

Return of Organization Exempt From Income Tax

2002

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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 07/01, 2002, and ending 06/30/2003

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: BOYS AND GIRLS CLUB OF THE EAST VALLEY. D Employer identification number: 86-0550646. E Telephone number: (480) 820-3688. F Accounting method: Cash [ ], Accrual [X].

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

G Web site: WWW.CLUBZONA.ORG

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.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 8,287,167.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

Table with 21 rows and 4 columns. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 10a Gross sales of inventory, less returns and allowances; 10b Less cost of goods sold; 10c Gross profit or (loss) from sales of inventory; 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

MAR 15 2004

Net Assets

STMT 1 STMT 2 STMT 3 STMT 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 21 of the instructions)

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include 22 Grants and allocations, 23 Specific assistance to individuals, 24 Benefits paid to or for members, 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, 32 Legal fees, 33 Supplies, 34 Telephone, 35 Postage and shipping, 36 Occupancy, 37 Equipment rental and maintenance, 38 Printing and publications, 39 Travel, 40 Conferences, conventions, and meetings, 41 Interest, 42 Depreciation, depletion, etc, 43 Other expenses not covered above, 44 Total functional expenses.

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 [X] 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 24 of the instructions.)

What is the organization's primary exempt purpose? STMT 7

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)

Table with 2 columns: Description of program service, Program Service Expenses. Rows include a YOUTH PROGRAMS-SOCIALIZATION, RECREATION, DRUG AND ALCOHOL ABUSE PREVENTION, APPROXIMATELY 11,000 SERVED; b CHARTER SCHOOL-PROVIDES FORMAL INSTRUCTION FOR YOUTH, APPROXIMATELY 200 SERVED; c; d; e Other program services; f Total of Program Service Expenses (should equal line 44, column (B), Program services) 5,201,281.

**Part IV Balance Sheets** (See page 24 of the 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	43,532.	45	120,337.
	46 Savings and temporary cash investments	524,128.	46	156,239.
	47a Accounts receivable	47a 267,971.		
	b Less allowance for doubtful accounts	47b	20,765.	47c 267,971.
	48a Pledges receivable	48a 1,160,249.		
	b Less allowance for doubtful accounts	48b 47,000.	1,648,585.	48c 1,113,249.
	49 Grants receivable		243,139.	49 32,750.
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50
	51a Other notes and loans receivable (attach schedule)	STMT 8, 51a 149,400.		
	b Less: allowance for doubtful accounts	51b	387,987.	51c 149,400.
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges		258,558.	53 111,206.
	54 Investments - securities (attach schedule) STMT 9. <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV		1,665,969.	54 853,738.
	55a Investments - land, buildings, and equipment, basis	55a		
b Less: accumulated depreciation (attach schedule)	55b		55c	
56 Investments - other (attach schedule)			56	
57a Land, buildings, and equipment basis	57a 8,706,257.			
b Less: accumulated depreciation (attach schedule)	57b 2,105,443.	4,919,741.	57c 6,600,814.	
58 Other assets (describe <input type="checkbox"/> STMT 10 )		27,738.	58 17,738.	
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74)		9,740,142.	59 9,423,442.	
Liabilities	60 Accounts payable and accrued expenses	368,705.	60	332,554.
	61 Grants payable		61	
	62 Deferred revenue	188,766.	62	23,700.
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			63
	64a Tax-exempt bond liabilities (attach schedule)			64a
	b Mortgages and other notes payable (attach schedule) STMT 11		686,470.	64b 465,759.
	65 Other liabilities (describe <input type="checkbox"/> )			65
66 <b>Total liabilities</b> (add lines 60 through 65)		1,243,941.	66 822,013.	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	67 Unrestricted	2,296,552.	67	2,364,686.
	68 Temporarily restricted	1,896,204.	68	2,022,514.
	69 Permanently restricted	4,303,445.	69	4,214,229.
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>			
	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 <b>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)		8,496,201.	73 8,601,429.
	74 <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		9,740,142.	74 9,423,442.

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 27 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? If "Yes," attach a statement
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 or 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 (See instructions in Part III)
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? If "Yes," complete Part IX
89a 501(c)(3) organizations Enter. Amount of tax imposed on the organization during the year under section 4911
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? If "Yes," attach a statement explaining each transaction
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
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, 2002 (See instructions)
91 The books are in care of
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 31 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	
93 Program service revenue					
a <b>PROGRAM FEES</b>					908,480.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					922,226.
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	48,248.	
97 Net rental income or (loss) from real estate					
a debt-financed property	531120	3,758.			
b not debt-financed property			16	186,187.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-72,244.	
101 Net income or (loss) from special events			01	-256,248.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue, a					
b <b>T-SHIRT SALES</b>					12,895.
c <b>MISCELLANEOUS</b>			01	2,237.	
d <b>CONCESSIONS</b>			03	24,280.	
e					
104 Subtotal (add columns (B), (D), and (E))		3,758.		-67,540.	1,843,601.
105 Total (add line 104, columns (B), (D), and (E))					1,779,819.

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 32 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)
▼	STMT 20

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions)

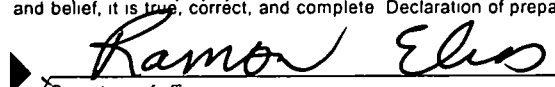
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 33 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 Sign Here:  Signature of officer

Date: 3-4-04

TITLES: PRESIDENT / CEO

Date: 3/2/2004

Check if self-employed:

Preparer's SSN or PTIN (See Gen. Inst. W)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

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

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

**Supplementary Information - (See separate instructions.)**

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

OMB No 1545-0047

**2002**

Name of the organization

**BOYS AND GIRLS CLUB OF THE EAST VALLEY**

Employer identification number

**86-0550646**

**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
<u>ABRAHAM SABBAGH</u> 1405 E. GUADALUPE RD., #4 TEMPE, AZ 85283	IT MANAGER 40+	55,601.	5,560.	600.
<u>SUSAN DOUGLAS</u> SAME AS ABOVE	CHARTER SCH. ADMIN. 40+	52,520.	5,252.	NONE
<u>DENNIS MARCELLO</u> SAME AS ABOVE	ORG. DEVELOP. VP 40+	71,305.	7,131.	3,900.
-----				
-----				
-----				
Total number of other employees paid over \$50,000 . . . . . ▶	NONE			

**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
NONE		
-----		
-----		
-----		
-----		
-----		
-----		
Total number of others receiving over \$50,000 for professional services . . . . . ▶	NONE	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2002

JSA  
2E1210 1 000

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

Table with 3 columns: Question, Yes, No. Rows include questions about lobbying activities, grants, and annuity plans. Includes sub-rows 1, 2a-e, 3, 4 and STMT 21, 22.

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

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

- 5 [ ] A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
6 [ ] A school Section 170(b)(1)(A)(ii) (Also complete Part V )
7 [ ] A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
8 [ ] A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
9 [ ] A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state
10 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A )
11 a [X] 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 )
11 b [ ] 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 )

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above.

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

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

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

Table with columns: Calendar year (or fiscal year beginning in), (a) 2001, (b) 2000, (c) 1999, (d) 1998, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends, amounts received from payments on securities loans; 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; 22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24; 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; c Total support for section 509(a)(1) test Enter line 24, column (e); d Add Amounts from column (e) for lines 18, 19, 22, 26b; e Public support (line 26c minus line 26d total); f Public support percentage (line 26e (numerator) divided by line 26c (denominator)); 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; 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; c Add Amounts from column (e) for lines 15, 16, 17, 20, 21; d Add Line 27a total and line 27b total; e Public support (line 27c total minus line 27d total); f Total support for section 509(a)(2) test Enter amount from line 23, column (e); g Public support percentage (line 27e (numerator) divided by line 27f (denominator)); h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)); 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15.

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

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 29-35 regarding racial nondiscrimination policies, records, and financial aid.

**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) **NOT APPLICABLE**

- 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> (The term "expenditures" means amounts paid or incurred )	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>	
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>	
<b>38</b> Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>	
<b>39</b> Other exempt purpose expenditures . . . . .	<b>39</b>	
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39) . . . . .	<b>40</b>	
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table - <b>If the amount on line 40 is -                      The lobbying nontaxable amount is -</b>		
Not over \$500,000 . . . . . 20% of the amount on line 40 . . . . .	<b>41</b>	
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>42</b> Grassroots nontaxable amount (enter 25% of line 41) . . . . .	<b>42</b>	
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 . . . . .	<b>43</b>	
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 . . . . .	<b>44</b>	

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

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

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

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

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

**NOT APPLICABLE**

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

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
<b>a</b> Volunteers . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h) . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>c</b> Media advertisements . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>d</b> Mailings to members, legislators, or the public . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>e</b> Publications, or published or broadcast statements . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>f</b> Grants to other organizations for lobbying purposes . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<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



FORM 990, PART I - EXCLUDED CONTRIBUTIONS

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DESCRIPTION

AMOUNT

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-----

AUCTION/DINNER	111,400.
BON VIVANT	81,260.
GOLF TOURNAMENTS	80,435.
HOME RAFFLE	
FISHING TOURNAMENTS	3,720.
AJ 50'S EVENT	2,985.
ALL OTHER SPECIAL EVENTS	233,087.
	-----
TOTAL	512,887.
	=====

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES  
 =====

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
AUCTION/DINNER	194,263.	139,700.	54,563.
BON VIVANT	43,442.	47,904.	-4,462.
GOLF TOURNAMENTS	62,639.	63,959.	-1,320.
HOME RAFFLE	163,237.	281,031.	-117,794.
FISHING TOURNAMENTS	7,500.	2,077.	5,423.
AJ 50'S EVENT	22,124.	1,374.	20,750.
ALL OTHER SPECIAL EVENTS	52,090.	265,498.	-213,408.
TOTALS	545,295.	801,543.	-256,248.

2

FORM 990, PART I - PAYMENTS TO AFFILIATES

=====

DESCRIPTION

AMOUNT

-----

-----

BOYS AND GIRLS CLUBS OF AMERICA  
1230 W. PEACHTREE ST., NW  
ATLANTA, GA 30309

18,395.

TOTAL

-----  
18,395.  
=====

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
UNREALIZED GAIN ON INVESTMENTS	14,359.
CAPITALIZED IN-KIND SERVICES (WIP)	6,667.
	-----
TOTAL	21,026.
	=====

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR  
AND

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GRANTS PAID			
SEE ATTACHED LIST			12,900.
ARIZONA HUMANE SOCIETY 1521 W. DOBBINS RD. PHOENIX, AZ 85041	NONE EXEMPT	EQUINE THERAPY PROGRAM	2,535.
		TOTAL CONTRIBUTIONS PAID	15,435.

Boys & Girls Clubs of the East Valley  
Scholarship Information  
June 30, 2003

**Form 990, Part II, Line 22**

<u>Transaction Description</u>	<u>Debit</u>	<u>Credit</u>
C WEAGENT 10952 E. Vecino Chandler, AZ 85248	\$ 1,300 00	
D.FIGUEROA 30 W. Carter Drive #5-103 Tempe, AZ 85282	1,000 00	
A MORANGO C/O BGC/EV Tempe, AZ 85283	500.00	
D. GLENN P O. Box 26113 Tempe, AZ 85052-6113	800 00	
M BUCHANAN 2152 E. Mallory Mesa, AZ 85213	500.00	
K ROBINSON 505 W Baseline #1068 Tempe, AZ 85282	800.00	
C. RODRIGUEZ 510 S Extension 2011 Mesa, AZ 85210	1,000 00	
J.KLEEN P.O. Box 3193 Chandler, AZ 85244	500 00	
E.CANIZALES 3757 E. Butte Street Mesa, AZ 85207	500 00	
A BUCKEY 4848 E. Pueblo Phoenix, AZ 85040	1,000 00	
K ANTOINE 7211 E Trent Ave Mesa, AZ 85212	800 00	

Boys & Girls Clubs of the East Valley  
Scholarship Information  
June 30, 2003

86 0550646

E.BAUM 211 E Hermosa Drive Tempe, AZ 85282	800.00	
J. WIPF 605 S. Marina Drive Gilbert AZ 85233	800 00	
RAMIREZ 604 E. Erie Street Chandler, AZ 85225	200.00	
M BATES 4424 E. Baselin Raod Phoenix, AZ 85042	800 00	
B. DYKES 1897 E. Los Alamos Gilbert AZ 85296	1,600.00	
Sub-Totals	<u>\$ 12,900 00</u>	<u>\$ -</u>
Total	<u>12,900.00</u>	

FORM 990, PART II - OTHER EXPENSES

=====

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
PROGRAM SERVICE EXPENSES	521,013.	521,013.		
PROFESSIONAL FEES	42,899.	28,904.	2,186.	11,809.
VEHICLE COSTS	70,859.	52,274.	7,714.	10,871.
INDIRECT SPECIAL EVENT EXPENSE	86,370.			86,370.
MEMBERSHIP DUES	18,028.	9,936.	1,584.	6,508.
MISCELLANEOUS EXPENSES	18,836.	6,646.	5,562.	6,628.
IN-KIND SUPPLIES	98,940.	98,940.		
TOTALS	856,945.	717,713.	17,046.	122,186.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE  
=====

THE PURPOSE OF THE CORPORATION SHALL BE TO PROVIDE BEHAVIOR GUIDANCE AND TO PROMOTE THE HEALTH, SOCIAL, EDUCATION, VOCATIONAL AND CHARACTER DEVELOPMENT OF BOYS AND GIRLS. THE CORPORATION INITIALLY INTENDS ITS BUSINESS TO OPERATE THE GIRLS AND BOYS CLUBS OF THE COMMUNITIES COMPOSING OF THAT AREA KNOWN AS THE EAST VALLEY WHICH EXISTS IN MARICOPA AND PINAL COUNTIES, AND STATE OF ARIZONA.

FORM 990, PART IV - OTHER NOTES AND LOANS RECEIVABLE

=====

BORROWER: TOWN OF GILBERT

ORIGINAL AMOUNT: 650,000.

DATE OF NOTE: 06/12/2001

MATURITY DATE: 07/30/2003

REPAYMENT TERMS: THREE ANNUAL PAYMENTS OF PRINCIPAL ONLY

SECURITY PROVIDED: REAL PROPERTY

PURPOSE OF LOAN: FINANCE SALE OF REAL PROPERTY

BEGINNING BALANCE DUE ..... 387,987.

ENDING BALANCE DUE ..... 149,400.

-----

TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE 387,987.

=====

TOTAL ENDING OTHER NOTES AND LOANS RECEIVABLES 149,400.

=====

FORM 990, PART IV - INVESTMENTS - SECURITIES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
COMMON STOCK	431,306.
US GOVERNMENT OBLIG.	88,920.
MONEY MARKET FUND	110,162.
CORPORATE BONDS	223,350.
	-----
TOTALS	853,738.
	=====

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
DEPOSITS	4,838.
INVENTORY-DONATED TIMESHARE	12,900.
	-----
TOTALS	17,738.
	=====

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE

=====

LENDER: WELLS FARGO LINE OF CREDIT  
 ORIGINAL AMOUNT: 650,000.  
 INTEREST RATE: 4.750000  
 DATE OF NOTE: 05/12/2001  
 MATURITY DATE: 05/15/2006  
 REPAYMENT TERMS: MONTHLY PAYMENTS OF \$3,175 INCLUDING INTEREST  
 SECURITY PROVIDED: ALL EQUIPMENT & CAPITAL CAMPAIGN PLEDGES  
 PURPOSE OF LOAN: CONSTRUCTION LOAN

BEGINNING BALANCE DUE ..... 516,954.  
 ENDING BALANCE DUE ..... 103,216.  
 -----

LENDER: AFCO  
 ORIGINAL AMOUNT: 230,299.  
 DATE OF NOTE: 01/19/2001  
 MATURITY DATE: 02/01/2004  
 REPAYMENT TERMS: MONTHLY PAYMENTS OF \$8,225  
 SECURITY PROVIDED: UNSECURED  
 PURPOSE OF LOAN: INSURANCE PREMIUM FINANCING

BEGINNING BALANCE DUE ..... 169,516.  
 ENDING BALANCE DUE ..... 67,543.  
 -----

LENDER: BANK OF AMERICA LINE OF CREDIT  
 ORIGINAL AMOUNT: 100,000.  
 INTEREST RATE: 6.250000  
 DATE OF NOTE: 06/01/1992  
 SECURITY PROVIDED: ALL EQUIPMENT  
 PURPOSE OF LOAN: OPERATIONS

BEGINNING BALANCE DUE ..... NONE  
 ENDING BALANCE DUE ..... 95,000.  
 -----

LENDER: IRWIN BANK  
 ORIGINAL AMOUNT: 750,000.  
 DATE OF NOTE: 11/22/2002  
 MATURITY DATE: 11/21/2003  
 REPAYMENT TERMS: INTEREST ONLY  
 PURPOSE OF LOAN: CONSTRUCTION OF NEW CLUB FACILITY

BEGINNING BALANCE DUE .....	NONE
ENDING BALANCE DUE .....	200,000.
	-----

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	686,470.
	=====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	465,759.
	=====

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN

=====

DESCRIPTION

AMOUNT

-----

-----

LOSS ON SALE OF ASSETS

72,244.

-----

TOTAL

72,244.

=====

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

=====

DESCRIPTION

AMOUNT

-----

-----

INVESTMENT INCOME

48,248.

SPECIAL EVENT IN-KIND SERVICES

4,520.

FUNDRAISING EXPENSES

3,678.

-----

TOTAL

56,446.

=====

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

=====

DESCRIPTION

AMOUNT

-----

-----

SPECIAL EVENT EXPENSE

1,961.

-----

TOTAL

1,961.

=====

FORM 990, PART IV-B - OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

=====

DESCRIPTION

AMOUNT

-----

-----

FUNDRAISING EXPENSES

3,678.

-----

TOTAL

3,678.

=====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
RAMON ELIAS 1405 EAST GUADALUPE ROAD, #4 TEMPE, AZ 85283	PRESIDENT/CEO 40+	131,050.	13,105.	NONE
TIMOTHY BROWN SAME AS ABOVE	EXECUTIVE DIRECTOR 40+	78,899.	7,890.	3,250.
CECIL ANTONE SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
SANDY BLACK SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
GRETCHEN BUHLIG SAME AS ABOVE	VICE PRESIDENT AS REQ'D	NONE	NONE	NONE
DAN CALLAHAN SAME AS ABOVE	VICE PRESIDENT AS REQ'D	NONE	NONE	NONE
CRAIG CAMERON SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
JOHN CORK SAME AS ABOVE	SECRETARY AS REQ'D	NONE	NONE	NONE
FREDDIE DOBBINS SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
TERRANCE EVANS SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JAY FRIEDMAN SAME AS ABOVE	VICE CHAIRMAN AS REQ'D	NONE	NONE	NONE
GLYNN GILCREASE SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
GARY GLAVA SAME AS ABOVE	VICE PRESIDENT AS REQ'D	NONE	NONE	NONE
JIM HAYDEN SAME AS ABOVE	VICE PRESIDENT AS REQ'D	NONE	NONE	NONE
PEGGY HOAG SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
LANA HOCK SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
DAVID KEEFE SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
DREW MEREDITH SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
PAUL MONREAL, JR. SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
ESTEBAN MORALES SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
MIKE NEILL	DIRECTOR AS REQ'D	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
PHI NGUYEN SAME AS ABOVE	CHAIR AS REQ'D	NONE	NONE	NONE
GREG PATTERSON SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
JACK SAUNDERS SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
MARTIN SEPULVEDA SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
JOHN WAKELIN SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
LORI WALTER SAME AS ABOVE	DIRECTOR AS REQ'D	NONE	NONE	NONE
GRAND TOTALS		209,949.	20,995.	3,250.

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

=====

LINE	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME
NO.	IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED
---	IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
	-----

93A	PROGRAM FEES TEACH YOUNG PEOPLE FINANCIAL RESPONSIBILITY & CONTRIBUTE TOWARD THEIR CIVIC AND LEADERSHIP DEVELOPMENT. IN ADDITION, THE YOUTHS HELP IN RAISING THE FUNDS AND LEARN TO PARTICIPATE AS RESPONSIBLE MEMBERS OF THEIR COMMUNITY.
-----	--

93G	THE CHARTER SCHOOL PROVIDES AN ENVIRONMENT WHICH PROMOTES THE HEALTH, SOCIAL, EDUCATIONAL, VOCATIONAL AND CHARACTER DEVELOPMENT OF THE BOYS AND GIRLS WHO ATTEND.
-----	---

103B	T-SHIRT SALES CREATE AWARENESS OF THE CLUB'S PROGRAMS WITHIN THE COMMUNITY AND A SENSE OF BELONGING AMONG PARTICIPATING YOUTH
------	---

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

=====

SEE PART V, FORM 990.

SCHEDULE A, PART III - EXPLANATION FOR LINE 4

=====

EDUCATIONAL AWARDS ARE GIVEN TO CLUB MEMBERS BASED ON ACADEMIC PERFORMANCE, CLUB AND COMMUNITY PERFORMANCE. THE PROGRAM COMMITTEE IS RESPONSIBLE FOR SELECTING THE CLUB MEMBER TO BE AWARDED.

SCHEDULE A, PART IV-A - OTHER INCOME

=====

DESCRIPTION	2001	2000	1999	1998	TOTAL
-----	----	----	----	----	-----
OTHER REVENUE	10,982.	1,142.	4,967.	40,661.	57,752.
T-SHIRT SALES	41,330.	23,879.	13,267.	NONE	78,476.
CONCESSIONS	12,993.	19,274.	21,265.	NONE	53,532.
	-----	-----	-----	-----	-----
TOTALS	65,305.	44,295.	39,499.	40,661.	189,760.
	=====	=====	=====	=====	=====





**BOYS & GIRLS CLUBS OF THE EAST VALLEY**  
Land, buildings, and equipment  
FYE 6/30/2003

86-0550646

Form 990, Part IV, Line 57

<u>Description</u>	<u>Cost</u>
Buildings	3,819,517
Construction in Progress	2,132,071
Land	25,000
Machinery & Equipment	1,451,642
Leasehold Improvements	986,050
Vehicles	<u>291,977</u>
<b>TOTAL</b>	<b>8,706,257</b>
<b>Accumulated Depreciation</b>	<b><u>2,105,443</u></b>
<b>NET BOOK VALUE</b>	<b><u>6,600,814</u></b>
<b>Depreciation Expense</b>	<b>434,102</b>

If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box

Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.

Table with 3 columns: Type or print, Name of Exempt Organization, Employer identification number. Includes address: BOYS AND GIRLS CLUB OF THE EAST VALLEY, 1405 EAST GUADALUPE ROAD, TEMPE, AZ 85283.

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

Form with checkboxes for various tax forms: Form 990 (checked), Form 990-EZ, Form 990-T, Form 1041-A, Form 5227, Form 8870, Form 990-BL, Form 990-PF, Form 990-T (trust other than above), Form 4720, Form 6069.

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

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 is for

7 I request an additional 3-month extension of time until 05/17/2004
8 For calendar year, or other tax year beginning 07/01/2002 and ending 06/30/2003
9 If this tax year is for less than 12 months, check reason: Initial return, Final return, Change in accounting period

ADDITIONAL TIME IS REQUIRED IN ORDER TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a 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 \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$
c Balance Due. Subtract line 8b from line 8a 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 \$

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 line with handwritten signature, Title line, and Date line with handwritten date 2/17/2004

Notice to Applicant - To Be Completed by the IRS

Form with checkboxes for IRS approval status: We have approved this application, We have not approved this application (10-day grace period), We have not approved this application (no grace period), We cannot consider this application, Other

Director line with By and Date fields

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Table with 2 columns: Type or print, Name, Number and street, City or town, province or state, and country. Includes address: CBIZ MILLER WAGNER, INC., 3101 N. CENTRAL AVE., STE 300, PHOENIX, AZ 85012

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

▶ 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

<b>Type or print</b>  File by the due date for filing your return. See instructions	Name of Exempt Organization <b>BOYS AND GIRLS CLUB OF THE EAST VALLEY</b>	Employer identification number <b>86-0550646</b>
	Number, street, and room or suite no. If a P O box, see instructions <b>1405 EAST GUADALUPE ROAD</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>TEMPE, AZ 85283</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 02/16, 2004 to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning 07/01, 2002, and ending 06/30, 2003

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. \$ \_\_\_\_\_  
 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. \$ \_\_\_\_\_

**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 ▶  Title ▶ \_\_\_\_\_ Date ▶ 11/10/2003  
 For Paperwork Reduction Act Notice, see Instruction Form **8868** (12-2000)