebblestone Ct College Station, TX 77845	None	0	0	0
John Bernheim 1405 Earl Rudder FW S College Station, TX 77840	None	0	0	0
Lauri Brender 8703 Driftwood Dr College Station, TX 77845	None	0	0	0
Jerry Fox 1812 Welsh Ave College Station, TX 77840	None	0	0	0
Manuel Gonzalez P O Box 3929 Bryan, TX 77805	None	0	0	0
James Haverland 1812 Welsh Ave College Station, TX 77840	None	0	0	0
Tom Jackson 1812 Welsh Ave College Station, TX 77840	None	0	0	0
Tim Jones 1812 Welsh Ave College Station, TX 77840	None	0	0	0
Chris Kling 1812 Welsh Ave College Station, TX 77840	None	0	0	0

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Statement 9 (continued)
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>	
George Lea 1812 Welsh Ave College Station, TX 77840	None	\$ 0	\$ 0	\$ 0	
Ivan Olson 28075 Texas Ave Bryan, TX 77802	None	0	0	0	
Linda Parrish 1812 Welsh Ave College Station, TX 77840	None	0	0	0	
Britt Rice 1812 Welsh Ave College Station, TX 77840	None	0	0	0	
Wayne Rife 1812 Welsh Ave College Station, TX 77840	None	0	0	0	
David Rome1 2501 Texas Ave S, Ste 105 College Station, TX 77845	None	0	0	0	
Debe Shafer 1812 Welsh Ave College Station, TX 77840	None	0	0	0	
Robert Waltman 1812 Welsh Ave College Station, TX 77840	None	0	0	0	
Robert Wareing 1812 Welsh Ave College Station, TX 77840	None	0	0	0	
Mike Wright 1812 Welsh Ave College Station, TX 77840	None	0	0	0	
		Total \$	0	\$ 0	\$ 0

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Federal Supplemental Information

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FORM 990, SCHEDULE A, PART III
FYE 06/30/02

HOW AN ORGANIZATION QUALIFIES FOR GRANTS

TO APPLY FOR A GRANT, TEACHERS FOR THE COLLEGE STATION ISD ARE REQUIRED TO COMPLETE A GRANT APPLICATION AND BUDGET SHEET THAT IS EXTREMELY DETAILED A WORKSHOP IS HELD TO EXPLAIN THE APPLICATION AND TO ANSWER ALL QUESTIONS

THE APPLICATION COPIES ARE PROVIDED TO THE GRANT COMMITTEE IN A BLIND PROCESS TO PREVENT ANY BIAS THE APPLICATIONS ARE STUDIED AND SCRUTINIZED TO DETERMINE THE PROJECTS THAT WILL HELP THE MOST TO FURTHER THE EDUCATION OF THE STUDENTS, AS WELL AS THE OPTIMAL USE OF THE FUNDS AVAILABLE FOR GRANTS