

Return of Organization Exempt From Income Tax

2002

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning 2002, and ending 20

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

C Name of organization: **LYDIA DODY BREAST CANCER FOUNDATION**
 Number and street (or P O box if mail is not delivered to street address) Room/suite: **2627 REDWING ROAD STE 220**
 City or town state or country and ZIP + 4: **FORT COLLINS, CO 80526-**

D Employer identification number: **84 1595472**

E Telephone number: ()

F Accounting method: Cash Accrual
 Other (specify) ▶

G Web site ▶

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

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

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **137,312**

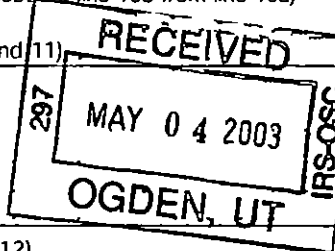
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶ --- ---
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4 digit GEN ▶

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

SCANNED BY 1 3 800

Revenue	1	Contributions, gifts, grants, and similar amounts received					
	a	Direct public support		1a			
	b	Indirect public support		1b			
	c	Government contributions (grants)		1c			
	d	Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)		1d			
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2			1,086
	3	Membership dues and assessments		3			
	4	Interest on savings and temporary cash investments		4			1,484
	5	Dividends and interest from securities		5			
	6a	Gross rents		6a			
b	Less rental expenses		6b				
c	Net rental income or (loss) (subtract line 6b from line 6a)		6c				
7	Other investment income (describe ▶ _____)		7				
8a	Gross amount from sales of assets other than inventory		(A) Securities		(B) Other		
	Less cost or other basis and sales expenses		8a				
	Gain or (loss) (attach schedule)		8b				
	Net gain or (loss) (combine line 8c columns (A) and (B))		8c				
8d			8d				
9	Special events and activities (attach schedule)						
	a	Gross revenue (not including \$ _____ of contributions reported on line 1a)		9a	134,177		
	b	Less direct expenses other than fundraising expenses		9b	21,803		
c	Net income or (loss) from special events (subtract line 9b from line 9a)		9c			112,374	
10a	Gross sales of inventory less returns and allowances		10a	565			
	b	Less cost of goods sold		10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c			565	
11	Other revenue (from Part VII, line 103)		11				
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12			115,509	
Expenses	13	Program services (from line 44, column (B))		13			17,275
	14	Management and general (from line 44, column (C))		14			11,306
	15	Fundraising (from line 44, column (D))		15			83,722
	16	Payments to affiliates (attach schedule)		16			
	17	Total expenses (add lines 16 and 44, column (A))		17			112,301
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)		18			3,208
	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19			81,108
	20	Other changes in net assets or fund balances (attach explanation)		20			
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21			84,316



G13

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.				
26	Other salaries and wages	21,487	6,446	4,297	10,744
27	Pension plan contributions				
28	Other employee benefits				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees	1,605		1,605	
32	Legal fees	929		929	
33	Supplies	2,849	973	487	1,389
34	Telephone	709	212	71	426
35	Postage and shipping	1,715	51	68	1,596
36	Occupancy	2,561	1,281	512	768
37	Equipment rental and maintenance				
38	Printing and publications				
39	Travel				
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)				
43	Other expenses not covered above (itemize): a _____				
	b _____				
	c See attached schedule _____	80,446	8,312	3,337	68,799
	d _____				
	e _____				
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	112,301	17,275	11,306	83,722

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 (See page 24 of the instructions.)

What is the organization's primary exempt purpose? ENHANCE AWARENESS OF BREAST CANCER	Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others.)
a ENHANCE COMMUNITY AWARENESS OF BREAST CANCER, TO PROVIDE EDUCATION TO THE COMMUNITY OF THE CAUSES AND METHODS OF PREVENTION OF BREAST CANCER (Grants and allocations \$ _____)	17,275
b _____ (Grants and allocations \$ _____)	
c _____ (Grants and allocations \$ _____)	
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	17,275

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

Note		(A)		(B)	
Where required attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year	
Assets	45	Cash—non-interest-bearing	73,227	45	5,257
	46	Savings and temporary cash investments		46	76,376
	47a	Accounts receivable	1,300		
	b	Less allowance for doubtful accounts		47c	1,300
	47b		7,000		
	48a	Pledges receivable			
	b	Less allowance for doubtful accounts		48c	
	48b				
	49	Grants receivable		49	
	50	Receivables from officers directors, trustees, and key employees (attach schedule)		50	
	51a	Other notes and loans receivable (attach schedule)			
	b	Less allowance for doubtful accounts		51c	
	51b				
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges		53	983
	54	Investments—securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55a	Investments—land buildings and equipment basis			
	b	Less accumulated depreciation (attach schedule)		55c	
	55b				
56	Investments—other (attach schedule)		56		
57a	Land buildings, and equipment basis				
b	Less accumulated depreciation (attach schedule)		57c		
57b					
58	Other assets (describe <input type="checkbox"/>)	881	58	400	
59	Total assets (add lines 45 through 58) (must equal line 74)	81,108	59	84,316	
Liabilities	60	Accounts payable and accrued expenses		60	
	61	Grants payable		61	
	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	
	64b				
65	Other liabilities (describe <input type="checkbox"/>)		65		
66	Total liabilities (add lines 60 through 65)		66		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted		67	
	68	Temporarily restricted		68	
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input checked="" 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	81,108	72	84,316
	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)	81,108	73	84,316
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)	81,108	74	84,316

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions)

a	Total revenue gains and other support per audited financial statements ▶	a
b	Amounts included on line a but not on line 12, Form 990	b
(1)	Net unrealized gains on investments \$ _____	
(2)	Donated services and use of facilities \$ _____	
(3)	Recoveries of prior year grants \$ _____	
(4)	Other (specify) \$ _____	
	Add amounts on lines (1) through (4) ▶	b
c	Line a minus line b ▶	c
d	Amounts included on line 12 Form 990 but not on line a	d
(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

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

a	Total expenses and losses per audited financial statements ▶	a
b	Amounts included on line a but not on line 17 Form 990	b
(1)	Donated services and use of facilities \$ _____	
(2)	Prior year adjustments reported on line 20 Form 990 \$ _____	
(3)	Losses reported on line 20, Form 990 \$ _____	
(4)	Other (specify) \$ _____	
	Add amounts on lines (1) through (4) ▶	b
c	Line a minus line b ▶	c
d	Amounts included on line 17, Form 990 but not on line a	d
(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

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated see page 26 of the 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 & deferred compensation	(E) Expense account and other allowances
LYDIA DODY FORT COLLINS, CO	BOARD MEMBER 2	0		
JIM DICKENSON FORT COLLINS, CO	BOARD MEMBER 2	0		
BEV DONNELLEY FORT COLLINS, CO	BOARD MEMBER 2	0		
DIANE DUNCAN FORT COLLINS, CO	BOARD MEMBER 2	0		
JILL RICKARDS BELLVUE, CO	BOARD MEMBER 2	0		
SUZANNE PULLEN FORT COLLINS, CO	BOARD MEMBER 2	0		
INA SZWEC FORT COLLINS, CO	BOARD MEMBER 2	0		
KATHY MASON FORT COLLINS, CO	EXECUTIVE DIRECTOR 2	0		
MICHELE BETHKE FORT COLLINS, CO	ACCOUNTING MANAGER 2	0		
ROSS ALEXANDER FORT COLLINS, CO	BOARD MEMBER 2	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 page 26 of the instructions

Part 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		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		X
78a	Did the organization have unrelated business gross income of \$1 000 or more during the year covered by this return?		X
78b	b If "Yes," has it filed a tax return on Form 990-T for this year?		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		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?		X
81a	b If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures. See line 81 instructions		
81b	b Did the organization file Form 1120-POL for this year?		
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
82b	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)		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		
85b	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
85c	c Dues, assessments, and similar amounts from members		
85d	d Section 162(e) lobbying and political expenditures		
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)		
85g	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
85h	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
86a	86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12		
86b	b Gross receipts, included on line 12 for public use of club facilities		
87a	87 501(c)(12) orgs Enter a Gross income from members or shareholders		
87b	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
88	88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		
89a	89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 _____, section 4912 _____, section 4955 _____		
89b	b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
	c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 _____		
	d Enter Amount of tax on line 89c above reimbursed by the organization _____		
90a	90a List the states with which a copy of this return is filed _____		
90b	b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)		2
91	91 The books are in care of THE FOUNDATION Telephone no (970) 226-6400 Located at 2627 REDWING RD, SUITE 220, FT COLLINS, CO ZIP + 4 80526		
92	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 _____		

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

	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	
Note Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a PROGRAMS AND SERVICES					1,086
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	1,484	
96 Dividends and interest from securities					
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 personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					112,374
102 Gross profit or (loss) from sales of inventory			01	565	
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D) and (E))				2,049	113,460
105 Total (add line 104, columns (B), (D) and (E))					115,509

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 page 32 of the 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)
93A	TO RAISE AWARENESS OF BREAST CANCER AND PROMOTE ORGANIZATION
101	SPECIAL FUNDRAISING EVENTS HELD TO GENERATE INCOME FOR THE FOUNDATION

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the 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
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the 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

Date 14/29/03

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

Supplementary Information—(See separate instructions)

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

LYDIA DODY BREAST CANCER FOUNDATION

Employer identification number

84 1595472

Part I

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 ▶				

Part II

Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

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

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

	Yes	No
1 During the year has the organization attempted to influence national, state, or local legislation including any attempt to influence public opinion on a legislative matter or referendum? If Yes enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI A or line 1 of Part VI B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking Yes, must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		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?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods services or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships fellowships student loans etc? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?		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 pages 3 through 5 of the instructions)

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

- 5** A church convention of churches or association of churches Section 170(b)(1)(A)(i)
- 6** A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8** A Federal state or local government or governmental unit Section 170(b)(1)(A)(v)
- 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV A)
- 12** An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees and gross receipts from activities related to its charitable, etc functions—subject to certain exceptions and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above or (2) section 501(c)(4) (5) or (6) if they meet the test of section 509(a)(2) (See section 509(a)(3))

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

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

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10 11 or 12) *Use cash method of accounting*

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

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts grants and contributions received (Do not include unusual grants See line 28)	147,134				147,134
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	47,757				47,757
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	165				165
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	195,056				195,056
24 Line 23 minus line 17	147,299				147,299
25 Enter 1% of line 23	1,951				
26 Organizations described on lines 10 or 11	<p>a Enter 2% of amount in column (e), line 24 ▶</p> <p>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 ▶</p> <p>c Total support for section 509(a)(1) test Enter line 24 column (e) ▶</p> <p>d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____ ▶</p> <p>e Public support (line 26c minus line 26d total) ▶</p> <p>f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶</p>				<p>26a</p> <p style="background-color: #cccccc;"></p> <p>26b</p> <p style="background-color: #cccccc;"></p> <p>26c</p> <p style="background-color: #cccccc;"></p> <p>26d</p> <p style="background-color: #cccccc;"></p> <p>26e</p> <p style="background-color: #cccccc;"></p> <p>26f %</p>
27 Organizations described on line 12	<p>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</p> <p>(2001) (2000) (1999) (1998)</p> <p>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</p> <p>(2001) (2000) (1999) (1998)</p> <p>c Add Amounts from column (e) for lines 15 <u>147,134</u> 16 _____ 17 <u>47,757</u> 20 _____ 21 _____ ▶</p> <p>d Add Line 27a total _____ and line 27b total _____ ▶</p> <p>e Public support (line 27c total minus line 27d total) ▶</p> <p>f Total support for section 509(a)(2) test Enter amount from line 23 column (e) ▶ 27f 195,056</p> <p>g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶</p> <p>h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶</p>				<p>27c 194,891</p> <p>27d</p> <p>27e 194,891</p> <p style="background-color: #cccccc;"></p> <p>27g 99.915409%</p> <p>27h 0.084591%</p>
28 Unusual Grants For an organization described in line 10 11 or 12 that received any unusual grants during 1998 through 2001 prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15					

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures catalogues and other written communications with the public dealing with student admissions, programs and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If Yes please describe if 'No' please explain (If you need more space attach a separate statement)		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues brochures, announcements and other written communications to the public dealing with student admissions programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered No to any of the above please explain (If you need more space, attach a separate statement)		
33 Does the organization discriminate by race in any way with respect to		
a Students rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities? If you answered Yes to any of the above, please explain (If you need more space attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered Yes to either 34a or b, please explain using an attached statement		
35 Does the organization certify that it has complied with the applicable requirements of sections 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 page 9 of the instructions)
(To be completed ONLY by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
(The term "expenditures" means amounts paid or incurred)															
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
37	Total lobbying expenditures to influence a legislative body (direct lobbying)														
38	Total lobbying expenditures (add lines 36 and 37)														
39	Other exempt purpose expenditures														
40	Total exempt purpose expenditures (add lines 38 and 39)														
41	Lobbying nontaxable amount Enter the amount from the following table—														
	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">If the amount on line 40 is—</td> <td style="width: 50%;">The lobbying nontaxable amount is—</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>	If the amount on line 40 is—	The lobbying nontaxable amount is—	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 40 is—	The lobbying nontaxable amount is—														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
42	Grassroots nontaxable amount (enter 25% of line 41)														
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	0	0												
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	0	0												

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 11 of the instructions)

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

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

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

- 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
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	

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

Form 990	Supplemental Schedule	For Tax Year 2002
Name LYDIA DODY BREAST CANCER FOUNDATION		Employer ID Number 84-1595472

Page 1, part I, line 10c

<u>Type of inventory</u>	<u>Gross sales</u>
	565
	<u>565</u>
Gross sales	
Less returns and allowances	
Net sales	<u>565</u>
Less cost of goods sold	
Total gross profit / loss	<u>\$ 565</u>

Page 2, part II, line 43

	<u>Total</u>	<u>Program Services</u>	<u>Management and general</u>	<u>Fundraising</u>
CONTRACT SERVICES	3,380	1 014	2,366	
INSURANCE	818	408	205	205
INTERNET	245	122	49	74
MEALS & ENTERTAINMENT	3,764	216	648	2,900
FLOWERS	3,000			3,000
GIFTS	684	92	61	533
ADVERTISING	60,087			60,087
BANK CHARGES	8		8	
BAD DEBT EXPENSE	2,000			2,000
CLIENT LEARNING PRODUCTS	66	66		
CLIENT WELCOME PACKAGE	73	73		
COMPLEMENTARY CARE SERVICES	4,685	4 685		
PROMOTIONAL MATERIALS	1,636	1 636		
	<u>\$ 80,446</u>	<u>\$ 8,312</u>	<u>\$ 3,337</u>	<u>\$ 68,799</u>

Page 3, Part IV, Line 58

Description	Amount
RENT - SECURITY DEPOSIT	400
PREPAID INSURANCE	
Total	<u>\$ 400</u>

Form 990	Supplemental Schedule	For Tax Year 2002
Name LYDIA DODY BREAST CANCER FOUNDATION		Employer ID Number 84-1595472

Page 1, part I, line 9

<u>Description</u>	<u>Revenue from event</u>	<u>Expenses related to event</u>	<u>Gain/Loss</u>
RACE FOR THE CURE	9,002	5,368	3,634
DINNER DANCE	18,870	8,217	10,653
AUCTIONS AND BOOTH RENTALS	19,607	8,218	11,389
FUNDRAISING	<u>86,698</u>		<u>86,698</u>
Total	<u>\$ 134,177</u>	<u>\$ 21,803</u>	<u>\$ 112,374</u>