

Return of Organization Exempt from Income Tax

2002

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning 7/01, 2002, and ending 6/30, 2003

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

GREATER MINNEAPOLIS CRISIS NURSERY
5400 GLENWOOD AVENUE
GOLDEN VALLEY, MN 55422

D Employer Identification Number: 41-1379021
E Telephone number: 763-591-0400
F Accounting method: Cash, Accrual (checked)

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? Yes, No (checked)
H (b) If Yes, enter number of affiliates
H (c) Are all affiliates included? Yes, No
H (d) Is this a separate return filed by an organization covered by a group ruling? Yes, No (checked)
I Enter 4 digit GEN
M Check if the organization is not required to attach Schedule B (Form 990, 990 EZ, or 990 PF)

G Web site: N/A

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

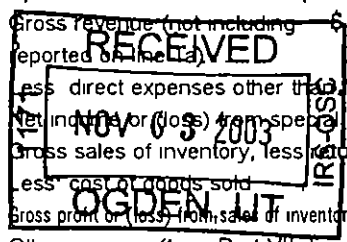
K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 2,242,287

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

Table with 21 rows and multiple columns for revenue and expenses. Includes sub-rows for contributions, program service revenue, membership dues, interest, dividends, gross rents, sales of assets, special events, inventory, and other revenue. Total revenue is 1,995,325 and total expenses is 2,459,361.

NOV 05 '03
SCANNED



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	92,700	46,350	37,080
26	Other salaries and wages	26	1,360,429	141,720	131,492
27	Pension plan contributions	27			
28	Other employee benefits	28	207,120	26,835	24,053
29	Payroll taxes	29	124,509	16,132	14,459
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	31,381	8,934	3,699
34	Telephone	34	5,920	355	237
35	Postage and shipping	35	18,883	1,342	16,359
36	Occupancy	36	47,756	2,865	1,910
37	Equipment rental and maintenance	37	22,334	1,340	893
38	Printing and publications	38	32,160	2,254	27,250
39	Travel	39	3,419	128	275
40	Conferences, conventions, and meetings	40			
41	Interest	41	3,962		
42	Depreciation, depletion, etc (attach schedule)	42	111,859	20,135	7,830
43	Other expenses not covered above (itemize)				
a	SEE STATEMENT 4	43a	396,929.	46,037	44,074
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	2,459,361	314,427	309,611

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 \$ 17,121, (ii) the amount allocated to program services \$ 1,712, (iii) the amount allocated to management and general \$ 2,568, and (iv) the amount allocated to fundraising \$ 12,841

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <input checked="" type="checkbox"/> SEE STATEMENT 5	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a SEE STATEMENT 6	
----- ----- ----- (Grants and allocations \$ _____)	1,835,323
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)	1,835,323

Part IV Balance Sheets (See Instructions)

Note <i>Where required attached schedules and amounts within the description column should be for end-of year amounts only</i>		(A) Beginning of year		(B) End of year	
A ASSETS	45 Cash -- non interest bearing	80,607.	45	116,101	
	46 Savings and temporary cash investments	10,340	46	1,240,405.	
	47 a Accounts receivable	47 a			
	b Less allowance for doubtful accounts	47 b		47 c	
	48 a Pledges receivable	48 a 242,427			
	b Less allowance for doubtful accounts	48 b 6,000	578,803	48 c	236,427
	49 Grants receivable		63,866.	49	66,117.
	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		43,407	53	57,298
	54 Investments -- securities (attach schedule) SEE ST 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		300,346	54	168,217.
	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	57 a 3,026,289.				
b Less accumulated depreciation (attach schedule) STATEMENT 8	57 b 497,806.	1,984,923	57 c	2,528,483	
58 Other assets (describe <input type="checkbox"/>)			58		
59 Total assets (add lines 45 through 58) (must equal line 74)		3,062,292.	59	4,413,048	
L I A B I L I T I E S	60 Accounts payable and accrued expenses	111,789	60	126,481	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64 a Tax exempt bond liabilities (attach schedule)		64 a		
	b Mortgages and other notes payable (attach schedule) SEE STATEMENT 9		64 b	1,800,000	
	65 Other liabilities (describe <input type="checkbox"/>)		65		
66 Total liabilities (add lines 60 through 65)		111,789	66	1,926,481	
N E T A S S E T S O R F U N D B A L A N C E S	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	2,375,196	67	2,209,065	
	68 Temporarily restricted	575,307	68	277,502	
	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, column (B) must equal line 21)	2,950,503	73	2,486,567	
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	3,062,292	74	4,413,048	

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

BAA

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

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

a Total revenue, gains, and other support per audited financial statements	a 2,108,773
b Amounts included on line a but not on line 12, Form 990	
(1) Net unrealized gains on investments \$ 100.	
(2) Donated services and use of facilities \$ 113,348.	
(3) Recoveries of prior year grants \$	
(4) Other (specify)	
----- \$	
Add amounts on lines (1) through (4)	b 113,448.
c Line a minus line b	c 1,995,325.
d Amounts included on line 12, Form 990 but not on line a	
(1) Investment expenses not included on line 6b, Form 990 \$	
(2) Other (specify)	
----- \$	
Add amounts on lines (1) and (2)	d
e Total revenue per line 12, Form 990 (line c plus line d)	e 1,995,325.

a Total expenses and losses per audited financial statements	a 2,572,709
b Amounts included on line a but not on line 17, Form 990	
(1) Donated services and use of facilities \$ 113,348	
(2) Prior year adjustments reported on line 20, Form 990 \$	
(3) Losses reported on line 20, Form 990 \$	
(4) Other (specify)	
----- \$	
Add amounts on lines (1) through (4)	b 113,348
c Line a minus line b	c 2,459,361
d Amounts included on line 17, Form 990 but not on line a	
(1) Investment expenses not included on line 6b, Form 990 \$	
(2) Other (specify)	
----- \$	
Add amounts on lines (1) and (2)	d
e Total expenses per line 17, Form 990 (line c plus line d)	e 2,459,361

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
DOUG CARTER 5400 GLENWOOD AVENUE GOLDEN VALLEY, MN 55422	EXECUTIVE DIREC 40 HOURS/WEEK	92,700	927.	0.
SEE ATTACHED BOARD LIST	NONE	0	0.	0

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

If 'Yes,' attach schedule - see instructions

Part VI Other Information (See instructions)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If Yes, attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?		X
80b	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
81b	Did the organization file Form 1120-POL for this year?		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?	X	
82b	If 'Yes,' you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	115,084.
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85a	501(c)(4) (5) or (6) organizations Were substantially all dues nondeductible by members?	N/A	
85b	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	N/A	
85c	Dues, assessments, and similar amounts from members	85c	N/A
85d	Section 162(e) lobbying and political expenditures	85d	N/A
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
85h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86a	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	N/A
86b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87a	501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A
87b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88	X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u> .		
89b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b	X
	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>MINNESOTA</u>		
90b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	71
91	The books are in care of <u>ORGANIZATION</u> Telephone number <u>763-591-0400</u> Located at <u>5400 GLENWOOD AVENUE, GOLDEN VALLEY, MN</u> ZIP + 4 <u>55422</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

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

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			14	1,058	
96 Dividends & interest from securities			14	12,686.	
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			18	-1,547	
101 Net income or (loss) from special events			1	38,930	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a _____					
b MISCELLANEOUS			1	25,647	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				76,774.	
105 Total (add line 104, columns (B), (D), and (E))					76,774.

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

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

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

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

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End of-year assets
N/A	0			
	0			
	0			

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.

Date 1-13-03

SCHEDULE A
(Form 990 or 990-EZ)

**Organization Exempt Under
Section 501(c)(3)**

OMB No 1545-0047

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

2002

Supplementary Information — (See separate instructions)

Department of the Treasury
Internal Revenue Service

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

Name of the organization

GREATER MINNEAPOLIS CRISIS NURSERY

Employer identification number

41-1379021

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions List each one If there are none, enter 'None')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
AL WILLIG ----- 5400 GLENWOOD AVE, GOLDEN VALLEY	FINANCE DIR 40 HRS/WEEK	57,787	578	0

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
<p>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></p> <p>(Must equal amounts on line 38, Part VI A, or line 1 of Part VI B)</p> <p>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</p>		X
<p>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)</p> <p>a Sale, exchange, or leasing of property?</p> <p>b Lending of money or other extension of credit?</p> <p>c Furnishing of goods, services, or facilities?</p> <p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p> <p>e Transfer of any part of its income or assets?</p>		X
		X
		X
		X
	X	
		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?	X	

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

Part IV Reason for Non-Private Foundation Status (See 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) 2001	(b) 11/01/01-6/30/01 2000	(c) 11/00-12/31/00 1999 2000	(d) 1998 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	2,058,340	1,415,515.	2,244,579.	2,881,350	8,599,784.
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	315,168.	4,702.	18,000.	14,700.	352,570
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	17,745	12,707.	38,037.	38,524.	107,013
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. SEE STMT 11	1,622	2,016	1,033	75	4,746
23 Total of lines 15 through 22	2,392,875.	1,434,940.	2,301,649	2,934,649.	9,064,113
24 Line 23 minus line 17	2,077,707	1,430,238	2,283,649.	2,919,949	8,711,543
25 Enter 1% of line 23	23,929.	14,349	23,016	29,346	

26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24	26a	174,231
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.		26b	25,769.
c Total support for section 509(a)(1) test. Enter line 24, column (e).		26c	8,711,543
d Add Amounts from column (e) for lines 18, 22, 19, 26b	107,013., 4,746., 25,769.	26d	137,528.
e Public support (line 26c minus line 26d total)		26e	8,574,015.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		26f	98.42 %

27 Organizations described on line 12	N/A
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year.	(2001) _____ (2000) _____ (1999) _____ (1998) _____
b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.	(2001) _____ (2000) _____ (1999) _____ (1998) _____
c Add Amounts from column (e) for lines 17, 20, 16, 21	27c _____
d Add Line 27a total and line 27b total	27d _____
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 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

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

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement) ----- ----- -----		
32 a	Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff?		
32 b	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
32 c	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
32 d	d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
33	Does the organization discriminate by race in any way with respect to		
33 a	a Students' rights or privileges?		
33 b	b Admissions policies?		
33 c	c Employment of faculty or administrative staff?		
33 d	d Scholarships or other financial assistance?		
33 e	e Educational policies?		
33 f	f Use of facilities?		
33 g	g Athletic programs?		
33 h	h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement) ----- ----- -----		
34 a	a Does the organization receive any financial aid or assistance from a governmental agency?		
34 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		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75 50, 1975 2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation		

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

N/A

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

Limits on Lobbying Expenditures

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

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount Enter the amount from the following table –		
If the amount on line 40 is –		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
The lobbying nontaxable amount is –		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36 Enter 0 if line 42 is more than line 36	43	
44 Subtract line 41 from line 38 Enter 0 if line 41 is more than line 38	44	
Caution If there is an amount on either line 43 or line 44 you must file Form 4720		

4-Year Averaging Period Under Section 501(h)

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

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

Part VI-B Lobbying Activity by Nonelecting Public Charities (See instructions)
(For reporting only by organizations that did not complete Part VI A)

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

STATEMENT 1
FORM 990, PART I, LINE 8
NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: 144,169
COST OR OTHER BASIS: 143,327.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ 842.

OTHER ASSETS

DESCRIPTION	VARIOUS EQUIPMENT
DATE ACQUIRED	VARIOUS
HOW ACQUIRED	PURCHASE
DATE SOLD	VARIOUS
TO WHOM SOLD	VARIOUS
GROSS SALES PRICE	0
COST OR OTHER BASIS	2,389.
DEPRECIATION	0

GAIN (LOSS) -2,389.

TOTAL GAIN (LOSS) OTHER ASSETS \$ -2,389.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$ -1,547

STATEMENT 2
FORM 990, PART I, LINE 9
NET INCOME (LOSS) FROM SPECIAL EVENTS

SPECIAL EVENTS	GROSS RECEIPTS	LESS CONTRI-BUTIONS	GROSS REVENUE	LESS DIRECT EXPENSES	NET INCOME (LOSS)
BEACH BALL EVENT	328,692.	206,169	122,523.	97,022	25,501
OTHER SPECIAL EVENT	17,653.	0	17,653.	4,224	13,429
TOTAL	\$ <u>346,345.</u>	\$ <u>206,169</u>	\$ <u>140,176.</u>	\$ <u>101,246.</u>	\$ <u>38,930</u>

STATEMENT 3
FORM 990, PART I, LINE 20
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED GAIN ON INVESTMENTS

TOTAL \$ 100.
\$ 100

GREATER MINNEAPOLIS CRISIS NURSERY

41-1379021

STATEMENT 4
FORM 990, PART II, LINE 43
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
BAD DEBT EXPENSE	6,000.			6,000.
CHILD CARE & PARENT PROGRAM	44,213.	44,213.		
CONTRACT SERVICES	142,013.	128,932.	4,334.	8,747
EXPANSION EXPENSE	72,676	53,557.	12,746.	6,373
FOOD SERVICE	28,702.	28,702.		
INSURANCE	20,790.	14,761.	3,950.	2,079.
MISCELLANEOUS	12,054	992	6,137	4,925
PROFESSIONAL FEES	16,805.	4,423	12,382	
PUBLIC RELATIONS	40,341.	20,988.	3,919.	15,434
STAFF EXPENSE	13,335	10,250	2,569	516.
TOTAL	\$ 396,929	\$ 306,818	\$ 46,037.	\$ 44,074.

STATEMENT 5
FORM 990, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

ASSISTS IN THE PREVENTION OF CHILD ABUSE AND NEGLECT.

STATEMENT 6
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS AND ALLOCATIONS	PROGRAM SERVICE EXPENSES
THE NURSERY ASSISTS IN THE PREVENTION OF CHILD ABUSE AND NEGLECT. CHILDREN ARE PLACED BY THEIR PARENTS AT THE NURSERY FOR UP TO 72 HOURS, WHILE THEIR PARENTS RECEIVE ASSISTANCE FROM THE NURSERY'S COUNSELORS AND OTHER COMMUNITY SERVICES TO ADDRESS STRESS AND PARENTING NEEDS. THE NURSERY IS CURRENTLY OPERATING ONE SITE IN THE MINNEAPOLIS AREA AND IS IN THE PROCESS OF ACQUIRING ANOTHER SITE.		1,835,323.
	\$ 0	\$ 1,835,323.

STATEMENT 7
FORM 990, PART IV, LINE 54
INVESTMENTS - SECURITIES

OTHER SECURITIES	VALUATION METHOD	AMOUNT
CERTIFICATES OF DEPOSIT	MARKET VALUE	\$ 146,942.
TOTAL		\$ 146,942.

STATEMENT 7 (CONTINUED)
FORM 990, PART IV, LINE 54
INVESTMENTS - SECURITIES

U S GOVERNMENT OBLIGATIONS	VALUATION METHOD	AMOUNT
GOVERNMENT BONDS	MARKET VALUE	\$ 21,275
	TOTAL	\$ 21,275
TOTAL INVESTMENTS - SECURITIES		<u>\$ 168,217</u>

STATEMENT 8
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC	BOOK VALUE
AUTOMOBILES / TRANSPORTATION EQUIPMENT	\$ 20,515	\$ 11,967	\$ 8,548.
MACHINERY AND EQUIPMENT	239,352	127,060	112,292.
BUILDINGS	2,546,422	358,779	2,187,643.
LAND	220,000		220,000
TOTAL	<u>\$ 3,026,289.</u>	<u>\$ 497,806</u>	<u>\$ 2,528,483.</u>

STATEMENT 9
FORM 990, PART IV, LINE 64B
MORTGAGES AND OTHER NOTES PAYABLE

OTHER NOTES PAYABLE

LENDER'S NAME	BREMER BANK	
REPAYMENT TERMS	\$11,354/MTH STARTING JULY 2003	
INTEREST RATE	4 40%	
SECURITY PROVIDED	ALL ASSETS OF THE ORGANIZATION	
ORIGINAL AMOUNT	1,800,000	
BALANCE DUE		\$ 1,800,000
		TOTAL <u>\$ 1,800,000</u>

STATEMENT 10
SCHEDULE A, PART IV-A, LINE 22
OTHER INCOME

DESCRIPTION	(A) 2001	(B) 2000	(C) 1999	(D) 1998	(E) TOTAL
MISCELLANEOUS	\$ 1,622.	\$ 2,016.	\$ 1,033	\$ 75.	\$ 4,746
TOTAL	<u>\$ 1,622</u>	<u>\$ 2,016</u>	<u>\$ 1,033.</u>	<u>\$ 75</u>	<u>\$ 4,746</u>

Greater Minneapolis Crisis Nursery
Form 990, Part II, Line 42
Depreciation Schedule
6/30/03

EIN #41-1379021

Asset	Beginning Accumulated Depreciation 6/30/2002	Expense	Disposals	Ending Accumulated Depreciation 6/30/2003
Automobiles/transportation equip	\$7,864	\$4,103		\$11,967
Machinery & Equipment	\$157,614	\$26,425	\$56,979	\$127,060
Buildings	\$277,448	\$81,331		\$358,779
Improvements	\$0			\$0
	\$442,926	\$111,859	\$56,979	\$497,806

**GREATER MINNEAPOLIS CRISIS NURSERY
LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES
FORM 990, PART V
6/30/2003**

EIN 41-1379021

Bill Beard
Ora Kaine
Jean Holloway
Robert Mattison
Blythe Brenden
Patty Murphy
Michael G Brogdon
Daniel Collins
Mel Dickstein
M J Hauser
Debra L Hurston
Diane L Kroupa
Kathleen Lenzmeier
Lockie B Markusen
Michael T Nilan
Sarah M Nuss
Octavio Portu, Jr
Peter M Reyes, Jr
Wiley Scott III
Carol Shaw
Linda Thompson
Brian J Warpinski
Ann Hart Wernz
Audrey Zibelman

**All members are voluntary and
receive no compensation,
benefits or allowances, except
as noted on Part V of the Form 990**

All board members can be reached through Greater Minneapolis Crisis Nursery, 5400 Glenwood Avenue,
Golden Valley, MN 55422