

**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)

**2003**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A For the 2003 calendar year**

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

Principal officer

93940 \*\*\*\*\*AUTO\*\*3-DIGIT 306  
ARTIST-BLACKSMITHS ASSOCIATION OF  
C/O TREASURER P 145 R  
PC BOX 816 B 21 S  
FARMINGTON GA 30638-0816

NC	D Employer identification number <b>58-1270027</b>
'suite	E Telephone number <b>907-262-9123</b>
	F Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

G Website: ▶ **www.abana.org**

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.

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

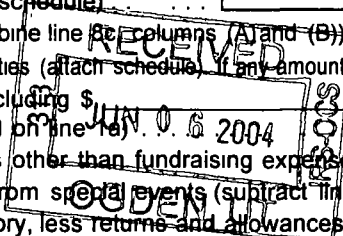
L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **291,924**

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

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 18 of the instructions.)

Revenue					
<b>1</b>	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a		<b>220</b>	
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)	1d		<b>220</b>	
<b>2</b>	Program service revenue including government fees and contracts (from Part VII, line 93)	2		<b>50,301</b>	
<b>3</b>	Membership dues and assessments	3		<b>221,215</b>	
<b>4</b>	Interest on savings and temporary cash investments	4		<b>1,316</b>	
<b>5</b>	Dividends and interest from securities	5		<b>4,442</b>	
<b>6a</b>	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
<b>7</b>	Other investment income (describe ▶ <b>NET UNREALIZED GAIN ON INVESTMENTS</b> )	7		<b>194</b>	
<b>8a</b>	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
		<b>877</b>			
b	Less: cost or other basis and sales expenses	8b			
c	Gain or (loss) (attach schedule)	8c			
d	Net gain or (loss) (combine line 8c columns (A) and (B))	8d		<b>877</b>	
<b>9</b>	Special events and activities (attach schedule. If any amount is from gaming, check here ▶ <input type="checkbox"/> )				
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
<b>10a</b>	Gross sales of inventory, less returns and allowances	10a		<b>12,926</b>	
b	Less: cost of goods sold	10b		<b>8,735</b>	
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		<b>4,191</b>	
<b>11</b>	Other revenue (from Part VII, line 103)	11		<b>433</b>	
<b>12</b>	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		<b>283,189</b>	
<b>Expenses</b>					
<b>13</b>	Program services (from line 44, column (B))	13		<b>202,510</b>	
<b>14</b>	Management and general (from line 44, column (C))	14		<b>116,941</b>	
<b>15</b>	Fundraising (from line 44, column (D))	15			
<b>16</b>	Payments to affiliates (attach schedule)	16			
<b>17</b>	Total expenses (add lines 16 and 44, column (A))	17		<b>319,451</b>	
<b>Net Assets</b>					
<b>18</b>	Excess or (deficit) for the year (subtract line 17 from line 12)	18		<b>(36,262)</b>	
<b>19</b>	Net assets or fund balances at beginning of year (from line 73, column (A))	19		<b>417,348</b>	
<b>20</b>	Other changes in net assets or fund balances (attach explanation)	20			
<b>21</b>	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		<b>381,086</b>	

ENVELOPE - JUN 02 2004  
POSTMARK DATE  
SCANNED JUN 28 2004



ZONE 4

**Part II Statement of Functional Expenses**

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 22 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	7,300	7,300		
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc . . . .				
26	Other salaries and wages . . . . .				
27	Pension plan contributions . . . . .				
28	Other employee benefits . . . . .				
29	Payroll taxes . . . . .				
30	Professional fundraising fees . . . . .				
31	Accounting fees . . . . .	4,431		4,431	
32	Legal fees . . . . .				
33	Supplies . . . . .	24,933		24,933	
34	Telephone . . . . .				
35	Postage and shipping . . . . .	5,215		5,215	
36	Occupancy . . . . .				
37	Equipment rental and maintenance . . . . .	1,156		1,156	
38	Printing and publications . . . . .	189,075	189,075		
39	Travel . . . . .	13,949		13,949	
40	Conferences, conventions, and meetings . . . . .	2,040		2,040	
41	Interest . . . . .				
42	Depreciation, depletion, etc. (attach schedule)	1,011		1,011	
43	Other expenses not covered above (itemize) a INSURANCE	4,151		4,151	
b	HEADQUARTER ADMINISTRATION	59,155		59,155	
c	INVESTMENT FEES	900		900	
d	MEMBER SERVICES	6,135	6,135		
e					
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	319,451	202,510	116,941	

Joint Costs. Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See page 25 of the instructions.)

What is the organization's primary exempt purpose? **SEE ATTACHED SHEET**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)
a PRODUCTION OF TRADE MAGAZINES -HAMMER'S BLOW AND ANVIL'S RING- PROVIDES MEMBERS WITH TECHNICAL SUPPORT AND EDUCATIONAL ARTICLES AND RESOURCE REFERENCES (Grants and allocations \$ _____)	189,075
b PROVIDES RENTAL OF AUDIO/VISUAL MATERIALS, INTERNET ACCESS AND LINKS, PROJECT PLANS AND EXAMPLES FOR THE EDUCATIONAL SUPPORT OF ASPIRING BLACKSMITHS (Grants and allocations \$ _____)	6,135
c GRANTS AND SCHOLARSHIPS TO ASSIST IN THE EDUCATION OF ASPIRING ARTISTIC AND TECHNICAL BLACKSMITHS (Grants and allocations \$ _____)	7,300
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	202,510

**Part IV Balance Sheets** (See page 25 of the instructions.)

<b>Note:</b> Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>45</b> Cash — non-interest-bearing .....	5,306	45	13,813
	<b>46</b> Savings and temporary cash investments .....	179,985	46	60,766
	<b>47a</b> Accounts receivable .....	47a		
	<b>b</b> Less: allowance for doubtful accounts .....	47b		47c
	<b>48a</b> Pledges receivable .....	48a		
	<b>b</b> Less: allowance for doubtful accounts .....	48b		48c
	<b>49</b> Grants receivable .....		49	
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule) .....		50	
	<b>51a</b> Other notes and loans receivable (attach schedule) .....	51a		
	<b>b</b> Less: allowance for doubtful accounts .....	51b		51c
	<b>52</b> Inventories for sale or use .....	117,820	52	112,181
	<b>53</b> Prepaid expenses and deferred charges .....		53	17,589
	<b>54</b> Investments — securities (attach schedule) .....	102,688	54	166,758
	<b>55a</b> Investments — land, buildings, and equipment: basis .....	55a		
	<b>b</b> Less: accumulated depreciation (attach schedule) .....	55b		55c
<b>56</b> Investments — other (attach schedule) .....		56		
<b>57a</b> Land, buildings, and equipment: basis .....	40,845	57a		
<b>b</b> Less: accumulated depreciation (attach schedule) .....	10,013	57b	57c	
<b>58</b> Other assets (describe ▶ _____)		58		
<b>59 Total assets</b> (add lines 45 through 58) (must equal line 74) .....	436,654	59	401,939	
<b>Liabilities</b>	<b>60</b> Accounts payable and accrued expenses .....		60	
	<b>61</b> Grants payable .....		61	
	<b>62</b> Deferred revenue .....	19,000	62	20,788
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) .....		63	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) .....		64a	
	<b>b</b> Mortgages and other notes payable (attach schedule) .....		64b	
	<b>65</b> Other liabilities (describe ▶ _____)	306	65	65
<b>66 Total liabilities</b> (add lines 60 through 65) .....	19,306	66	20,853	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 67 through 69 and lines 73 and 74.</b>			
	<b>67</b> Unrestricted .....	364,060	67	331,163
	<b>68</b> Temporarily restricted .....	27,733	68	21,776
	<b>69</b> Permanently restricted .....	25,555	69	28,147
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 70 through 74.</b>			
	<b>70</b> Capital stock, trust principal, or current funds .....		70	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund .....		71	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds .....		72	
	<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19; column (B) must equal line 21) .....	417,348	73	381,086
	<b>74 Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	436,654	74	401,939

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



Part VI Other Information (See page 28 of the instructions.)

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
77 Were any changes made in the organizing or governing documents but not reported to the IRS?
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78b 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?
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?
80b If "Yes," enter the name of the organization
81a Enter direct and indirect political expenditures. See line 81 instructions
81b Did the organization file Form 1120-POL for this year?
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
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.
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues, assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
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?
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders
87b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)
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?
89a 501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911; section 4912; section 4955
89b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
90a List the states with which a copy of this return is filed
90b Number of employees employed in the pay period that includes March 12, 2003
91 The books are in care of LAMBE TUTER & WAGNER, CPAs APC Telephone no. 907-262-9123 Located at 189 S BINKLEY ST, STE 201, SOLDOTNA, AK ZIP + 4 99669-8007
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year

**Part VII Analysis of Income-Producing Activities** (See page 33 of the 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	
<b>93</b> Program service revenue:					
<b>a</b> LIBRARY RENTAL					1,933
<b>b</b> ADVERTISING	511120	48,368			
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					221,215
<b>94</b> Membership dues and assessments					
<b>95</b> Interest on savings and temporary cash investments			14	1,316	
<b>96</b> Dividends and interest from securities			14	4,442	
<b>97</b> Net rental income or (loss) from real estate:					
<b>a</b> debt-financed property inventory					
<b>b</b> not debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income			18	194	
<b>100</b> Gain or (loss) from sales of assets other than inventory			18	877	
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory	453220	4,191			
<b>103</b> Other revenue: <b>a</b> MISCELLANEOUS					433
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))		52,559		6,829	223,581
<b>105</b> Total (add line 104, columns (B), (D), and (E))					282,969

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	PROVIDES MEMBERS WITH TECHNICAL AND AUDIO/VIDEO EDUCATIONAL MATERIALS
94	SUPPORTS MEMBER SERVICES AND PRINT RESOURCES
103	FUNDS RECEIVED INCIDENTAL TO CURRENT EXEMPT FUNCTIONS


**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions.)

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

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
  - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No
- Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please  Date June 2, 2004  
 Preparer for ABANA

**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.)

OMB No 1545-0047

**2003**

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

**ARTIST-BLACKSMITH'S ASSOC OF NORTH AMERICA INC**

Employer identification number

**58-1270027**

**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
<b>NONE</b>				
.....				
.....				
.....				
.....				
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.....				
.....				
.....				
.....				
Total number of other employees paid over \$50,000 . . . ▶		<b>NONE</b>		

**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
<b>CARRIE LEE ANN MITCHELL 1880 OLD SALEM RD WATKINSVILLE, GA 30677</b>	<b>ADMINISTRATION</b>	<b>62,655</b>
.....		
.....		
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.....		
Total number of others receiving over \$50,000 for professional services . . . ▶		<b>NONE</b>

<b>Part III Statements About Activities</b> (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 I 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.		<b>X</b>
<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? . . . . .	<b>2a</b>	<b>X</b>
<b>b</b>	Lending of money or other extension of credit? . . . . .	<b>2b</b>	<b>X</b>
<b>c</b>	Furnishing of goods, services, or facilities? . . . . .	<b>2c</b>	<b>X</b>
<b>d</b>	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . .	<b>2d</b>	<b>X</b>
<b>e</b>	Transfer of any part of its income or assets? . . . . .	<b>2e</b>	<b>X</b>
<b>3a</b>	Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments) . . . . .	<b>3a</b>	<b>X</b>
<b>b</b>	Do you have a section 403(b) annuity plan for your employees? . . . . .	<b>3b</b>	<b>X</b>
<b>4</b>	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? . . . . .	<b>4</b>	<b>X</b>

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions.)

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

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

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

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

- 14**  An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants See line 28) . . . . .	3,949	375	2,373	1,854	8,551
<b>16</b> Membership fees received . . . . .	214,097	203,720	223,440	197,492	838,749
<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 . . . . .	195,862	48,266	400,756	28,628	673,512
<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 . . . . .	4,348	14,359	49,022	14,510	82,239
<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 . . . . .		5,000			5,000
<b>23</b> Total of lines 15 through 22 . . . . .	418,256	271,720	675,591	242,484	1,608,051
<b>24</b> Line 23 minus line 17 . . . . .	222,394	223,454	274,835	213,856	934,539
<b>25</b> Enter 1% of line 23 . . . . .	4,183	2,717	6,756	2,425	

<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24 . . . . . ▶	<b>26a</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 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶	<b>26b</b>	
c Total support for section 509(a)(1) test Enter line 24, column (e) . . . . . ▶	<b>26c</b>	
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____ ▶	<b>26d</b>	
e Public support (line 26c minus line 26d total) . . . . . ▶	<b>26e</b>	
f 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:

(2002) \_\_\_\_\_ 0 (2001) \_\_\_\_\_ 0 (2000) \_\_\_\_\_ 0 (1999) \_\_\_\_\_ 0

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

(2002) \_\_\_\_\_ 0 (2001) \_\_\_\_\_ 0 (2000) \_\_\_\_\_ 0 (1999) \_\_\_\_\_ 0

<b>c</b> Add Amounts from column (e) for lines 15 <u>8,551</u> 16 <u>838,749</u> 17 <u>673,512</u> 20 _____ 21 _____ ▶	<b>27c</b>	1,520,812
<b>d</b> Add Line 27a total <u>0</u> and line 27b total _____ 0 ▶	<b>27d</b>	0
<b>e</b> Public support (line 27c total minus line 27d total) . . . . . ▶	<b>27e</b>	1,520,812
<b>f</b> Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶	<b>27f</b>	1,608,051
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	<b>27g</b>	94.57 %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	<b>27h</b>	5.11 %

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, 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

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred )			
<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 — If the amount on line 40 is —                      The lobbying nontaxable amount is — Not over \$500,000 . . . . .                      20% of the amount on line 40 . . . . . Over \$500,000 but not over \$1,000,000        \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000     \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000    \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 . . . . .                      \$1,000,000 . . . . .	<b>41</b>	
<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>	
<b>Caution:</b> 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) 2003	(b) 2002	(c) 2001	(d) 2000	(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 12 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	Yes	No	Amount
<b>a</b> Volunteers . . . . .		<b>X</b>	
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.)		<b>X</b>	
<b>c</b> Media advertisements . . . . .		<b>X</b>	
<b>d</b> Mailings to members, legislators, or the public . . . . .		<b>X</b>	
<b>e</b> Publications, or published or broadcast statements . . . . .		<b>X</b>	
<b>f</b> Grants to other organizations for lobbying purposes . . . . .		<b>X</b>	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .		<b>X</b>	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .		<b>X</b>	
<b>i</b> 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.			



NAME: ARTIST-BLACKSMITH'S ASSOCIATION OF NORTH AMERICA, INC.  
 ID NO: 58-1270027  
 YEAR ENDED: DECEMBER 31, 2003

SCHEDULE SUPPORTING FORM 990

PAGE 1, PART I, LINE 8d - GAINS FROM NON-INVENTORY SALES

SECURITIES	DATE ACQUIRED	DATE SOLD	GROSS SALES PRICE	COST OR OTHER BASIS	LONG-TERM GAIN/LOSS
<b>LONG-TERM CAPITAL GAINS (LOSSES)</b>					
31.674 5th 3rd MICRO CAP VALUE	1/2/2002	9/2/2003	280.32	190.68	89.64
35000 FEDERAL NATL MTGE ASSOC	7/11/2002	10/6/2003	35453.90	35000.00	453.90
25000 FEDERAL NATL MTGE ASSN	5/25/2001	6/5/2003	25000.00	25000.00	0.00
LONG-TERM CAPITAL GAIN FROM COMMON TRUST FUNDS	VARIOUS	VARIOUS			215.00
LONG-TERM CAPITAL GAIN DIVIDENDS:					
5th 3rd MICRO CAP VALUE FUND					17.48
PIMCO TOTAL RETRUN FUND CL-1 #35					21.41
<b>TOTAL LONG-TERM CAPITAL GAINS (LOSSES) (RND)</b>					<b>798.00</b>
<b>SHORT-TERM CAPITAL GAINS (LOSSES)</b>					
20 223 5th 3rd QUALITY GROWTH	10/1/2002	9/2/2003	302.75	240.06	62.69
25 337 5th 3rd BOND FUND FOR	12/2/2002	1/2/2003	256.92	254.64	2.28
22 864 5th 3RD MID CAP FUND	10/1/2002	7/1/2003	266.37	219.95	46.42
.701 5th 3rd MICRO CAP VALUE FUND	12/5/2002	9/2/2003	6.20	4.29	1.91
12.672 5th 3rd VALUE FUND	1/2/2003	8/1/2003	324.15	288.66	35.49
SHORT-TERM CAPITAL LOSS FROM COMMON TRUST FUNDS	VARIOUS	VARIOUS			-70.00
<b>TOTAL SHORT-TERM GAINS (LOSSES) FROM SECURITIES (RND)</b>					<b>79.00</b>
<b>NET GAIN (LOSS)</b>					<b>\$877.00</b>

NAME: ARTIST-BLACKSMITH'S ASSOCIATION OF NORTH AMERICA, INC.  
ID NO: 58-1270027  
YEAR ENDED: DECEMBER 31, 2003

SCHEDULE SUPPORTING FORM 990 (CONT.)

PAGE 1, LINE 10c - GROSS PROFIT FROM INVENTORY SALES

GROSS SALES - MERCHANDISE AND CD'S	\$12,926
LESS: COST OF GOODS SOLD	<u>(8,735)</u>
	<u>\$ 4,191</u>

PAGE 2, PART II, LINE 22 - GRANTS AND ALLOCATIONS

<u>CLASSIFICATION</u>	<u>NAME</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
EDUCATIONAL	PAUL GARRET	NONE	\$ 400
EDUCATIONAL	LOUIE RAFFLDER	NONE	400
EDUCATIONAL	EDWARD ENGARTO	NONE	400
EDUCATIONAL	DOUG LEARN	NONE	400
EDUCATIONAL	JON LUSTIG	NONE	1,500
DONATION	ONTERIO BLACKSMITH ASSN	NONE	600
DONATION	UMBA	NONE	600
DONATION	KENTUCKY MUSEUM OF ARTS AND DESIGN	NONE	2,000
DONATION	NATIONAL ORNAMENTAL METAL MUSEUM	NONE	<u>1,000</u>
			<u>\$ 7,300</u>

PAGE 2, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE ORGANIZATION'S PURPOSE IS TO MAINTAIN AND IMPROVE COMMUNICATIONS AMONG BLACKSMITHS, TO ENCOURAGE HIGHER STANDARDS OF CRAFTSMANSHIP, TO ENCOURAGE AND FACILITATE TRAINING PROGRAMS AND TO PROVIDE PUBLIC AWARENESS OF THE ART OF BLACKSMITHING.

NAME: ARTIST-BLACKSMITH'S ASSOCIATION OF NORTH AMERICA, INC.  
 ID NO: 58-1270027  
 YEAR ENDED: DECEMBER 31, 2003

SCHEDULE SUPPORTING FORM 990 (CONT.)

PAGE 3, PART IV, LINE 54 - INVESTMENTS

ASSETS HELD IN ENDOWMENT ACCOUNT - FIFTH/THIRD BANK	
MONEY MARKET AND CASH	\$ 1,379
BONDS AND BOND FUNDS	14,821
EQUITY FUNDS	11,947
GOVERNMENT SECURITIES - MERRILL LYNCH	<u>138,611</u>
	<u>\$166,758</u>

PAGE 3, LINE 57(a) - FIXED ASSETS

<u>DESCRIPTION</u>	<u>PLACE IN SERVICE</u>	<u>COST</u>	<u>USEFUL LIFE</u>	<u>METHOD</u>	<u>ACCUM. DEPR.</u>
OTHER EQUIPMENT	VARIOUS	\$27,505	VARIOUS	-	\$ -
SEA CONTAINERS	8/1/00	3,000	7 YRS	HY SL	1,499
SOUND SYSTEM	8/1/00	1,650	7 YRS	HY SL	825
EQUIPMENT	11/1/92	6,500	10 YRS	HY SL	6,500
SCANNER	9/15/99	1,203	5 YRS	HY SL	1,083
OFFICE EQUIPMENT	4/11/03	<u>987</u>			<u>106</u>
		<u>\$40,845</u>			<u>\$10,013</u>

NAME: ARTIST-BLACKSMITH'S ASSOCIATION OF NORTH AMERICA, INC.  
 ID NO: 58-1270027  
 YEAR ENDED: DECEMBER 31, 2003

SCHEDULE SUPPORTING FORM 990 (CONT.)

PAGE 4, PART V - LIST OF OFFICERS AND DIRECTORS

<u>(A)</u>	<u>(B)</u>	<u>(C)</u>	<u>(D)</u>	<u>(E)</u>
MAEGAN CROWLEY LAYTON, NJ 07851	DIRECTOR 2	0	0	0
DON KEMPER RIDGEFIELD, WA 98642	DIRECTOR 2	0	0	0
DAVE KOENIG HOUSTON, TX 77095-2649	DIRECTOR 2	0	0	0
WILL HIGHTOWER STERLING, AK 99672	TREASURER 4	0	0	0
SCOTT LANKTON ANN ARBOR, MI 48103	PRESIDENT 4	0	0	0
DAN NAUMAN KEWASKUM, WI 53040	DIRECTOR 2	0	0	0
DAVID MUDGE BOGALUSA, LA 70427-0187	DIRECTOR 2	0	0	0
TIM RYAN BRASSTOWN, NC 28902	DIRECTOR 2	0	0	0
BOB JACOBY JACKSONVILLE, FL 32223	DIRECTOR 2	0	0	0
JERRY KAGELE SPOKANE, WA 99203	SECRETARY 4	0	0	0
MURRAY LOWE CAYUGA, ONTARIO NOA-1E0 CANADA	DIRECTOR 2	0	0	0
DOROTHY STIEGLER SUTTER CREEK, CA 95685	2 <sup>ND</sup> VP 4	0	0	0
CLARE YELLIN BRYN MAWR, PA 19010	DIRECTOR 2	0	0	0
CHRIS WINTERSTEIN PENLAND, NC 28765	1 <sup>ST</sup> VP 4	0	0	0
BOB FREDELL ZIMMERMAN, MN 55398	DIRECTOR 2	0	0	0

NAME: ARTIST-BLACKSMITH'S ASSOCIATION OF NORTH AMERICA INC.  
ID NO: 58-1270027  
YEAR ENDED: DECEMBER 31, 2003

SCHEDULE SUPPORTING FORM 990  
SCHEDULE A

PAGE 2, PART III, LINE 2(d) - PAYMENT OF COMPENSATION

PAYMENTS OF MISCELLANEOUS OFFICE EXPENSES OR REIMBURSEMENTS FOR TRAVEL AND CONFERENCE EXPENSES ARE MADE DURING THE YEAR AS INCURRED AND SUBMITTED BY BOARD MEMBERS.

PAGE 2, PART III, LINE 3 - GRANTS AND SCHOLARSHIPS

ANY CHARITABLE CONTRIBUTIONS, GRANTS AND SCHOLARSHIPS ARE MADE ONLY AFTER COMMITTEE INVESTIGATION TO DETERMINE THAT THE RECIPIENT QUALIFIES PER IRC SECTION 170(c)(1) AND (2) AND MEETS THE QUALIFICATIONS OUTLINED IN THE ORGANIZATION'S BYLAWS.

PAGE 3, PART IVA, LINE 22 - OTHER INCOME

2001

PRINTING REIMBURSEMENT \$ 5,000

Form **8868**

(December 2000)

Department of the Treasury  
Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  **X**
  - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time** — Only submit original (no copies needed)  
**Note: Form 990-T corporations requesting an automatic 6-month extension** — check this box and complete Part I only . . . .   
 All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print  File by the due date for filing your return See instructions	Name of Exempt Organization <b>ARTIST BLACKSMITHS ASSOCIATION OF NORTH AMERICA</b>	Employer identification number <b>58-1270027</b>
	Number, street, and room or suite no. If a P O box, see instructions. <b>C/O LTW, 189 S. BINKLEY ST, STE 201</b>	
	City, town or post office, state, and ZIP code For a foreign address, see instructions <b>SOLDOTNA AK 99669</b>	

**Check type of return to be filed** (file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the **whole** group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until **AUGUST 16**, 20 **04**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year 20 **03** or  
 ▶  tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_.

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions . . . . . \$ **0**

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit . . . . . \$ \_\_\_\_\_

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions . . . . . \$ **0**

### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ *Jamie M. Suter* Title ▶ **CPA** Date ▶ **5/17/2004**

For Paperwork Reduction Act Notice, see Instruction

Form **8868** (12-2000)