

Short Form

OMB No 1545-1150

Form **990-EZ**

**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)

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

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

**2002**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**A** For the 2002 calendar year, or tax year beginning 4/1, 2002, and ending 3/31, 2003

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

29 IB VO 16-1600224 200303  
 CHESTERTON HOUSE INC  
 KARL E JOHNSON  
 161 WHITETAIL DR  
 ITHACA NY 14850-9483 S59 P3

**D** Employer identification number 16 1600224  
**E** Telephone number (607) 272-4693  
**F** Enter 4-digit (GEN) ►

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

**G** Accounting method  Cash  Accrual  
 Other (specify) ►

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**I** Web site: N/A

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

**K** Check  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** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ ► \$

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 36 of the instructions)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	29,980
	2	Program service revenue including government fees and contracts	2	956
	3	Membership dues and assessments	3	
	4	Investment income	4	4
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5c	
	6	Special events and activities (attach schedule)		
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	6b	Less direct expenses other than fundraising expenses	6b	
	6c	Net income or (loss) from special events and activities (line 6a less line 6b)	6c	
	7a	Gross sales of inventory, less returns and allowances	7a	
	7b	Less cost of goods sold	7b	
	7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c	
	8	Other revenue (describe ► _____)	8	
	9	<b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	30,940
	Expenses	10	Grants and similar amounts paid (attach schedule)	10
11		Benefits paid to or for members	11	
12		Salaries, other compensation, and employee benefits	12	15,569
13		Professional fees and other payments to independent contractors	13	544
14		Occupancy, rent, utilities, and maintenance	14	6,000
15		Printing, publications, postage, and shipping	15	275
16		Other expenses (describe ► <u>BANK FEE, SUBSCRIPTIONS, DUES</u> )	16	555
17	<b>Total expenses</b> (add lines 10 through 16)	17	28,543	
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)	18	2396
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	0
	20	Other changes in net assets or fund balances (attach explanation) <u>partial year 2002</u>	20	2395
	21	<b>Net assets or fund balances at end of year</b> (combine lines 18 through 20)	21	4791

**Part II Balance Sheets**—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ

(See page 39 of the instructions)

	(A) Beginning of year	(B) End of year
22		5581
23		
24		
25		5581
26		789
27		4791

Part III Statement of Program Service Accomplishments (See page 39 of the instructions)		Expenses
What is the organization's primary exempt purpose? <i>Religious seminars + lending library</i>		(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)
Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title		
28	<i>Religious seminars + lectures</i>	28a 1,603
	(Grants \$ _____)	
29	<i>Purchase of books and subscriptions for lending library</i>	29a 3,367
	(Grants \$ _____)	
30		30a
	(Grants \$ _____)	
31	Other program services (attach schedule)	31a
	(Grants \$ _____)	
32	<b>Total program service expenses</b> (add lines 28a through 31a)	<b>32</b>

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated See page 40 of the instructions)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<i>Karl Johnson 601 Mitchell St Ithaca</i>	<i>Director 15 hours</i>	<i>14,545</i>	-	-

Part V Other Information (Note the attachment requirement in General Instruction V, page 14)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		X
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		X
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement)		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions		
b	Did the organization file Form 1120-POL for this year?		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved		
39	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9		
b	Gross receipts, included on line 9, for public use of club facilities		
40a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955		
b	501(c)(3) and (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 an explanation		X
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958		
d	Enter Amount of tax on line 40c, above, reimbursed by the organization		
41	List the states with which a copy of this return is filed		
42	The books are in care of <i>Illa Burbank</i> Telephone no <i>(607) 272-4643</i> Located at <i>161 Whitefall Dr. Ithaca, NY</i> ZIP + 4 <i>14850-9443</i>		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		

Including accompanying schedules and statements, and to the best of my knowledge (or that of the preparer, if the preparer is not the officer) is based on all information of which preparer has any knowledge

Date \_\_\_\_\_

**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

OMB No 1545-0047

**2002**

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

*Chesterfm House Inc.*

Employer identification number

*16 1600224*

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<i>None</i>				
Total number of other employees paid over \$50,000 ▶	<i>0</i>			

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<i>None</i>		
Total number of others receiving over \$50,000 for professional services ▶	<i>0</i>	

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

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
<b>2</b> 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.)		
<b>a</b> Sale, exchange, or leasing of property?		X
<b>b</b> Lending of money or other extension of credit?		X
<b>c</b> Furnishing of goods, services, or facilities?		X
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
<b>e</b> Transfer of any part of its income or assets?		X
<b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)		X
<b>4</b> Do you have a section 403(b) annuity plan for your employees?		X

*see Part II 990 EZ*

**Note** Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 5 of the instructions)

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

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

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

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

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

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

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

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)					
<b>16</b> Membership fees received					
<b>17</b> 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					
<b>18</b> 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					
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> 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.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
<b>23</b> Total of lines 15 through 22					
<b>24</b> Line 23 minus line 17					
<b>25</b> Enter 1% of line 23					

<b>26 Organizations described on lines 10 or 11:</b>	<b>a</b> Enter 2% of amount in column (e), line 24 ▶	<b>26a</b>	
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. <b>Do not file this list with your return.</b> Enter the total of all these excess amounts ▶		<b>26b</b>	
<b>c</b> Total support for section 509(a)(1) test. Enter line 24, column (e) ▶		<b>26c</b>	
<b>d</b> Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____ ▶		<b>26d</b>	
<b>e</b> Public support (line 26c minus line 26d total) ▶		<b>26e</b>	
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶		<b>26f</b>	

**27 Organizations described on line 12:** **a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2001) . . . . .	(2000) . . . . .	(1999) . . . . .	(1998) . . . . .
<b>b</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.) <b>Do not file this list with your return.</b> After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:			
(2001) . . . . .	(2000) . . . . .	(1999) . . . . .	(1998) . . . . .

<b>c</b> Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶	<b>27c</b>	
<b>d</b> Add: Line 27a total _____ and line 27b total _____ ▶	<b>27d</b>	
<b>e</b> Public support (line 27c total minus line 27d total) ▶	<b>27e</b>	
<b>f</b> Total support for section 509(a)(2) test. Enter amount from line 23, column (e) ▶ <b>27f</b>		
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	<b>27g</b>	
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	<b>27h</b>	

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

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

	Yes	No
<b>29</b> 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?		
<b>30</b> 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?		
<b>31</b> 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 )		
<b>32</b> Does the organization maintain the following		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?		
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		
<b>33</b> Does the organization discriminate by race in any way with respect to		
<b>a</b> Students' rights or privileges?		
<b>b</b> Admissions policies?		
<b>c</b> Employment of faculty or administrative staff?		
<b>d</b> Scholarships or other financial assistance?		
<b>e</b> Educational policies?		
<b>f</b> Use of facilities?		
<b>g</b> Athletic programs?		
<b>h</b> Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )		
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency?		
<b>b</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		
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

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

**Limits on Lobbying Expenditures**

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

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

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

**4-Year Averaging Period Under Section 501(h)**

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

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

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

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

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

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

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

Yes	No	Amount



07/17/03

**Chesterton House, Inc.**  
**Profit and Loss**  
 April 2002 through March 2003

	<u>Apr '02 - Mar '03</u>
<b>Ordinary Income/Expense</b>	
<b>Income</b>	
Capital Gains	0 00
Contributions Income	
Foundations	5,000 00
Individuals & Churches	<u>24,050 00</u>
<b>Total Contributions Income</b>	29,050 00
Investment Income	3 66
Organizational Contributions	930 00
Registration Fees	<u>956 00</u>
<b>Total Income</b>	30,939 66
<b>Expense</b>	
Acquisitions	
Books	3,046 59
Dues and Subscriptions	<u>320 90</u>
<b>Total Acquisitions</b>	3,367 49
Bank Service Charges	145 57
Communications	
Postage and Delivery	<u>311 23</u>
<b>Total Communications</b>	311 23 ✓
General/Misc. Expenses	
Facility Rental	<u>6,000 00</u>
<b>Total General/Misc. Expenses</b>	6,000 00 ✓
Office	
Office Supplies	15 11
Other Supplies	37 74
Printing and Reproduction	<u>28 46</u>
<b>Total Office</b>	81 31 ✓
Professional Fees	
Accounting	<u>543 74</u>
<b>Total Professional Fees</b>	543 74 ✓
Program Expense	
Facility Rental - Special	345 30
Honoraria	1,000 00
Miscellaneous	26 73
Travel	218 61
Program Expense - Other	<u>12 38</u>
<b>Total Program Expense</b>	1,603 02
Public Relations	
Advertising	412 80
Brochures & Fliers	439 02
Postage	<u>30 50</u>
<b>Total Public Relations</b>	882 32 ✓

07/17/03

**Chesterton House, Inc.**  
**Profit and Loss**  
**April 2002 through March 2003**

	<u>Apr '02 - Mar '03</u>
<b>Salaries</b>	
<b>Benefits</b>	1,024 65
<b>Professional</b>	<u>14,544 50</u>
<b>Total Salaries</b>	15,569 15 ✓
<b>Uncategorized</b>	<u>39 53</u>
<b>Total Expense</b>	<u>28,543 36</u>
<b>Net Ordinary Income</b>	<u>2,396 30</u>
<b>Net Income</b>	<u>2,396.30</u>

07/17/03

**Chesterton House, Inc.**  
**Balance Sheet**  
**As of March 31, 2003**

	<u>Mar 31, '03</u>
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Checking/Savings</b>	
Checking- General	5,579 57
Presbyterian Church In America	<u>1 01</u>
<b>Total Checking/Savings</b>	<u>5,580 58</u>
<b>Total Current Assets</b>	<u>5,580 58</u>
<b>TOTAL ASSETS</b>	<u><b>5,580.58</b></u>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
<b>Other Current Liabilities</b>	
Medicare Payable	142 08
NYS Payable	39 60
Social Security Payable	<u>607 62</u>
<b>Total Other Current Liabilities</b>	<u>789 30</u>
<b>Total Current Liabilities</b>	<u>789 30</u>
<b>Total Liabilities</b>	789 30
<b>Equity</b>	
Retained Earnings	2,394 98
Net Income	<u>2,396 30</u>
<b>Total Equity</b>	<u>4,791 28</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><b>5,580.58</b></u>

07/31/03

**Chesteron House, Inc.**  
**Income by Customer Detail**  
 April 2002 through March 2003

Type	Date	Num	Memo	Account	Clr	Split	Amount	Balance
<b>Baer, Richard</b>								
Deposit	07/22/02		Deposit	Individuals & Church		Checking-	1,000 00	1,000 00
Deposit	08/21/02		Deposit	Individuals & Church		Checking-	2,000 00	3,000 00
Deposit	01/24/03		Deposit	Individuals & Church		Checking-	5,000 00	8,000 00
Total Baer, Richard							8,000 00	8,000 00
<b>Bode, Jason</b>								
Deposit	10/01/02		Deposit	Individuals & Church		Checking-	300 00	300 00
Total Bode, Jason							300 00	300 00
<b>Cornell Christian Fellowship</b>								
Deposit	04/18/02		Deposit	Individuals & Church		Checking-	200 00	200 00
Total Cornell Christian Fellowship							200 00	200 00
<b>Fay, Robert</b>								
Deposit	10/30/02		Deposit	Individuals & Church		Checking-	3,000 00	3,000 00
Total Fay, Robert							3,000 00	3,000 00
<b>Fick, Gary &amp; Mae Ellen</b>								
Deposit	01/28/03		Deposit	Individuals & Church		Checking-	50 00	50 00
Total Fick, Gary & Mae Ellen							50 00	50 00
<b>Graduate Christian Forum</b>								
Deposit	09/15/02		Deposit	Organizational Contr		Checking-	480 00	480 00
Check	03/17/03	600		Honoraria		Checking-	-150 00	330 00
Total Graduate Chrstian Forum							330 00	330 00
<b>Haas Trust</b>								
Deposit	07/08/02		Deposit	Foundations		Checking-	5,000 00	5,000 00
Total Haas Trust							5,000 00	5,000 00
<b>Matler, Michael</b>								
Deposit	04/26/02		Deposit	Individuals & Church		Checking-	2,200 00	2,200 00
Total Mater, Michael							2,200 00	2,200 00
<b>Moriah, David &amp; Deborah</b>								
Deposit	01/24/03		Deposit	Individuals & Church		Checking-	100 00	100 00
Total Moriah, David & Deborah							100 00	100 00
<b>New Hope Presbyterian</b>								
Deposit	01/24/03		Deposit	Individuals & Church		Checking-	500 00	500 00
Total New Hope Presbyterenan							500 00	500 00
<b>New Life Presbyterian</b>								
Deposit	04/26/02		Deposit	Individuals & Church		Checking-	100 00	100 00
Deposit	06/10/02		Deposit	Individuals & Church		Checking-	100 00	200 00
Deposit	07/22/02		Deposit	Individuals & Church		Checking-	100 00	300 00
Deposit	08/21/02		Deposit	Individuals & Church		Checking-	100 00	400 00
Deposit	09/05/02		Deposit	Individuals & Church		Checking-	100 00	500 00
Deposit	09/15/02		Deposit	Individuals & Church		Checking-	100 00	600 00
Deposit	11/01/02		Deposit	Individuals & Church		Checking-	100 00	700 00
Deposit	11/15/02		Deposit	Individuals & Church		Checking-	100 00	800 00
Deposit	01/06/03		Deposit	Individuals & Church		Checking-	100 00	900 00
Deposit	01/29/03		Deposit	Individuals & Church		Checking-	100 00	1,000 00
Deposit	02/20/03		Deposit	Individuals & Church		Checking-	100 00	1,100 00
Deposit	03/26/03		Deposit	Individuals & Church		Checking-	100 00	1,200 00

**Chesterton House, Inc.**  
**Income by Customer Detail**  
 April 2002 through March 2003

07/31/03

<u>Type</u>	<u>Date</u>	<u>Num</u>	<u>Memo</u>	<u>Account</u>	<u>Clr</u>	<u>Split</u>	<u>Amount</u>	<u>Balance</u>
Total New Life Presbyterian							1,200 00	1,200 00
<b>PCA Foundation</b>								
Deposit	03/05/03		Deposit	Individuals & Church		Checking-	4,000 00	4,000 00
Total PCA Foundation							4,000 00	4,000 00
<b>Skillen, James</b>								
Deposit	11/15/02		Deposit	Organizational Contr		Checking-	100 00	100 00
Total Skillen, James							100 00	100 00
<b>Smith, Robert</b>								
Deposit	03/05/03		Deposit	Individuals & Church		Checking-	2,000 00	2,000 00
Total Smith, Robert							2,000 00	2,000 00
<b>Stump, Don &amp; Eleone</b>								
Deposit	05/17/02		Deposit	Organizational Contr		Checking-	160 00	160 00
Total Stump, Don & Eleone							160 00	160 00
<b>TOTAL</b>							<b>27,140 00</b>	<b>27,140 00</b>