

Return of Organization Exempt from Income Tax

2001

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 2001 calendar year, or tax year beginning 7/01, 2001, and ending 6/30, 20 02

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

WALDORF SCHOOL OF BEND DBA SAGEWOOD SCHOOL 63175 OB RILEY RD BEND, OR 97701

D Employer Identification Number 93-1217269 E Telephone number 541-330-8841 F Accounting method: X Cash Accrual Other (specify)

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

- H and I are not applicable to Section 527 organizations H(a) Is this a group return for affiliates? H(b) If 'yes,' enter number of affiliates H(c) Are all affiliates included? H(d) Is this a separate return filed by an organization covered by a group ruling?

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 group 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 12 398,539

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

Table with 21 rows and 4 columns (1a-1d, 2, 3, 4, 5, 6a-6c, 7, 8a-8c, 8d, 9a-9c, 10a-10c, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21). Includes a 'RECEIVED' stamp dated MAR 7 2004 and a 'OGDEN UT' stamp.

SCANNED MAR 16 2004

EXPENSES

ASSETS

26 P

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) (cash \$ _____ non-cash \$ _____)	22				
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	22,402.	17,922.	4,480.	
26	Other salaries and wages . . .	26	177,162.	143,863.	33,299.	
27	Pension plan contributions	27				
28	Other employee benefits . . .	28	8,174.		8,174.	
29	Payroll taxes	29	19,802.	16,080.	3,722.	
30	Professional fundraising fees	30				
31	Accounting fees . . .	31				
32	Legal fees	32				
33	Supplies	33	21,379.	21,379.		
34	Telephone . . .	34	2,692.		2,692.	
35	Postage and shipping . . .	35	388.		388.	
36	Occupancy . . .	36				
37	Equipment rental and maintenance . .	37	2,475.		2,475.	
38	Printing and publications . . .	38	308.		308.	
39	Travel	39				
40	Conferences, conventions, and meetings . .	40	2,500.	2,500.		
41	Interest	41	49,248.		49,248.	
42	Depreciation, depletion, etc (attach schedule)	42	15,231.	12,185.	3,046.	
43	Other expenses not covered above (itemize)					
a	SEE STATEMENT 1	43a	74,986.	65,347.	9,639.	
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	396,747.	279,276.	117,471.	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? <u>PRIVATE SCHOOL</u>	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a <u>PRIVATE SCHOOL FOLLOWING THE WALDORF EDUCATION CURRICULUM OPEN TO ALL INTEREST FAMILIES</u> (Grants and allocations \$ _____)	279,276.
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)	279,276.

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	23,746.	45	31,579.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable		47 a	
	b Less: allowance for doubtful accounts		47 b	47 c
	48 a Pledges receivable		48 a	
	b Less: allowance for doubtful accounts		48 b	48 c
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51 a Other notes & loans receivable (attach sch)		51 a	
	b Less: allowance for doubtful accounts		51 b	51 c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments – securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments – land, buildings, & equipment: basis		55 a	
	b Less: accumulated depreciation (attach schedule)		55 b	55 c
56 Investments – other (attach schedule)		56		
57 a Land, buildings, and equipment: basis	783,775.	57 a		
b Less: accumulated depreciation (attach schedule)	STATEMENT 2 26,359.	57 b	57 c	
58 Other assets (describe ► SEE STATEMENT 3)	307.	58	11,585.	
59 Total assets (add lines 45 through 58) (must equal line 74)	384,127.	59	800,580.	
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)	SEE STM 4	63	17,500.
	64 a Tax-exempt bond liabilities (attach schedule)		64 a	
	b Mortgages and other notes payable (attach schedule)	SEE STATEMENT 5	64 b	745,299.
65 Other liabilities (describe ► SEE STATEMENT 6)	34,877.	65	2,873.	
66 Total liabilities (add lines 60 through 65)	351,011.	66	765,672.	
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	33,116.	67	34,908.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	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 and column (B) must equal line 21)	33,116.	73	34,908.
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	384,127.	74	800,580.

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 VI Other Information (See specific 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
b	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
b	If 'Yes,' enter the name of the organization <u>N/A</u> 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.	81a	0.	
b	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
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.)	82b	N/A	
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		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A	
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.	85b	N/A	
c	Dues, assessments, and similar amounts from members	85c	N/A	
d	Section 162(e) lobbying and political expenditures	85d	N/A	
e	Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices	85e	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A	
g	Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?	85g	N/A	
h	If Section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 12	86a	N/A	
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A	
87	501(c)(12) organizations Enter: a Gross income from members or shareholders	87a	N/A	
b	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 <u>0.</u> ; Section 4912 <u>0.</u> ; Section 4955 <u>0.</u>			
b	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
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958.			0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90a	List the states with which a copy of this return is filed <u>NONE</u>			
b	Number of employees employed in the pay period that includes March 12, 2001 (see instructions)	90b	0	
91	The books are in care of <u>SCHOOL ADDRESS</u> Telephone number <u></u> Located at <u>SCHOOL ADDRESS</u> ZIP + 4 <u></u>			
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 TUITION					281,643.
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	611110	180.			
96 Dividends & 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 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					
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)).		180.			281,643.
105 Total (add line 104, columns (B), (D), and (E)).					281,823.

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).
93A	TUITION PAID DIRECTLY SUPPORTS THE TEACHERS SALARIES AND OTHER SCHOOL EXPENSES REQUIRED IN PROVIDING A WALDORF EDUCATION TO ANY INTERESTED FAMILIES.

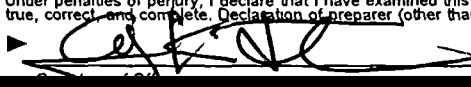
Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.)

(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)

Please sign:  Date: 3/2/04

PRESIDENT.

FEB 25 2004

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 Supplementary Information – (See separate instructions.)

2001

Department of the Treasury
Internal Revenue Service

Supplementary Information – (see separate instructions)

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

Name of the Organization **WALDORF SCHOOL OF BEND**
DBA SAGEWOOD SCHOOL Employer Identification Number
93-1217269

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 & 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.)		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes,' must complete Part VI-B and attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.) SEE STATEMENT 8		
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
SEE FORM 990, PART V		
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 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 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 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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total	
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	N/A					
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						
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						
24 Line 23 minus line 17						
25 Enter 1% of line 23						
26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24				N/A	
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.					26a	
c Total support for Section 509(a)(1) test: Enter line 24, column (e)					26c	
d Add: Amounts from column (e) for lines:	18	19			26d	
	22	26b			26e	
e Public support (line 26c minus line 26d total)					26e	
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %	
27 Organizations described on line 12:	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:	(2000)	(1999)	(1998)	(1997)		
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:	(2000)	(1999)	(1998)	(1997)		
c Add: Amounts from column (e) for lines:	15	16			27c	
	17	20	21			27d
d Add: Line 27a total and line 27b total					27e	
e Public support (line 27c total minus line 27d total)					27e	
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))					27g %	
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %	

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15. N/A

Part V Private School Questionnaire (See 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?	X	
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?	X	
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.) <u>ALL ADVERTISING AND BROCHURES STATE THE SCHOOLS NON-DISCRIMINATORY POLICY. ALL STUDENTS ARE WELCOME.</u> ----- -----	X	
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
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?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
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?		X
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.		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.	X	

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	The lobbying nontaxable amount is –		
Over \$500,000 but not over \$1,000,000	20% of the amount on line 40		
Over \$1,000,000 but not over \$1,500,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,500,000 but not over \$17,000,000	\$175,000 plus 10% of the excess over \$1,000,000	41	
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)	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) 2001	(b) 2000	(c) 1999	(d) 1998	(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.

BAA

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 TUITION					281,643.
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	611110	180.			
96 Dividends & 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 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					
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))		180.			281,643.
105 Total (add line 104, columns (B), (D), and (E))					281,823.

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).
93A	TUITION PAID DIRECTLY SUPPORTS THE TEACHERS SALARIES AND OTHER SCHOOL EXPENSES REQUIRED IN PROVIDING A WALDORF EDUCATION TO ANY INTERESTED FAMILIES.

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 Sign Here

Signature of Officer _____ Date _____

Type or Print Name and Title _____

Paid Preparer's Use Only

Preparer's Signature: _____ Date: _____ Check if self-employed: Preparer's SSN or PTIN (see General Instruction W): P00302422

Firm's name (or yours if self-employed) and address, and ZIP + 4: CALLAN ACCOUNTING SERVICES, CPA, LLC
1018 SW EMKAY DR.
BEND, OR 97702

EIN: 93-1318784
Phone no: (541) 388-3838

1/15/04

02:22PM

**STATEMENT 1
FORM 990, PART II, LINE 43
OTHER EXPENSES**

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
ADMINISTRATIVE EXPENSES	133.		133.	
BANK CHARGES	190.		190.	
DUES AND SUBSCRIPTIONS	340.		340.	
GERMAN EXCHANGE	735.	735.		
INSURANCE	4,898.	3,918.	980.	
JANITORIAL	6,528.	6,528.		
LICENSES AND FEES	3,147.	3,147.		
OFFICE SUPPLIES	2,224.		2,224.	
OUTREACH	11,318.	11,318.		
PARENT EDUCATION	2,369.	2,369.		
PROFESSIONAL FEES	3,280.		3,280.	
RENTAL SPACE	5,255.	5,255.		
SCHOOL OUTINGS	36.	36.		
SCHOOL SUPPLIES	2,646.	2,646.		
SHUTTLE SERVICE	1,969.	1,969.		
SPECIALTY CLASSES	10,923.	10,923.		
TRAINING	6,536.	6,536.		
UTILITIES	12,459.	9,967.	2,492.	
TOTAL	\$ 74,986.	\$ 65,347.	\$ 9,639.	\$ 0.

**STATEMENT 2
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT**

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
FURNITURE AND FIXTURES	\$ 4,696.	\$ 1,640.	\$ 3,056.
MACHINERY AND EQUIPMENT	500.	317.	183.
BUILDINGS	559,253.	18,982.	540,271.
IMPROVEMENTS	71,896.	5,420.	66,476.
LAND	147,430.		147,430.
TOTAL	\$ 783,775.	\$ 26,359.	\$ 757,416.

**STATEMENT 3
FORM 990, PART IV, LINE 58
OTHER ASSETS**

NET INTANGIBLE ASSETS			11,585.
TOTAL	\$	\$	\$ 11,585.

CLIENT 1488

WALDORF SCHOOL OF BEND
DBA SAGEWOOD SCHOOL

93-1217269

1/15/04

02:22PM

STATEMENT 4
FORM 990, PART IV, LINE 63
LOANS FROM OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

BALANCE DUE

LENDER'S NAME:	GARY AND MARJORIE JOHANSEN	
LENDER'S TITLE:	PRESIDENT	
DATE OF NOTE:	5/17/2002	
MATURITY DATE:	5/17/2007	
REPAYMENT TERMS:	ANNUAL PAYMENT \$750	
INTEREST RATE:	10.00%	
SECURITY PROVIDED:	NONE	
PURPOSE OF LOAN:	BUSINESS OPERATIONS	
DESC. OF CONSIDERATION:	CASH	
FMV OF CONSIDERATION:	7,500.	
ORIGINAL AMOUNT:	7,500.	
BALANCE DUE:		7,500.

LENDER'S NAME:	MARK AND BELINDA KACHLEIN	
LENDER'S TITLE:	SECRETARY	
DATE OF NOTE:	5/17/2002	
MATURITY DATE:	5/17/2007	
REPAYMENT TERMS:	ANNUAL PAYMENT \$1,000	
INTEREST RATE:	10.00%	
SECURITY PROVIDED:	NONE	
PURPOSE OF LOAN:	BUSINESS OPERATIONS	
DESC. OF CONSIDERATION:	CASH	
FMV OF CONSIDERATION:	10,000.	
ORIGINAL AMOUNT:	10,000.	
BALANCE DUE:		10,000.
TOTAL		<u>\$ 17,500.</u>

STATEMENT 5
FORM 990, PART IV, LINE 64B
MORTGAGES AND OTHER NOTES PAYABLE

<u>MORTGAGES PAYABLE</u>	<u>BALANCE DUE</u>
WASHINGTON MUTUAL	\$ 498,431.
WASHINGTON MUTUAL	151,569.
	<u>\$ 650,000.</u>

OTHER NOTES PAYABLE

LENDER'S NAME:	CITY OF BEND	
DATE OF NOTE:	9/04/2001	
MATURITY DATE:	3/01/2007	
REPAYMENT TERMS:	ANNUAL PAYMENT \$251	
INTEREST RATE:	7.00%	
PURPOSE OF LOAN:	SYSTEM DEVELOPMENT - SEWER	
DESC. OF CONSIDERATION:	PERFORMANCE OF WORK	
FMV OF CONSIDERATION:	2,086.	
ORIGINAL AMOUNT:	2,086.	
BALANCE DUE:		\$ 1,920.

CLIENT 1488

WALDORF SCHOOL OF BEND
DBA SAGEWOOD SCHOOL

93-1217269

1/15/04

02:22PM

STATEMENT 5 (CONTINUED)
FORM 990, PART IV, LINE 64B
MORTGAGES AND OTHER NOTES PAYABLE

OTHER NOTES PAYABLE

LENDER'S NAME:	KEY BANK LINE CREDIT		
DATE OF NOTE:	9/10/2001		
MATURITY DATE:	9/10/2002		
REPAYMENT TERMS:	INTEREST ONLY		
INTEREST RATE:	5.25%		
PURPOSE OF LOAN:	OPERATING LINE		
DESC. OF CONSIDERATION:	CASH		
FMV OF CONSIDERATION:	15,000.		
ORIGINAL AMOUNT:	15,000.		
BALANCE DUE:		\$	15,000.
LENDER'S NAME:	KEY BANK LOAN		
DATE OF NOTE:	7/01/2001		
MATURITY DATE:	6/21/2006		
REPAYMENT TERMS:	MONTHLY PAYMENT \$290		
INTEREST RATE:	5.75%		
PURPOSE OF LOAN:	BUSINESS OPERATIONS		
DESC. OF CONSIDERATION:	CASH		
FMV OF CONSIDERATION:	12,379.		
ORIGINAL AMOUNT:	15,000.		
BALANCE DUE:		\$	12,379.
LENDER'S NAME:	MARCI COLLIS		
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR		
DATE OF NOTE:	5/01/2000		
MATURITY DATE:	5/01/2005		
REPAYMENT TERMS:	ANNUAL PAYMENT \$50		
INTEREST RATE:	5.00%		
SECURITY PROVIDED:	NONE		
PURPOSE OF LOAN:	BUSINESS OPERATIONS		
DESC. OF CONSIDERATION:	CASH		
FMV OF CONSIDERATION:	1,000.		
ORIGINAL AMOUNT:	1,000.		
BALANCE DUE:		\$	1,000.
LENDER'S NAME:	LYNN WELSH GAMBA		
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR		
DATE OF NOTE:	10/01/1999		
MATURITY DATE:	10/01/2004		
REPAYMENT TERMS:	MONTHLY PAYMENT \$150		
INTEREST RATE:	5.00%		
SECURITY PROVIDED:	NONE		
PURPOSE OF LOAN:	BUSINESS OPERATIONS		
DESC. OF CONSIDERATION:	CASH		
FMV OF CONSIDERATION:	3,000.		
ORIGINAL AMOUNT:	3,000.		
BALANCE DUE:		\$	3,000.

CLIENT 1488

WALDORF SCHOOL OF BEND
DBA SAGEWOOD SCHOOL

93-1217269

1/15/04

02:22PM

STATEMENT 5 (CONTINUED)
FORM 990, PART IV, LINE 64B
MORTGAGES AND OTHER NOTES PAYABLEOTHER NOTES PAYABLE

LENDER'S NAME:	MICHAEL AND JANET GOTH		
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR		
DATE OF NOTE:	10/01/1999		
MATURITY DATE:	10/01/2004		
REPAYMENT TERMS:	ANNUAL PAYMENT \$500		
INTEREST RATE:	5.00%		
SECURITY PROVIDED:	NONE		
PURPOSE OF LOAN:	BUSINESS OPERATIONS		
DESC. OF CONSIDERATION:	CASH		
FMV OF CONSIDERATION:	10,000.		
ORIGINAL AMOUNT:	10,000.		
BALANCE DUE:		\$	10,000.
LENDER'S NAME:	MARK GAMBA		
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR		
DATE OF NOTE:	10/01/1999		
MATURITY DATE:	10/01/2004		
REPAYMENT TERMS:	ANNUAL PAYMENT \$250		
INTEREST RATE:	5.00%		
SECURITY PROVIDED:	NONE		
PURPOSE OF LOAN:	BUSINESS OPERATIONS		
DESC. OF CONSIDERATION:	CASH		
FMV OF CONSIDERATION:	5,000.		
ORIGINAL AMOUNT:	5,000.		
BALANCE DUE:		\$	5,000.
LENDER'S NAME:	RICK LANE		
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR		
DATE OF NOTE:	6/30/2000		
MATURITY DATE:	6/01/2005		
REPAYMENT TERMS:	ANNUAL PAYMENT \$285		
INTEREST RATE:	5.00%		
SECURITY PROVIDED:	NONE		
PURPOSE OF LOAN:	BUSINESS OPERATIONS		
DESC. OF CONSIDERATION:	CASH		
FMV OF CONSIDERATION:	2,150.		
ORIGINAL AMOUNT:	2,150.		
BALANCE DUE:		\$	2,150.
LENDER'S NAME:	RICK LANE		
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR		
DATE OF NOTE:	5/01/2002		
MATURITY DATE:	5/01/2007		
REPAYMENT TERMS:	ANNUAL PAYMENT \$285		
INTEREST RATE:	10.00%		
SECURITY PROVIDED:	NONE		
PURPOSE OF LOAN:	PURCHASE PROPERTY		
DESC. OF CONSIDERATION:	CASH		
FMV OF CONSIDERATION:	2,850.		
ORIGINAL AMOUNT:	2,850.		
BALANCE DUE:		\$	2,850.

CLIENT 1488

WALDORF SCHOOL OF BEND
DBA SAGEWOOD SCHOOL

93-1217269

1/15/04

02:22PM

STATEMENT 5 (CONTINUED)
FORM 990, PART IV, LINE 64B
MORTGAGES AND OTHER NOTES PAYABLE

OTHER NOTES PAYABLE

LENDER'S NAME:	DAN AND SUSAN PARR	
RELATIONSHIP OF LENDER:	SECURED CREDITOR	
DATE OF NOTE:	10/01/1999	
MATURITY DATE:	1/01/2004	
REPAYMENT TERMS:	ANNUAL PAYMENT \$500	
INTEREST RATE:	5.00%	
SECURITY PROVIDED:	PERSONAL ASSETS	
PURPOSE OF LOAN:	BUSINESS OPERATIONS	
DESC. OF CONSIDERATION:	CASH	
FMV OF CONSIDERATION:	12,000.	
ORIGINAL AMOUNT:	12,000.	
BALANCE DUE:		\$ 12,000.

LENDER'S NAME:	SUSAN STRAUSS AND TED WISE	
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR	
DATE OF NOTE:	10/01/1999	
MATURITY DATE:	10/01/2000	
REPAYMENT TERMS:	ANNUAL PAYMENT \$500	
INTEREST RATE:	5.00%	
SECURITY PROVIDED:	NONE	
PURPOSE OF LOAN:	PURCHASE PROPERTY	
DESC. OF CONSIDERATION:	CASH	
FMV OF CONSIDERATION:	10,000.	
ORIGINAL AMOUNT:	13,797.	
BALANCE DUE:		\$ 10,000.

LENDER'S NAME:	SUSAN STRAUSS AND TED WISE	
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR	
DATE OF NOTE:	5/07/2002	
MATURITY DATE:	5/07/2008	
REPAYMENT TERMS:	ANNUAL PAYMENT \$800	
INTEREST RATE:	8.00%	
SECURITY PROVIDED:	NONE	
PURPOSE OF LOAN:	BUSINESS OPERATIONS	
DESC. OF CONSIDERATION:	CASH	
FMV OF CONSIDERATION:	10,000.	
ORIGINAL AMOUNT:	10,000.	
BALANCE DUE:		\$ 10,000.

LENDER'S NAME:	TONY AND CLAUDIA HINZ	
RELATIONSHIP OF LENDER:	UNSECURED CREDITOR	
DATE OF NOTE:	6/01/2000	
MATURITY DATE:	6/01/2005	
REPAYMENT TERMS:	ANNUAL PAYMENT \$500	
INTEREST RATE:	5.00%	
SECURITY PROVIDED:	NONE	
PURPOSE OF LOAN:	BUSINESS OPERATIONS	
DESC. OF CONSIDERATION:	CASH	
FMV OF CONSIDERATION:	10,000.	
ORIGINAL AMOUNT:	10,000.	
BALANCE DUE:		\$ 10,000.

\$ 95,299.

TOTAL \$ 745,299.

