Department of the Treasury

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

CmB No 1545-0047

For the 2001 calendar year, or tax year period beginning JUL 1, 2001 and ending JUN 30, 2002
Address Add
Address change change print or WOODCRAFT RANGERS, INC. Name change ch
Change C
Cotange Cota
Indition India In
City or town, state or country, and ZIP + 4 F Accounting method Cash X LOS ANGELES, CA 90007 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 must attach a completed Schedule A (Form 990 or 990-EZ) H and I are not applicable to section 527 organizations must attach a completed Schedule A (Form 990 or 990-EZ) H and I are not applicable to section 527 organizations must attach a completed Schedule A (Form 990 or 990-EZ) H and I are not applicable to section 527 organizations affiliates Yes H(b) If "Yes," enter number of affiliates Yes H(b) If "Yes," enter number of affiliates Yes H(b) If "Yes," enter number of affiliates Yes H(c) If the organization spread organization type (check only one) X 501(c) (3)
Application must attach a completed Schedule A (Form 990 or 990-EZ) G Web site ▶N/A J Organization type (check only one) ▶ X 501(c) (3) ◄ (insert no)
Web site ▶N/A Jorganization type (check only one) ▶ ▼ 501(c) (3) ◄ (insert no) ☐ 4947(a)(1) or ☐ 527
G Web site ►N/A Constributions, girts, grants, and similar amounts received a Direct public support Constributions, girts, grants, and similar amounts received a Direct public support Constributions, girts, grants, and similar amounts received Constributions (grants)
J Organization type (check only one) ► X 501(c) (3) ◄ (insert no)
J Organization type (check only one)
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 3,903,307. A
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 ▶ 3,903,307. Check ▶
In the mail, it should file a return without financial data. Some states require a complete return L. Gross receipts. Add tines 6b, 8b, 9b, and 10b to line. 12 ▶ 3,903,307. Part Revenue, Expenses, and Changes in Net Assets or Fund Balances Contributions, gifts, grants, and similar amounts received a Direct public support 1a 168,193.
L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 3,903,307. Part Revenue, Expenses, and Changes in Net Assets or Fund Balances 1
L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 3,903,307. Sch B (Form 990, 990-EZ, or 990-PF) Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances 1 Contributions, gifts, grants, and similar amounts received a Direct public support b Indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 3,207,417. noncash \$) 14 3,207,
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances 1 Contributions, gifts, grants, and similar amounts received a Direct public support b Indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 3,207,417. noncash \$) 14 168,193. 15 2,868,261.
1 Contributions, gifts, grants, and similar amounts received a Direct public support b Indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 3,207,417. noncash \$) 14 168,193. 15 2,868,261.
a Direct public support b Indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 3,207,417. noncash \$) 1a 168,193. 1b 170,963. 1c 2,868,261.
b Indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 3,207,417. noncash \$) 10 170,963. 1c 2,868,261.
c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 3,207,417. noncash \$) 1c 2,868,261.
d Total (add lines 1a through 1c) (cash \$ 3,207,417. noncash \$) 1d 3,207,
(cash \$ 3,207,417. noncash \$) 1d 3,207,
3 Membership dues and assessments
4 Interest on savings and temporary cash investments 4 20,
5 Dividends and interest from securities 5
6 a Gross rents SEE STATEMENT 1 6a 10,500.
b Less rental expenses 6b
c. Net rental income or (loss) (subtract line 6h from line 6a).
7 Other investment income (describe) 7 8 a Gross amount from sale of assets other (A) Securities (B) Other
8 a Gross amount from sale of assets other (A) Securities (B) Other
than inventory 515,433. 8a
b Less cost or other basis and sales expenses 638,957. 8b
c Gain or (loss) (attach schedule) <123,524.>8c
d Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 2 8d <123,
9 Special events and activities (attach schedule)
a Gross revenue (not including \$ of contributions
reported on line 1a)
b Less direct expenses other than fundraising expenses
c Net income or (loss) from special events (subtract line 9b from line 9a)
10 a Gross sales of inventory, less returns and allowances 10a
b Less cost of goods sold
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)
11 Other revenue (from Part VII, line 103)
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 3, 264,
13 2,807,
14 Management and general (from line 44, column (C)) 14 340, 15 Fundraising, (trop in legal, column (D)) 15 94,
14 Management and gages (from line 44, column (C)) 15 Fundraising (from line 44, column (D)) 16 A Payments to affiliates (attach schedule) 18
17 Total Expenses (add line) 16 and 44, column (A)) 17 3, 242, 10 15 16 17 18 18 18 19 19 19 19 19
2.67
20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3 20 <47,
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20) 21 342,
123001 01-04-02 LHA For Paperwork Reduction Act Notice, see the separate Instructions Form 990

Statement of Aller	T R	ANGERS, INC.	n (A) Columns (B), (C), and	(D) are required for section	729319 Page 2
Part II Functional Expenses (4) o	rganiza	tions and section 4947(a)(1) nonexempt charitable trus	its but optional for others	ii 50 i(c)(3) aiiu
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)	1-1				·
cash \$noncash \$	22				
23 Specific assistance to individuals (attach schedule)					
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc	25	<u> 190,566.</u>	0.	140,511.	50,055.
26 Other salaries and wages	26	<u>2,133,229.</u>	1,964,771.	164,173.	4,285.
27 Pension plan contributions	27				
28 Other employee benefits	28	110,774.	74,977.	34,948.	849.
29 Payroll taxes	29	<u> 182,691.</u>	164,614.	13,774.	4,303.
30 Professional fundraising fees	30				
31 Accounting fees	31	14,265.	1,013.	13,252.	
32 Legal fees	32				
33 Supplies	33	<u> 178,136.</u>	158,761.	17,469.	1,906.
34 Telephone	34	47,690.	36,683	11,007.	
35 Postage and shipping	35	14,731.	769	13,962.	
36 Occupancy	36	292,784.	292,734.	50.	
37 Equipment rental and maintenance	37				
38 Printing and publications	38	41,402.	17,127.	20,965.	3,310.
39 Travel	39				
40 Conferences, conventions, and meetings	40	23,233.	13,101.	8,874.	1,258.
41 Interest	41	23,437.	23,437.		
42 Depreciation, depletion, etc. (attach schedule)	42	47,994.	11,557.	36,437.	
43 Other expenses not covered above (itemize)	П	<u>-</u>			<u> </u>
4	43a				
b	43b				
	43c				
4	43d			-	
SEE STATEMENT 4	43e	<58,379.	> 47,790.	<134,916.	> 28,747.
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (8)-(D), carry these totals to lines 13-15	44	3,242,553.	2,807,334.	340,506.	94,713.
Joint Costs Check Inf you are following SOP 9		3 2 2 3 3	2,001,004,	510/5001	<u> </u>
Are any joint costs from a combined educational campa		i fundraising solicitation rei	norted in (A) Program service	es? ▶ [Yes X No
If "Yes," enter (i) the aggregate amount of these joint co	_	=	(ii) the amount allocated to f		
(iii) the amount allocated to Management and general \$			(iv) the amount allocated to		·
Part III Statement of Program Servi	ce A	ccomplishments	is and amount amounted to	The state of the s	
What is the organization's primary exempt purpose?			-		1
AIDING DEVELOPMENT OF DI		VANTAGED YOU'	<u>т</u>		Program Service
All organizations must describe their exempt purpose achievemen	ta h a c	teer and concise manner. State t	the number of clients served, pub		Expenses (Required for 50 1(c)(3) and
achievements that are not measurable (Section 501(c)(3) and (4) or allocations to others.)	rgantzat	ions and 4947(a)(1) nonexampt o	charitable trusts must also enter ti	ne emount of grants and	(4) orgs , and 4947(a)(1) trusts but optional for others)
a SEE STATEMENT 5					
- Dan Diffinition 5			-	***-	
·			Grants and aflocations \$	7	540,129.
b SEE STATEMENT 6		\ <u></u> \	THE RESERVE OF THE PARTY OF THE		
_ <u></u>				-	
-					
	-		Grants and allocations \$	1	2,267,205.
<u> </u>			Transpario anocabono w		272017-33
			_		
		 - -		· 	
			Prents and allocations C		
d			Frants and allocations \$		
					
					
			Grants and allocations \$		
Other program services (attach schedule)			Grants and allocations \$		
f Total of Program Service Expenses (should equal	line 44			<u> </u>	2,807,334.
100044	• •	,	<u> </u>		Form 990 (2001)
123011 01-02-02					101111 000 (2001)

Part IV Balance Sheets

Note	When shou	re required, attached schedules and amounts withii id be for end-of-year amounts only	n the description column	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing		9,983.	45	9,211.
	46	Savings and temporary cash investments	Ţ	832,431.	46	669,400.
	47 a	F	47a 331,318.	101 015		224 242
	b	Less allowance for doubtful accounts	47b	191,316.	47c	331,318.
	48.2	Pledges receivable	48a			
	Ь		48b	12,691.	48c	
	49	Grants receivable		4,416.	49	
	50	Receivables from officers, directors, trustees,				
		and key employees	L		50	-
Assets	51 a	Other notes and loans receivable	51a			
Ş	b	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use	<u>L</u>		52	
	53	Prepaid expenses and deferred charges		62,858.	53	<u>90,783.</u>
	54	Investments - securities	Cost FMV		54	
	55 a	Investments - land, buildings, and	1		. }	
		equipment basis	55a			
	ł					
	_	•	55b	 _	55c	
	56	Investments - other	1 600 214		56	
	57 .		57a 608,214. 57b 318,722.	270 806		200 402
			576 318,722. STATEMENT 7	<u>270,896.</u> 77,655.	57c 58	289,492. 187,046.
	58	Odder assets (describe SEE	SIATEMENT /	11,000	30	101,040.
	59	Total assets (add lines 45 through 58) (must equal line)	74)	1,462,246.	59	1,577,250.
_	60	Accounts payable and accrued expenses		258,633.	60	316,807.
	61	Grants payable	<u>, </u>	200,000	61	
8	62	Deferred revenue	F	79,225.	62	55,203.
Liabilities	63	Loans from officers, directors, trustees, and key employe	ee s		63	
<u>a</u>	64 a	Tax-exempt bond liabilities	Γ		64a	
_	Ь	Mortgages and other notes payable		102,330.	64b	379,434.
	65	Other liabilities (describe SEE	STATEMENT 8)	654,382.	65	483,675.
	Ì			1 004 570]	1 025 110
	66	Total liabilities (add lines 60 through 65)		1,094,570.	66	1,235,119.
	Urgan	itations that follow SFAS 117, check here X at 69 and lines 73 and 74	no complete lines 67 through			
2	67	Unrestricted		148,626.	67	74,082.
Š	68	Temporarily restricted	F	128,000.	68	173,252.
3ak	69	Permanently restricted	<u> </u>	91,050.	69	94,797.
Vet Assets or Fund Balances	1	izations that do not follow SFAS 117, check here ▶ [and complete lines			
Ē		70 through 74	and complete mass		-	
ğ	70	Capital stock, trust principal, or current funds			70	
set	71	Paid-in or capital surplus, or land, building, and equipme	ent fund		71	
Ş	72	Retained earnings, endowment, accumulated income, or			72	
Ž	73	Total net assets or fund balances (add lines 67 through				
_		column (A) must equal line 19, column (B) must equal lin		367,676.	73	342,131.
	74	Total liabilities and net assets / fund balances (add line	-	1,462,246.	74	1,577,250.

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.

Form 990 (2001) WOODCRAFT	RANGERS, IN	rc.		95-17293	19 Page 4
Part IV-A Reconciliation of Revenue			iliation of Exp		
Financial Statements with F	Revenue per	Financi	al Statements	With Expen	ises per
Return		Return			
Total revenue, gains, and other support per audited financial statements	3,451,008.	Total expenses and to audited financial state	ments	▶ a 3,	476,553.
b Amounts included on line a but not on line 12, Form 990		b Amounts included on line 17, Form 990 (1) Donated services	ine a but not on		
(1) Net unrealized gains on investments \$ <47,342.>		and use of facilities (2) Prior year adjustment	 	00.	
			S		
(2) Donated services		reported on line 20, Form 990	•	1 1	
and use of facilities \$ 234,000.			•		
(3) Recoveries of prior		(3) Losses reported on			
year grants \$		line 20, Form 990	5		
(4) Other (specify) \$		(4) Other (specify)	\$		
Add amounts on lines (1) through (4)	<u> 186,658.</u>	Add amounts on lines	(1) through (4)	▶ b	<u>234,000.</u>
c Line a minus line b	3,264,350.	c Line a minus line b		▶ c 3,	242,553.
d Amounts included on line 12, Form 990 but not on line a		d Amounts included on 990 but not on line a		11	
(1) Investment expenses		(1) Investment expenses			
not included on		not included on			
line 6b, Form 990 \$,	line 6b, Form 990	\$		
(2) Other (specify)		(2) Other (specify)	s		
Add amounts on lines (1) and (2)	0.	Add amounts on lines	(1) and (2)	<u> </u>	0.
e Total revenue per line 12, Form 990		e Total expenses per lin			
(line c plus line d)	3,264,350.		,	. اما⊲	242,553.
Part V List of Officers, Directors, Tru			e even if not compen		<u> </u>
and the second s		(B) Title and average hours	(C) Compensation		(E) Expense
(A) Name and address	ı	per week devoted to	(If not paid, enter	plans & deferred compensation	account and other allowances
		position		COmpensation	odici anowaniecs
~					
SEE STATEMENT 9		<u> </u>	190,566.	0.	0.
			1		
		<u> </u>			
			1	1	1
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<u></u>				<u> </u>	<u> </u>
75 Did any officer, director, trustee, or key employee receive	e aggregate compensati	on of more than \$100,000 fro	m your <u>orga</u> nization	and all related	
organizations, of which more than \$10,000 was provide	ed by the related organiza	tuons? If Yes, attach schedi	ile Yes	X No	Form 990 (2001)

Form		729319	<u> </u>	Page 5			
Pa	rt VI Other Information		Yes				
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	<u> </u>	X			
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	L	X			
	If "Yes," attach a conformed copy of the changes	Ì		x			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?						
b	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?	79	_	<u>X</u>			
	If "Yes," attach a statement						
80 a	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						
64 -	and check whether it is exempt OR nonexe	· I I					
81 a	Enter direct or indirect political expenditures. See line 81 instructions Bid the accompanion 616 Form 4400 ROL Assistance 2	0.		v			
B2 -	Did the organization file Form 1120-POL for this year? Put the organization receive denoted convent or the use of materials, equipment, or facilities at no observe or at substantially less than	81b		<u> </u>			
82 a	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				
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	82a	_	_			
	expense in Part II (See instructions in Part III) 82b 234,0	ا ا		l			
82 .	Did the organization comply with the public inspection requirements for returns and exemption applications?		$ \mathbf{x} $				
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83a 83b	^				
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		x			
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not	074					
	tax deductible?	84b					
85	501(c)(4), (5), or (6) organizations • Were substantially all dues nondeductible by members? N/A	85a					
	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b					
•	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy ta						
	owed for the prior year	_	}				
C	Dues, assessments, and similar amounts from members 85c N/A						
ď	Section 162(e) lobbying and political expenditures 85d N/A	_					
ė	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						
0	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g					
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues						
	allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	.				
88	501(c)(7) organizations Enter; a Initiation fees and capital contributions included on line 12						
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		i				
ь	Gross income from other sources (Do not net amounts due or paid to other sources						
	against amounts due or received from them) 876 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_			
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under	_					
	,	<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.			
	Enter Amount of tax on line 89c, above, reimbursed by the organization			0.			
90 a				4 4 2			
þ	Number of employees employed in the pay period that includes March 12, 2001			113			
0.4	The bests are as at \$ MOODODARM \$23MORDO	2 \ 7 / 0	302	1			
91	The books are in care of ► WOODCRAFT RANGERS Telephone no ► (21)	<u>3)749-</u>	<u> </u>				
	Located at N. 2111 DADY COOKE AKE TOO ANCETED ON 200.4	▶ 90 <u>00</u>	7				
	Located at ► 2111 PARK GROVE AVE., LOS ANGELES, CA ZIP+4	- 3000					
09	Section 4047/al/1) papayament abantable tayata filing Form 000 in law of Form 4844. Phank hara		►□	\neg			
92	Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Ferm 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year	N/	_				
123041 01-02-				(2001)			
U 1-02-	va						

Page 6

Note Enter arms amounts unless others			ed business income		ded by section 512 513 or 514	
Note Enter gross amounts unless otherw indicated	7/50	(A)	(B)	(C)	(D)	(E) Related or exempt
93 Program service revenue		Business code	Amount	Exclu- sion	Amount	function income
CAMP PROGRAMS	-			code		149,260.
b						115,200.
c				_	· · · ·	
d	— F				· · · · · · · · · · · · · · · · · · ·	
			 		-,	
1 Medicare/Medicaid payments						
g Fees and contracts from government age	encies	_	1.17	1 1		
94 Membership dues and assessments						
95 Interest on savings and temporary	F				-	
cash investments				14	20,697.	_
96 Dividends and interest from securities						
97 Net rental income or (loss) from real esta	te					
a debt-financed property						
b not debt-financed property	<u>_</u>			16	10,500.	
98 Net rental income or (loss) from personal	l property				<u> </u>	
99 Other investment income	L					
100 Gain or (loss) from sales of assets				1 1		
other than inventory	<u> </u>					<123,524.>
101 Net income or (loss) from special events	Ļ					
102 Gross profit or (loss) from sales of invent	tory					
103 Other revenue				⁻		
4	 					
b						
c		.		+	<u> </u>	
d					.	
***************************************		-			21 107	25 726
104 Subtotal (add columns (B), (D), and (E))	L				31,197.	25,736. 56,933.
105 Total (add line 104, columns (B), (D), and		-A 6 de	0-41		▶.	20,933.
Note Line 105 plus line 1d, Part I, should Part VIII Relationship of Activ				nt Pur	DOSAS (See Specific Instru	ctions on nage 32)
Line No Explain how each activity for which						
exempt purposes (other than by p				ieu import	amy to the accompisminent i	of file of famisanous
93A THE CAMP PROGRAM			_ 	ОМОТ	R THE DEVELOP	MENT OF HIGH
SELF-ESTEEM AND						MENT OF HEAT
BEEL BETERN AND	TODITIVE	LILLING	ONAL AND DO	CIND	4NDODD:	
· · · · · · · · · · · · · · · · · · ·			·			
Part IX Information Regards	ng Taxable S	ubsidıar	ies and Disregar	ded Er	itities (See Specific Instruc	tions on page 33.)
Name, address, and EIN of corporation,	(B) Percentage of		(C) Nature of activities		(D)	(E) End-of-year
partnership, or disregarded entity	Percentage of ownership interest	-	Nature of activities		Total income	assets
	%		· · ·			
N/A	%					
	<u> </u>					
	%	 				
Part X Information Regarding	ng Transfers	Associa	ted with Persona	al Bene	efit Contracts (See Spe	cific Instructions on page 33)
(a) Did the organization, during the year, red	cerve any funds, dir	ectly or ındı	ectly, to pay premiums of	on a perso	nal benefit contract?	Yes X No
(b) Did the organization, during the year, pay		-	• • • • •			Yes X No
Note If "Yes" to (b), file Form 8870 and						
Under penalties of persury I declare that	I have exemined this re	itum includio	accompanying echedules a information of which prep	nd statemer erer has any	nts, and to the best of my knowled knowledge	ge and belief it is true
			1.1.	~		1. 1
			<u> 116/03</u> N	<u>د د</u>	CO, Cathiel	yrsti) U OU
			Date		rint name and title	
				Date	Check if	Preparer & SSN or PTIN

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treesury

Employer identification number

95 1729319 WOODCRAFT RANGERS, INC. 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") (b) Title and average hours per week devoted to position d) Contributions to (e) Expense account and other (a) Name and address of each employee paid employee benefit plans & deferred compensation (c) Compensation more than \$50,000 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") (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service

Total number of others receiving over \$50,000 for professional services

OU!!	euule A (I	onii 990 01 990-E2) 2001 WOODCRAFT RANGERS, INC. 95-17	<u> 2931</u>	<u>.9</u> F	age 2
P	art III	Statements About Activities (See page 2 of the instructions)		Yes	No
1	Durina ti	ne year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence		\vdash	
-	•	inion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the			
		activities > \$ (Must equal amounts on line 38, Part VI-A,	ļ		
		of Part VI-B)	1		X
		tions that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking	<u> </u>	† -	_21
		ist complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		1	
2		ie year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors,			
		directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such			
		affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the enswer to any question is "Yes,"	ļ		
		detailed statement explaining the transactions) SEE STATEMENT 10	1		
	Sale, excl	hange, or leasing of property?	2a	i l	X
b	Lending (of money or other extension of credit?	2ъ	X	
C	Furnishin	g of goods, services, or facilities?	2c	Ì	X
đ	Payment	of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V. FORM 990	_2d	Х	
•	Transfer	of any part of its income or assets?	2e		<u> </u>
			1		
3	Does the	organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)	3	<u></u> .	X
4	Do you h	ave a section 403(b) annuity plan for your employees?	4		X
		a statement to explain how the organization determines that individuals or organizations receiving grants or loans			
		therance of its chantable programs "qualify" to receive payments			
_	rt (V	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
	organizati	on is not a private foundation because it is. (Please check only ONE applicable box.)			
5	\exists	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)			
6	\vdash	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7	님	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)			
8	님	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,			
40		and state >		-	
10	ш	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(w)		
44-		(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			
446		Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
11b 12		A community trust. Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.) An expansion that promath receives (1) more than 33 1/2% of its support from contributions, membership fees and gross			
12	لما	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.)			
		of the organization alter outle do, 1970 oce section obstatics, this complete the dupport demounts are distance.			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations desc	ribed 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)			
			(b)Lin	e numl	oer .
		(a) Name(s) of supported organization(s)		m abo	
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			

	THE A (FOITH 990 OF 990-EZ) 2001 W						1729319 Page	<u> </u>
<u>Pa</u>	rt IV-A Support Schedule (C	Complete only if you ch he worksheet in the insi	ecked a box on line 10), 11, or 12) Use cash	method of acc	ountir	ig	
Cala	idar year (or fiscal year	ie worksneet in the inst	ructions for converting	irom the accrual to th	ne casn metnod	or acc	ounting	_
begir	ining (n)	(a) 2000	(b) 1999	(c) 1998	(d) 1997		(e) Total	
15	Gifts grants and contributions received							_
	(Do not include unusual grants. See tine 28.)	2 049 061	2 070 718	1,497,773.	1 518 0	97	7,135,649	,
16	Membership fees received	2,043,001.	2,010,110	1,431,113	±,3±0,0	77.	1,133,043	÷
								
17	Gross receipts from admissions, merchandise sold or services	!				ĺ		
	performed, or furnishing of							
	facilities in any activity that is							
	related to the organization's	i i						
	charitable, etc., purpose	<u>167,007.</u>	<u> 154,133.</u>	172,873.	193,7	53.	<u>687,766</u>	•
18	Gross income from interest,							
	dividends, amounts received from	<u> </u>						
	payments on securities loans (section 512(a)(5)), rents, royalties, and							
	unrelated business taxable income	l						
	(less section 511 taxes) from							
	businesses acquired by the organization after June 30, 1975	37,319.	16,346.	8,829.	7 0	86.	70,480	
19	Net income from unrelated business		10,540.	0,02,0.		•	70,400	÷
	activities not included in line 18							
20	Tax revenues levied for the organization s			- 				_
20	benefit and either paid to it or expended	1				İ		
_	on its behalf				<u> </u>			_
21	The value of services or facilities							
	furnished to the organization by a governmental unit without charge							
	Do not include the value of services					1		
	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			SEE STATEME	NT 11			
	essets			1,791.			1,791	
23	Total of lines 15 through 22	2,253,387.	2,241,197.	1,681,266.	1,719,8	36.	7,895,686	•
24	Line 23 minus line 17	2,086,380.	2,087,064.	1,508,393.	1,526,0	83.	7,207,920	•
25	Enter 1% of line 23	22,534.	22,412.	16,813.	17,1			
26	Organizations described on lines 10	or 11. a Enter 2% of a	amount in column (e), line	24	•	26a	N/A	_
ь	Prepare a list for your records to sho		* *:		nmental			_
-	unit or publicly supported organization		•	· · · · · · · · · · · · · · · · · · ·				
	Do not file this list with your return	· -	=		•	26b	N/A	
	Total support for section 509(a)(1) to					26c	N/A	_
	Add Amounts from column (e) for the		19			200		_
u	Add Amounts from column (e) for an		15 26			26d	N/A	
_	Duble suggest the OCs make the O	22		'		$\overline{}$	N/A	_
-	Public support (line 26c minus line 2	•	!! 60 . (d			260		_
	Public support percentage (line 26e				• • • • • • • • • • • • • • • • • • • •	261		<u>%</u>
27	Organizations described on line 12,		•				=	
	to show the name of, and total amou	nts received in each year i	rrom, each "disqualified p	erson ⁻ Do not file this li	st with your retur	n Enter	the sum of such amount	CS
	for each year		_		_		_	
		• (1999)	Q. (•	7	(1997)	Q	
b	For any amount included in line 17 th	iat was received from eacl	h peson (other than "disq	ualified persons"), prepar	e a list for your re	cords to	show the name of, and	
	amount received for each year, that v		• •		•			ı
	lines 5 through 11, as well as individu	uals) Do not file this list :	with your return. After co	imputing the difference b	etween the amou	nt recen	ed and the larger	
	amount described in (1) or (2), enter	the sum of these differen	ces (the excess amounts)) for each year				
	(2000) Q	• (1999)	Q. (1998)	Q.	(1997)	Q	•
C	Add Amounts from column (e) for lii	nes 15	7,135,649.	16				
		87,766.20		21		27c	7,823,415	
d	Add Line 27a total		ine 27b total		<u>0.</u>	27d	_ 0	_
	Public support (line 27c total minus !		- 	-		27e	7,823,415	_
í	Total support for section 509(a)(2) to	•	23. column (e)	► 271 7,8	895,686.		<u> </u>	
	Public support percentage (line				-	27g	99.0847	%
•	Investment income percentage	•	•	••	orli 🕨	27h	.8926	_
o U Is	nusual Grants For an organization low, for each year, the name of the co	uescribed in tine 10, 11, (Intributor, the date and an	or 12, unat received any tr nount of the grant, and a l	nusual grants during 199 brief description of the na	rr unough 2000, Iture of the arant	Do not	anacion your records to file this list with your	
	turn Do not include these grants in a		are grand and a	ATO 31				

NONE

If you answered "Yes" to either 34a or b, please explain using an attached statement.

1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50,

Pa	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)	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?	29	 -	
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?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of	55	 	
•	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			
	to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.)	_		
		_		
32	Does the organization maintain the following	900		
a b	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32a 32b	 	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student	320	 	
٠	admissions, programs, and scholarships?	32¢		
4	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	i i	
•	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)	323		
33	Does the organization discriminate by race in any way with respect to	_	 	
-	Students' rights or privileges?	334	1 1	
b	Admissions policies?	33b		
¢	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
8	Educational policies?	33e		
f	Use of facilities?	331		
0	Athletic programs?	330		
h	Other extracurricular activities?	33h	 	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		_		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	— _{34a}		
ь	Has the organization's right to such aid ever been revoked or suspended?	34b		

Schedule A (Form 990 or 990-EZ) 2001

Schedule A (Form 990 or 990-EZ)			_		<u>,</u>	95	5-1729319 Page 5
	•	ecting Public Charities Ization that filed Form 5768)	(See pa	ige 9 of	f the instructions)		N/A
	tion belongs to an affiliated			you ch	ecked "a" and Timited	control	provisions apply
	mits on Lobbying E	•			(a) Affiliated group totals)	(b) To be completed for ALL electing organizations
(110 (011	in experiences means and	and paid of incarred /		Ţ	N/A		
36 Total lobbying expenditures to	influence public comion (a	rassroots lobbying)		36	"'A		
37 Total lobbying expenditures to		· · · · · · · · · · · · · · · · · · ·		37			
38 Total lobbying expenditures (a		(5507.10.5)		38			
39 Other exempt purpose expend	•			39			
40 Total exempt purpose expend	itures (add lines 38 and 39)			40			
41 Lobbying nontaxable amount.	Enter the amount from the	ollowing table -				_	
If the amount on line 40 is -	The lobbyin	g nontaxable amount is -					
Not over \$500 000	20% of the sm	ount on line 40	٦				
Over \$500 000 but not over \$1 000,	900 \$100 000 plus	15% of the excess over \$500 000					
Over \$1 000,000 but not over \$1 50	0 000 \$175 000 plus	10% of the excess over \$1 000 000	•	41			
Over \$1,500 000 but not over \$17 0	00 000 \$225 000 plus	5% of the excess over \$1 500 000		Į.			
Over \$17 000 000	\$1,000 000		,				
42 Grassroots nontaxable amoun	•			42	<u> </u>		<u> </u>
43 Subtract line 42 from line 36 (44 Subtract line 41 from line 38 (•		43			
44 Subuaci iiile 41 ii oiii iiile 30 i	inter -0- ii line 4 i is more tr	an ine 30		11	 		
Caution If there is an amou	unt on either line 43 or lin	e 44, you must file Form 4720)				
		Lobbying Expenditu	res Durin	ıg 4-Ye	ar Averaging Period		N/A
Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	}	(d) 1998		(e) Total
45 Lobbying nontaxable							
amount							0.
48 Lobbying ceiling amount	i						
(150% of line 45(e))							0.
47 Total lobbying	1				1		
expenditures 48 Grassroots nontaxable							0.
amount	i						0.
49 Grassroots ceiling amount		-					
(150% of line 48(e))							_ 0.
50 Grassroots lobbying							
expenditures							0.
Part VI-B Lobbying A		ing Public Chanties not complete Part VI-A) (See pag	e 12 of th	ne instr	uctions)		N/A
During the year, did the organizatio					ot to	Ι	
influence public opinion on a legisli	•	•	- •	·	Yes	No	Amount
a Volunteers	·						
b Paid staff or management (Inc	lude compensation in expen	ses reported on lines c through h)			<u> </u>	
c Media advertisements					<u> </u>	<u> </u>	
d Mailings to members, legislato	•				<u> </u>	 	
Publications, or published or b					<u> </u>	├	
f Grants to other organizations f		niale, or a lanielativa hodu			 	<u> </u>	
g Direct contact with legislators,	nieu amiia' Anaci iitticiir Otti	eleta, or a regionalive nous				!	

h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

i Total lobbying expenditures (Add lines ${\bf e}$ through ${\bf h}$)

Schedul	e A (Form 990 or 990-EZ) 200	WOODCRAFT RANGI	ERS, INC.	95-1	729319 Page 6
Part	VII Information Reg	garding Transfers To an	d Transactions and	Relationships With Nonchar	table
		zations (See page 12 of the inst			
		rectly or indirectly engage in any of			
		section 501(c)(3) organizations) or i ganization to a noncharitable exemp		illuçar organizations?	Yes No
	(i) Cash	Januaraon to a nonononazare exemp	t organization of		51a(I) X
	ii) Other assets				a(II) X
b C	Other transactions				
	(i) Sales or exchanges of asse	ts with a noncharitable exempt orga	nızatıon		b(i) X
	· •	noncharitable exempt organization			b(II) X
_	iii) Rental of facilities, equipme				b(iii) X
-	lv). Reimbursement arrangeme (v). Loans or loan guarantees	nts			b(v) X
	•	membership or fundraising solicitat	tions		b(vi) X
•		mailing lists, other assets, or paid e			c X
				always show the fair market value of the	1,
9	oods, other assets, or services	given by the reporting organization	If the organization received	l less than fair market value in any	
tr	ansaction or sharing arrangem	ent, show in column (d) the value o	f the goods, other assets, o	r services received	N/A
(a) Line no	(b) Amount involved	(c) Name of noncharitable ex	emot organization	(d) Description of transfers, transactions, and	eharing arrangements
Cuie iio	Autodut magazen	Manua of Houselian Rane ex	empt organization	Description of natisters, natisactions, and	Sugriff an angligentents
					_ -
			· · · · · · · · · · · · · · · · · · ·		
	ļ				
		·			<u></u>
		<u> </u>		 _	_
		···		ļ. <u> </u>	_
					
	1				_
C	the organization directly or inc ode (other than section 501(c)) "Yes," complete the following s	(3)) or in section 527?	one or more tax -e xempt org	anizations described in section 501(c) of the	Yes X No
	(a) Name of org		(b) Type of organization	(c) Description of relations	hin
	- tame or org		Type of organization	Description of relations	
				 	<u> </u>
				· · · · · · · · · · · · · · · · · · ·	
	 				
			<u> </u>		
			-		
			 -		
_					
123151]	<u> </u>	
A 44				Cahadula A /Eor	m 990 or 990-E7\ 2001

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of organization

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

Employer identification number

2001

W(OODCRAFT I	RANGERS, INC.		95-1729319
Organization type (check o	one)			
Filers of	Section ¹			
Form 990 or 990 EZ	X 501(c)() (enter number) organi	zation	
	4947(a)(1)	nonexempt chantable to	ust not treated as a private foundati	on
	527 politic	al organization		
Form 990 PF	501(c)(3) e	xempt private foundation	1	
	4947(a)(1)	nonexempt chantable to	ust treated as a private foundation	
	501(c)(3) t	axable private foundation	1	
for both the General rule an	•		rule (Note: Only a section 501(c)(7), (8), or (10) organization can check box(es)
General Rule-				
For organizations f contributor (Comp			ived, during the year, \$5,000 or moi	re (in money or property) from any one
Special Rules-				
sections 509(a)(1)/	170(b)(1)(A)(vi) and	•		ort test of the regulations under abution of the greater of \$5,000 or 2%
aggregate contribu	itions or bequests	of more than \$1,000 for		m any one contributor, during the year, able, scientific, literary, or educational
some contribution: \$1,000 (If this box charitable, etc., pu	s for use <i>exclusive</i> is checked, enter irpose Do not com	y for religious, charitable here the total contribution oplete any of the Parts un		,
	the heading of the	oir Form 990, Form 990-E		ule B (Form 990, 990-EZ, or 990-PF), but , to certify that they do not meet the filing
			S	chedule B (Form 990, 990-EZ, or 990-PF) (2001)

Schedule B (F	orm 990 990-EZ, or 990 PF) (2001)		Page 1 to 1 of Part (
	ganization	Employ	ver Identification number
MOODC	RAFT RANGERS, INC.	95	5-1729319
Part I	Contributors (See Specific Instructions)		
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$796,372.	Person X Payroll
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$96,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b)	(c) Aggregate contributions	(d) Type of contribution
3	Name, address and ZIP + 4	\$ 1,312,232.	Person X Payroll
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$\$.	Person X Payroll
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6		\$714,991.	Person X Payroll

FORM 990		RENTAL	INCOM	Œ 			STATEMENT	1
KIND AND LOCATION OF	PROPERTY					ACTIVITY NUMBER	GROSS RENTAL INC	OME
STANLEY RANCH CAMP GR	OUNDS				•	1	10,5	00.
TOTAL TO FORM 990, PA	RT I, LIN	IE 6A				=	10,5	00.
FORM 990 GAIN	(LOSS) FF	OM PUBL	ICLY I	RADED SE	CURI	TIES	STATEMENT	2
DESCRIPTION		GROS SALES I		COST OTHER B			NET GAI OR (LOS	
SEE STATEMENT 12 FOR DETAILS		515	,433.	638,	957.	0	. <123,5	24.>
TO FORM 990, PART I,	LINE 8	515	,433.	638,	957.	0	<123,5	24.>
FORM 990 OTHER DESCRIPTION	CHANGES	IN NET A	ASSETS	OR FUND	BAL	ANCES	STATEMENT	3
UNREALIZED LOSS ON INUNREALIZED LOSS ON IN						-	<5,7 <41,6	
TOTAL TO FORM 990, PA	RT I, LIN	TE 20				-	<47,3	42.>
FORM 990		OTHER	R EXPE	NSES	-		STATEMENT	4
DESCRIPTION	A) TOT		PRO	B) GRAM VICES	MAN	(C) AGEMENT GENERAL	(D) FUNDRAISI	NG
AUTO AND PARKING PROGRAM EVENTS FOOD INSURANCE	6 6	9,836. 6,416. 6,722. 2,364.		58,475. 44,691. 66,722. 42,364.		1,317.	21,4	44. 25.
LIVESTOCK FEED MEMBERSHIP DUES UTILITIES MISCELLANEOUS	3	1,970. 6,641. 4,131. 1,341.		1,970. 3,041. 28,022.		3,230. 6,109. 11,341.	3	70.

TOTAL TO FM 990, LN 43	<58,379.> ————————————————————————————————————	47,790.	<134,916.> ====================================	28,747.
DEFERRED GAIN	<170,707.>		<170,707.>	
RENT ADJUSTMENT - AMORTIZATION OF				
DONATED RENT	<234,000.>	<234,000.>		
BANK CHARGES	1,142.	158.	984.	
PROPERTY TAXES	688.	229.	459.	
REPAIRS & MAINTENANCE	31,586.	23,310.	8,276.	
	23,491.	12,808.	3,775.	6,908.
WOODCRAFT RANGERS, INC		12,808.	3.775.	95-17293

DESCRIPTION OF PROGRAM SERVICE ONE

CAMP PROGRAM: PROVIDES OUTDOOR EDUCATIONAL PROGRAMS FOR BOYS AND GIRLS THAT CULTIVATE A GREATER AWARENESS AND RESPECT FOR ALL NATURE. THE ORG. OFFERS A VARIETY OF CAMP SESSIONS. TOTAL # OF CHILDREN BENEFITTED WERE 1,690.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		540,129.

STATEMENT

DESCRIPTION OF PROGRAM	SERVICE TWO			
OPERATE SCHOOL BASED YOU DIRECTION IN LIFE. THE	LOCAL SCHOOL DISTRICTS T UTH PROGRAMS THAT PROVID PROGRAM IDENTIFIES AND N VALUES. 7,300 CHILDREN B	E A POSITIVE URTURES POSI-		
		GRANTS	EXPENSES	
TO FORM 990, PART III,	LINE B		2,267,20	5.
FORM 990	OTHER ASSETS		STATEMENT	7
DESCRIPTION			TRUOMA	
DEPOSITS EMPLOYEE ADVANCES UNBILLED REVENUE NOTES RECEIVABLE			25,61 8,38 145,36 7,67	8. 3.
TOTAL TO FORM 990, PART	IV, LINE 58, COLUMN B		187,04	6. —
FORM 990	OTHER LIABILITIES		STATEMENT	8
DESCRIPTION			AMOUNT	
DEFERRED GAIN ON SALE OF	F LAND		483,67	5.
TOTAL TO FORM 990, PART	THE FAME OF COLUMN D		483,67	_

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

	OF OFFICERS, DIRECTOR OF STREET	CTORS,	STATI	EMENT 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
CATHIE MOSTOVOY C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	CEO / BOARD SEC	CRETARY 100,110.	0.	0.
KATHY PINCKERT C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	PRESIDENT 0.	0.	0.	0.
PETER ANDERSON C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	VICE PRESIDENT 0.	0.	0.	0.
ALEXANDER GOMEZ C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	VICE PRESIDENT 0.	0.	0.	0.
RENAE DEMENT C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	TREASURER 0.	0.	0.	0.
TONY VAZQUEZ C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	PARLIAMENTARIAN 0.	0.	0.	0.
LARRY CLARK C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.	0.	0.	0.
GIL CURTIS C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.	0.	0.	0.
FAYE DANGERFIELD C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.	0.	0.	0.
KIMBERLY WEST C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.	0.	0.	0.
BRAD PYE, JR. C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD MEMBER 0.	0.	0.	0.

		-	_		
WOODCRAFT RANGERS, INC.				95-1729	319
JULIAN BRYCE AKINS C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD 0.	MEMBER	0.	0.	0.
TANJA ELLIOTT C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD 0.	MEMBER	0.	0.	0.
JOHN DICECCO C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD 0.	MEMBER	0.	0.	0.
MADELINE GOODWIN C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD 0	MEMBER	0.	0.	0.
LESTER JONES C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD 0	MEMBER	0.	0.	0.
JOAN LING C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD 0	MEMBER	0.	0.	0.
CELIA SAWYER C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	BOARD 0	MEMBER	0.	0.	0.
PHILLIP MCNATT C/O 2111 PARK GROVE AVENUE LOS ANGELES, CA 90007	CFO 40		90,456.	0.	0.
TOTALS INCLUDED ON FORM 990	, PART V		190,566.	0.	0.
SUBSTANTIAI	MENT REGARDING L CONTRIBUTORS EATORS, KEY EN PART III,	F, TRUSTE:	ES, DIRECTORS	STATEMENT	10

AS PART OF THE TERMINATION OF THE 403(B) RETIREMENT PLAN, ALL EMPLOYEES WERE REQUIRED TO REPAY PARTICIPANT LOANS. THE ORGANIZATION HAS ADVANCED AN OFFICER/DIRECTOR \$5,007 TO ENABLE THE INDIVIDUAL TO REPAY A PARTICIPANT LOAN TO THE 403(B) RETIREMENT PLAN. THE OUTSTANDING BALANCE IS \$3,175 AT 6/30/02

SCHEDULE A	OTHER INC	OME	-	STATEMENT	11
DESCRIPTION	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT	1997 AMOUNT	
GAIN ON SALE OF ASSET	0.	0.	1,791	•	0.
TOTAL TO SCHEDULE A, LINE 22	0.	0.	1,791		0.

_	Sale	Cost	Gain /
Description	Price	Basis	(Loss)
Bond			
GE Capital	106,037	105,298	739
Equities			
JDS Uniphase - 588 shares	4,930	7,350	(2,420)
Network Appliance - 630 shares	7,673	8,631	(958)
Qwest - 505 shares	10,219	16 094	(5,875)
AES corp - 300 shares	9,846	12,915	(3,069)
Liberty Media - 1355 shares	14,430	23,699	(9,269)
Solectron - 625 shares	6,279	11,437	(5,158)
Merk & Co - 250 shares	16,561	15,978	583
Citigroup - 125 shares	6,084	6,605	(521)
Pfizer - 150 shares	6,446	6,008	438
Broadcom - 175 shares	8,067	7,483	584
Ventas - 175 shares	7 150	11,643	(4,493)
Cisco - 200 shares	4,219	3,640	579
Siebel - 200 shares	4,729	9,380	(4,651)
Sun Microsystems - 250 shares	3,330	3,930	(600)
Kohis Corp - 50 shares	3,455	3,137	318
Qualcom - 50 shares	2,850	2,924	(74)
Amgen - 75 shares	5,080	4,551	529
Novellus - 425 shares	15,759	18,574	(2,815)
Applera - 505 shares	12,381	13,508	(1,127)
AOL Time Warner - 425 shares	10,857	22,525	(11,668)
Siebel - 50 shares	1,754	2,345	(591)
Morgan Stanley - 75 shares	3,969	4,817	(848)
Qualcom - 275 shares	10,089	16,082	(5,993)
Boeing - 350 shares	14,983	13,038	1,945
Oracle - 1060 shares	12,582	18,619	(6,037)
Medtronic - 375 shares	17,684	17,254	430
Best Buy - 75 shares	5,836	4,764	1,072
Bank of America - 100 shares	7,072	6,003	1,069
CVS Corp - 150 shares	4,937	4,092	845
Morgan Stanley - 270 shares	13,177	17,342	(4,165)
Comcast - 475 shares	12,877	20,615	(7,738)
Altera - 700 shares	14,242	20,300	(6,058)
EMC Corp - 935 shares	7,414	20,364	(12,950)
Amdocs Ltd - 525 shares	8,636	11,378	(2,742)
Wells Fargo - 100shares	5,059	4,643	416
Chevron Tex - 25 shares	2,196	1,613	583
Broadcom - 175 shares	6,763	11,033	(4,270)
IBM - 150 shares	11,208	14,649	(3,441)
King Pharmaceuticals - 425 shares	9,732	13,663	(3,931)
Sun Microsystems - 1,475 shares	7,626	15,966	(8,340)
Chevron Tex - 25 shares	9,554	7,031	2,523
Pfizer - 125 shares	4,334	5,006	(672)
GE - 200 shares	5,935	9,750	(3,815)
Hartford - 25 shares	1,493	1,485	` 8
Merk & Co - 250 shares	12,427	14,863	(2,436)
Arngen - 265 shares	11,045	16,080	(5,035)
Anadarko Petroleum - 50 shares	2,467	2,695	(228)
Wells Fargo - 50 shares	2,505	2,322	183
Microsoft Corp	2,691	2,554	137
Kohls Corp - 50 shares	3,551	3,137	414
Bank of America - 50 shares	3,547	3,002	545
Siebel - 580 shares	7,934	13 386	(5,452)
Pepsico - 75 shares	3,732	3,756	(24)
Total	515,433	638,957	(123,524)

4 DEPRECIATION

CATION	169 30 1 284 37 6 033 34 74 98 6 97	6 568 96										000		8	0000	34 72	56 72	247 77	4 <u>2</u> 5	277.09	훓휼	2 281 04 56 93	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	8 9 9	788	135 02	50 00 50 00 50 00	151 33 624 93	178 20 365 70	608 60 269 16	267 05	1 008 96	2000	1177	740 77	233 16	
DEPRECIATION ALLOCATION		80		88	30.08	88	888	888	25.55	888	17.28 15.28 16.28	2 819 00	<u> </u>	_		_																					
Ending NBV	253 84 2 869 84 18 876 03 567 70 132 34	22 718 86		88	0000	88	888	388	535 84	°à	2 315 65 468 87 6 007 38	318	-	8	88	88	88	38	888	207 62	372	94 88	172 90	91.67	ş	28128	25	1014 40	1 036 15	775 829	890 17	3 531 37	750 00	22	3 299 77	1 038 57	312 50
A/D (D	582 54 3 532 03 6 28 1 68 7 4 9 9 5 8 9 7	0.00 10 498 19		958 50 148 00	855 07 2 967 11	3 220 44 874 25	703 63	757 75	2 386 81	3 326 69	1 770 79 33 33 164 04	0 00 27,201 25		1 614 41	836 35 4 156 68	519 58	8208	1 351 45	2 1996 00	2 1	1 658 16 378 86	7 793 67 169 77	321 09 488 67	158 33	842 33	393 60	666 33	1 510 24	418 13 792 35	1 267 92 515 89	445 08	181345	750 00	31.77	740 77	233.16	62 50
Current year Depreciation Deleti	169 30 1 284 37 5 033 34 74 88 6 97	6,558.96		88	30 00 24 106	88	888	888	25 55 55	58.4 58.55	817 29 33 33 164 04	2 819 00		900	000	34 72 129 45	66 72	247 77	1 🛊 🤅	277 09	ខ្ទុំខ្ទុ	2 281 04 56 93	8 4 8 8 8 8	50 00 143 60	2650	135.02	220 00	624 93	179 20 365 70	608 60 269 16	267 05 276 07	1 008 96	500 00	31 77	740 77	233 15	62 50
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Cost 6/30/02	846 48 6 421 87 25 196 71 642 68 139 31	33 217 05		958 50	4 526 11	3 220 44	701 63	25 757 26 159 c	2 922 76 1 717 50	3 328 68	4 086 44 500 00 6 161 42	39 517 20		1 514 41	936 35 4 158 68	619 58 1 941 26	8	135145	2	1385 43	5 5	11 405 22 284 65	493 89 740 00	250 00 5 716 00	3 5	675	8 8 9	3 124 64	1 626 50	345 80	ž ž	33	2 500 00 167 54	151	4 040 54	1 27 1 72	376 00
Dalectons		8										000																							(1.159.46)		
Additions	842 68 139 31	781 89									500 00 6 161 42	6 661 42																					967 94	158 83	5 200 00	1 271 72 1	375 00
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Date placed in service	01/07/99 10/1/89 3/18/01 12/31/01 4/22/02	• •		679792	6/6/91 8/1/92	07/15/94	6/15/06	06/30/97	6/19/98	6/1/99	6/8/00 3/27/02 4/23/02	8		04/18/96	5/30/96 10/24/96	10/28/96	12/27/96	6/21/07	6/12/87	4/20/98	1/13/89	3/15/89	4/27/89 \$/10/89	\$/10/99 \$/10/89	5/18/99	12/1/99	12/1/89	8	801.3	0 0 0 1 0	97171	<u>6</u> [5	10001	10/1/0	8/30/01 8/31/01	8/24/01	10/21/8
*5	88888			88	8 8 8	888	888	888	88	88	8 8 8 8 8 8	RECREATION EQUIP (SR)		8	88	88	88	88	888	88	88	88	88	8 8 8 8	88	88	88	88	88	88	88	88	8 8	3 8	88	8 8	8
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Asset Description	FURMITURE & FIXTURES 1500-01 AIR CONDITIONERS FURNITURE		RECREATION EQUIPMENT 1500-02	ICE MACHINE 2 MOUNTAIN BIKES	TRAFFIC SIGNS EXERCISE FOURP	TENTS BUNK BEDS PAILING COS WATE	TENTS MATTRESSES	GOALS	TENTS ECONO MATS	S.A TENTS TENTS	TENTS HORSE ROME COURSE	GA# 1500-02	COMPUTER EQUIPMENT 1500-03	PRINTERPRINTERPRINTERPRINTER	COMPUTER COMPONENTS NT SERVERNT SERVER	HP SCANJET AP SCANNER LABOR TO INSTALL NETWORK	SOFTWARE & MEMORY LABOR TO REPAIR NETWORK	COMPUTER FOR BOOKKEEPER	MICROSOFT OFF PROF 7 GIFTS IN KIND MODEL 1801 ROTTER CIFTS IN KIND	COMPUTERCOMPUTERCOMPUTER	COMPUTERCOMPUTER	COMPUTER SCANCOMPUTER SCAN	AUDRE PAGEMAKEN WINGS OFFICEJET PRO SCANS	3COM MEGAHERTZ PC CARD HP SCANJET TOSHIBA SATELLITE	HP LASERJET PRINTER COMPUTER EQUIPMENT	COMPUTER EQUIPMENT GIFTTRAK SOFTWARE	BANKCARD SOFTWARE	COMPUTER EQUIPMENT	COMPUTER EQUIPMENT	COMPUTER EQUIPMENT	COMPUTER PRINTERS COMPUTER SOFTWARE	COMPUTER EQUIPMENT COMPUTER ACCESSORIES	SOFTWARE DEVELOPMENT PRINTER	PRINTER SOFTWARE DEVELOPMENT	COMPUTER DONATIONS (13 systems) COMPUTER REFURB 18 systems)	COMPUTER EQUIPMENT COMPUTER EQUIPMENT	LABOR TO REPAIR NETWORK

Etalement 13

WOODCRAFT HANGERS 95 PROPERTY & DEPRECIATION

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WODDCRAFT RANGERS
PROPERTY & DEPRECATION
ANN 30 2002

NVICE ISBN LANGE LITTER SET 12 SET 1	Asset Description	Method	5	Date placed In service	Cest 6/30/01	Additions	Deletions	Cost 6/30/02	A/D @	Current year Depreciation	Deletions	A/D @ 6/30/02	Ending NBV	DEPRECIATION ALLOCATION CAMP OFFICE	DCATION OFFICE
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Form **8868** (December 2000)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545 1709

	are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ 🗓
-	are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this not complete Part II unless you have already been granted an automatic 3-month extension on a pi	•
Part I	Automatic 3-Month Extension of Time - Only submit original (no copies needed)	
All other o	rm 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file incor artnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 10	ne tax
Type or print	Name of Exempt Organization	Employer identification number
File by the due date for	WOODCRAFT RANGERS, INC. Number, street, and room or suite no. If a P.O. box, see instructions	95-1729319
filing your return See Instructions	2111 PARK GROVE AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOS ANGELES, CA 90007	
Check ty	pe of return to be filed (file a separate application for each return)	
For		727 1669
	_ · · · · · · · · · · · · · · · · · · ·	s is for the whole group, check this members the extension will cover
to fi	puest an automatic 3-month (6-month, for 990-T corporation) extension of time until <u>FEBRUARY</u> et the exempt organization return for the organization named above. The extension is for the organization calendar year or or, and ending	•= •
2 If th	s tax year is for less than 12 months, check reason Initial return Final return	Change in accounting period
	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any refundable credits. See instructions	\$
	s application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit.	\$
	ince Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with bon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	FTD \$ <u>N/A</u>
	Signature and Verification	
	ties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the rrect, and complete, and that I am authorized to prepare this form.	best of my knowledge and belief,
Signature]		Date > 18/31/201
IHA Fo	r Paperwork Reduction Act Notice, see Instruction	HORM RRGA (17-7000)