

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 2003 calendar year, or tax year beginning 2003, and ending

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

Please use IRS label or print or type See specific instructions.

Christian Community Service Center, Inc. 3230 Mercer Houston, TX 77027

D Employer Identification Number

74-2128141

E Telephone number

713-961-3993

F Accounting method:

Cash [] Accrual [X]

Other (specify)

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

H and I are not applicable to section 527 organizations

H (a) Is this a group return for affiliates? Yes [] No [X]

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 [X]

G Web site: www.ccschouston.com

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

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

I Group Exemption Number

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

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: 1,461,119.

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

Table with 20 rows (1-20) and columns for descriptions, sub-rows (a-c), and totals. Includes revenue from contributions, program services, membership dues, interest, dividends, gross rents, other investment income, special events, and fundraising. Total revenue is 1,444,467.

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) St. 3	23	521,299.	521,299.	
24	Benefits paid to or for members (att sch)	24			
25	Compensation of officers, directors, etc	25	65,208.	32,604.	22,823.
26	Other salaries and wages	26	313,904.	232,029.	52,821.
27	Pension plan contributions	27	12,210.	8,482.	1,895.
28	Other employee benefits	28	29,270.	25,633.	1,233.
29	Payroll taxes	29	29,002.	20,244.	5,787.
30	Professional fundraising fees	30			
31	Accounting fees	31	10,900.		10,900.
32	Legal fees	32			
33	Supplies	33	13,334.	10,239.	1,800.
34	Telephone	34	15,531.	15,094.	437.
35	Postage and shipping	35	23,900.	11,517.	3,244.
36	Occupancy	36	122,192.	120,984.	1,208.
37	Equipment rental and maintenance	37	28,225.	26,456.	1,769.
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42	33,323.	24,848.	8,475.
43	Other expenses not covered above (itemize)				
a	See Statement 4	43a	79,840.	72,433.	6,469.
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	1,298,138.	1,121,862.	118,861.

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

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

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <input type="checkbox"/> Provide services to needy people	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a See Statement 5 ----- ----- (Grants and allocations \$ _____)	1,121,862.
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)	1,121,862.

Part IV Balance Sheets (See Instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash — non-interest-bearing	435.	45	835.
	46 Savings and temporary cash investments	690,432.	46	716,826.
	47 a Accounts receivable	47 a 3,709.		
	b Less. allowance for doubtful accounts	47 b	35,166.	47 c 3,709.
	48 a Pledges receivable	48 a 107,400.		
	b Less. allowance for doubtful accounts	48 b	31,333.	48 c 107,400.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51 a Other notes & loans receivable (attach sch)	51 a		
	b Less. allowance for doubtful accounts	51 b		51 c
	52 Inventories for sale or use		35,618.	52 39,706.
	53 Prepaid expenses and deferred charges		3,850.	53 18,095.
	54 Investments — securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54
	55 a Investments — land, buildings, & equipment: basis	55 a		
b Less. accumulated depreciation (attach schedule)	55 b		55 c	
56 Investments — other (attach schedule)			56	
57 a Land, buildings, and equipment: basis	57 a 1,007,029.			
b Less. accumulated depreciation (attach schedule) Statement 6	57 b 291,673.	699,410.	57 c 715,356.	
58 Other assets (describe ▶)			58	
59 Total assets (add lines 45 through 58) (must equal line 74)		1,496,244.	59 1,601,927.	
LIABILITIES	60 Accounts payable and accrued expenses	45,676.	60	5,030.
	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)		64 b	
	65 Other liabilities (describe ▶)		65	
66 Total liabilities (add lines 60 through 65)		45,676.	66 5,030.	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	1,141,413.	67	1,389,190.
	68 Temporarily restricted	243,417.	68	134,086.
	69 Permanently restricted	65,738.	69	73,621.
	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)	1,450,568.	73	1,596,897.
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	1,496,244.	74	1,601,927.

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

BAA

Part VI Other Information (See 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	
81a	If 'Yes,' enter the name of the organization ▶ <u>CCSC Memorial Endowment</u> and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.			
81a	Enter direct and 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		
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. a 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?			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?			N/A
86a	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a		N/A
86b	b 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	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b		N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX			X
89a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under section 4911 ▶ 0., section 4912 ▶ 0., section 4955 ▶ 0.			
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			X
89c	Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0.
89d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90a	List the states with which a copy of this return is filed ▶ <u>None</u>			
90b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.)	90b		13
91	The books are in care of ▶ <u>Michelle Shonbeck</u> Telephone number ▶ <u>713-961-3993</u> Located at ▶ <u>3230 Mercer, Houston, TX</u> ZIP + 4 ▶ <u>77027</u>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92			N/A

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

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: Christian Community Service Center, Inc. Employer identification number: 74-2128141

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
None				
Total number of other employees paid over \$50,000	0			

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

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

Part III Statements About Activities (See instructions.)

	Yes	No
<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 i 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>		X
<p>b Lending of money or other extension of credit?</p>		X
<p>c Furnishing of goods, services, or facilities?</p>		X
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p> <p style="text-align: center;">See Form 990, Part V</p>	X	
<p>e Transfer of any part of its income or assets?</p>		X
<p>3a 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.)</p>		X
<p>b Do you have a section 403(b) annuity plan for your employees?</p>		X
<p>4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?</p>		X

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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,089,837.	925,206.	689,291.	612,841.	3,317,175.
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	268,029.	343,925.	387,971.	359,465.	1,359,390.
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	8,401.	19,548.	17,973.	11,131.	57,053.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	1,366,267.	1,288,679.	1,095,235.	983,437.	4,733,618.
24 Line 23 minus line 17	1,098,238.	944,754.	707,264.	623,972.	3,374,228.
25 Enter 1% of line 23	13,663.	12,887.	10,952.	9,834.	
26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24				26a 67,485.
	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				26b 291,639.
	c Total support for section 509(a)(1) test. Enter line 24, column (e)				26c 3,374,228.
	d Add. Amounts from column (e) for lines:	18 57,053.	19	26b 291,639.	26d 348,692.
		22			26e 3,025,536.
	e Public support (line 26c minus line 26d total)				26e 3,025,536.
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f 89.67 %
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:				
	(2002)	(2001)	(2000)	(1999)	
	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)	(2001)	(2000)	(1999)	
	c Add. Amounts from column (e) for lines:	15	16		27c
		17	20	21	27d
	d Add. Line 27a total	and line 27b total.			27e
	e Public support (line 27c total minus line 27d total)				27e
	f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)				27f
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g %
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h %
28 Unusual Grants:	For an organization described in line 10, 11, or 12 that received any unusual grants during 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 instructions.)
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		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	Does the organization maintain the following:			
32a	a Records indicating the racial composition of the student body, faculty, and administrative staff?			
32b	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?			
32c	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?			
32d	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:			
33a	a Students' rights or privileges?			
33b	b Admissions policies?			
33c	c Employment of faculty or administrative staff?			
33d	d Scholarships or other financial assistance?			
33e	e Educational policies?			
33f	f Use of facilities?			
33g	g Athletic programs?			
33h	h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----			
34a	Does the organization receive any financial aid or assistance from a governmental agency?			
34b	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	41	
\$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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots non-taxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B. Lobbying Activity by Nonelecting Public Charities (See instructions.)
 (For reporting only by organizations that did not complete Part VI-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
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0.

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

Christian Community Service Center, Inc.

74-2128141

Statement 1
Form 990, Part I, Line 9
Net Income (Loss) from Special Events

<u>Special Events</u>	<u>Gross Receipts</u>	<u>Less Contri- butions</u>	<u>Gross Revenue</u>	<u>Less Direct Expenses</u>	<u>Net Income (Loss)</u>
Azalea Dinner	47,932.	18,874.	29,058.	16,652.	12,406.
Total	<u>\$ 47,932.</u>	<u>\$ 18,874.</u>	<u>\$ 29,058.</u>	<u>\$ 16,652.</u>	<u>\$ 12,406.</u>

Statement 2
Form 990, Part I, Line 10
Gross Profit (Loss) From Sales Of Inventory

Sunshine Resale Shops	\$ 321,739.
Gross Sales	<u>\$ 321,739.</u>
Less Returns & Allowances	<u>0.</u>
Net Sales	<u>\$ 321,739.</u>
Less Cost Of Goods Sold	<u>0.</u>
Gross Profit From Sales Of Inventory	<u>\$ 321,739.</u>

Statement 3
Form 990, Part II, Line 23
Specific Assistance to Individuals

Clothing	\$ 118,041.
Food	130,055.
Other direct assistance	26,539.
Rent & Utilities	85,561.
Supplies, books, toys	161,103.
Total	<u>\$ 521,299.</u>

Statement 4
Form 990, Part II, Line 43
Other Expenses

	(A) <u>Total</u>	(B) <u>Program Services</u>	(C) <u>Management & General</u>	(D) <u>Fundraising</u>
Bad debt	3,984.	3,984.		
Fees and licenses	10,326.	6,663.	2,952.	711.
Insurance	32,490.	29,843.	2,529.	118.
Miscellaneous	2,468.	1,607.	784.	77.
Professional services	26,494.	26,391.	103.	
Transportation	4,078.	3,945.	101.	32.
Total	<u>\$ 79,840.</u>	<u>\$ 72,433.</u>	<u>\$ 6,469.</u>	<u>\$ 938.</u>

Christian Community Service Center, Inc.

74-2128141

Statement 5
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
Emergency services - Provided food, clothing, and financial help to 21,151 people in crisis.		264,094.
Sunshine Resale Shop - Recycled donated articles for sale back to the community through discount prices. Proceeds benefit CCSC's other programs.		203,361.
Operation Sunshine Meals - Delivered 33,745 meals to the homebound. Meals are delivered by unpaid volunteers and are free to those unable to pay. Those in greatest need were provided with weekend grocery delivery and house cleaning.		186,493.
Visioncare - Provided vision screening for 711 underprivileged children, and paid for comprehensive professional exams and/or new glasses for 208 of these students.		31,323.
Back to School/Childcare - Provided school supplies, clothing and shoes to 4,059 elementary and middle school children in need.		312,448.
Jingle Bell Express - Gave toys, books and food to 3,059 children at Christmas. Over 900 families received holiday food packets.		33,197.
Jobnet: Provided training, coaching, and access to office equipment for 772 clients - helping them conduct a more effective job search. 52% found employment, with 31% of them working to potential. Martha's Way taught clients how to become business owners in the field of domestic housekeeping, where 56 clients participated, 37 clients graduated, and 42 business contacts were garnered.		90,946.
	<u>\$ 0.</u>	<u>\$ 1,121,862.</u>

Statement 6
Form 990, Part IV, Line 57
Land, Buildings, and Equipment

Category	Basis	Accum. Deprec.	Book Value
Automobiles / Transportation Equipment	\$ 43,614.	\$ 43,614.	\$ 0.
Machinery and Equipment	111,260.	75,301.	35,959.
Buildings	629,632.	166,839.	462,793.
Improvements	42,923.	5,919.	37,004.
Land	179,600.		179,600.
Total	<u>\$ 1,007,029.</u>	<u>\$ 291,673.</u>	<u>\$ 715,356.</u>

Christian Community Service Center, Inc.

74-2128141

Statement 7
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Michelle Shonbeck 3230 Mercer Houston, TX 77027	Executive Direc 40	\$ 65,208.	\$ 3,260.	\$ 0.
Gene Shepherd 3230 Mercer Houston, TX 77027	Past President 1	0.	0.	0.
Paul Layne 3230 Mercer Houston, TX 77027	Vice President 1	0.	0.	0.
Nancy Cook 3230 Mercer Houston, TX 77027	President 1	0.	0.	0.
David Elledge 3230 Mercer Houston, TX 77027	President-Elect 1	0.	0.	0.
Judy Agee 3230 Mercer Houston, TX 77027	Treasurer 1	0.	0.	0.
Carol Banks 3230 Mercer Houston, TX 77027	Secretary 1	0.	0.	0.
Dee Coats 3230 Mercer Houston, TX 77027	Director 1	0.	0.	0.
Rev. Jim McNaull 3230 Mercer Houston, TX 77027	Director 1	0.	0.	0.
Mary Morrison 3230 Mercer Houston, TX 77027	Director 1	0.	0.	0.
Kathy Palmer 3230 Mercer Houston, TX 77027	Director 1	0.	0.	0.
Bill Pribyl 3230 Mercer Houston, TX 77027	Director 1	0.	0.	0.
Total		\$ 65,208.	\$ 3,260.	\$ 0.

Christian Community Service Center, Inc.

74-2128141

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal Depr.	Salvage /Basis Reductn.	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Dept.
Form 990/990-PF																
Auto / Transport Equipment																
4	Vehicles	Various		43,614							43,614	43,614	S/L	5		0
Total Auto / Transport Equipment																
Buildings																
2	Buildings	Various		622,072							622,072	149,441	S/L	40		17,398
6	Buildings-2003	1/01/03		7,560							7,560		S/L	10		0
Total Buildings																
Improvements																
5	Leasehold improvements	Various		2,029							2,029		S/L	10		0
8	Leasehold improvements	1/01/03		40,894							40,894		S/L	10		5,919
Total Improvements																
Land																
1	Land	Various		179,600							179,600		S/L			0
Total Land																
Machinery and Equipment																
3	Equipment	Various		110,445							110,445	65,295	S/L	10		10,006
7	Equipment-2003	1/01/03		815							815		S/L	5		0
Total Machinery and Equipment																

111,260 0 0 0 0 0 111,260 65,295 10,006

Christian Community Service Center, Inc.

74-2128141

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Ect	Cur 179 Bonus	Special Depr Allow	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductn.	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
	Total Depreciaton			<u>1,007,029</u>		<u>0</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>1,007,029</u>	<u>258,350</u>				<u>33,323</u>
	Grand Total Depreciaton			<u>1,007,029</u>		<u>0</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>1,007,029</u>	<u>258,350</u>				<u>33,323</u>

Application for Extension of Time to File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ 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.
- 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 Christian Community Service Center Memorial Endowment	Employer identification number 76-0577189
	Number, street, and room or suite number. If a P O box, see instructions. 3230 Mercer	
	City, town or post office. For a foreign address, see instructions. Houston, TX 77027	

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

- | | | |
|---|--|------------------------------------|
| <input 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 (Section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input checked="" 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 8/15, 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

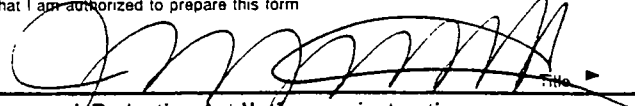
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ _____ 0.

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. \$ _____ 0.

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 return, 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 ▶  Title ▶ CPA Date ▶ 5/14/04

BAA For Paperwork Reduction Act Notice, see instructions.

Form 8868 (12-2000)