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)

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

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

Phone number

(858) 485-6964-2

Cash [X] Accrual

Other (specify)

Cash [X] Accrual
No

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 [X]

(If "No," attach a list of instructions)

H (d) Is this a separate return filed by an organization covered by a group ruling?
Yes [X] No [ ]

Enter 4-digit GEN

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

Web site: N/A

Organization type

(check only one) [ ] 501(c) [X] 501(c)(3)

Gross receipts: Add lines 6b, 9b, and 10b to line 12.

714,926

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

1 Contributions, gifts, grants, and similar amounts received.
   a Direct public support
   b Indirect public support
   c Government contributions (grants)
   d Total (add lines 1a through 1c) (cash $348,167, noncash $39,802)
   e 387,969

2 Program service revenue including government fees and contracts (Form Part II, line 93)

3 Membership dues and assessments

4 Interest on savings and temporary cash investments

5 Dividends and interest from securities

6a Gross rents
   b Less rental expenses
   c Net rental income or (loss) (subtract line 6b from line 6a)

7 Interest on investments (describe)

8a Gross amount from sales of assets other than inventory
   b Less cost or other basis and sales expenses
   c Gain or (loss) (attach schedule)

8d 3,851

9a Net gain or (loss) (combine line 8c, columns (A) and (B))

9b 94,553

10a Gross sales of inventory, less returns and allowances
   b Less, cost of goods sold
   c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)

11 Other revenue (from Part VII, line 103)

12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)

13 Program services (from line 44, column (B))

14 Management and general (from line 44, column (C))

15 Fundraising (from line 44, column (D))

16 Payments to affiliates (attach schedule)

17 Total expenses (add lines 16 and 44, column (A))

18 Excess or (deficit) for the year (subtract line 17 from line 12)

19 Net assets or fund balances at beginning of year (from line 73, column (A))

20 Other changes in net assets or fund balances (attach explanation)

21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)

STATEMENT 1

STATEMENT 2

STATEMENT 3

(See section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)).
### 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 4947(a)(1) nonexempt charitable trusts but optional for others.

<table>
<thead>
<tr>
<th>Item</th>
<th>(A) Total</th>
<th>(B) Program Services</th>
<th>(C) Management and General</th>
<th>(D) Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>22 Grants and allocations (all sch)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(cash $ )</td>
<td>22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(non-cash $ )</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Specific assistance to individuals (all sch)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Benefits paid to or for members (all sch)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Compensation of officers, directors, etc</td>
<td>25</td>
<td>171,992</td>
<td>137,594</td>
<td>17,199</td>
</tr>
<tr>
<td>26 Other salaries and wages</td>
<td>26</td>
<td>248,811</td>
<td>199,048</td>
<td>24,881</td>
</tr>
<tr>
<td>27 Pension plan contributions</td>
<td>27</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28 Other employee benefits</td>
<td>28</td>
<td>36,728</td>
<td>29,380</td>
<td>3,673</td>
</tr>
<tr>
<td>29 Payroll taxes</td>
<td>29</td>
<td>36,009</td>
<td>28,807</td>
<td>3,601</td>
</tr>
<tr>
<td>30 Professional fundraising fees</td>
<td>30</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Accounting fees</td>
<td>31</td>
<td>8,832</td>
<td>7,066</td>
<td>1,766</td>
</tr>
<tr>
<td>32 Legal fees</td>
<td>32</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33 Supplies</td>
<td>33</td>
<td>10,117</td>
<td>8,094</td>
<td>1,012</td>
</tr>
<tr>
<td>34 Telephone</td>
<td>34</td>
<td>10,566</td>
<td>8,453</td>
<td>1,056</td>
</tr>
<tr>
<td>35 Postage and shipping</td>
<td>35</td>
<td>3,792</td>
<td>3,034</td>
<td>379</td>
</tr>
<tr>
<td>36 Occupancy</td>
<td>36</td>
<td>42,149</td>
<td>33,719</td>
<td>4,215</td>
</tr>
<tr>
<td>37 Equipment rental and maintenance</td>
<td>37</td>
<td>342</td>
<td>274</td>
<td>34</td>
</tr>
<tr>
<td>38 Printing and publications</td>
<td>38</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39 Travel</td>
<td>39</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>40 Conferences, conventions, and meetings</td>
<td>40</td>
<td>19,506</td>
<td>15,604</td>
<td>1,951</td>
</tr>
<tr>
<td>41 Interest</td>
<td>41</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>42 Depreciation, depletion, etc (attach schedule)</td>
<td>42</td>
<td>8,496</td>
<td>6,797</td>
<td>1,699</td>
</tr>
<tr>
<td>43 Other expenses not covered above (itemize)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a SEE STATEMENT 4</td>
<td>43a</td>
<td>95,060</td>
<td>76,362</td>
<td>9,368</td>
</tr>
<tr>
<td>b SEE STATEMENT 4</td>
<td>43b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c SEE STATEMENT 4</td>
<td>43c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d SEE STATEMENT 4</td>
<td>43d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e SEE STATEMENT 4</td>
<td>43e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>44 Total functional expenses (add lines 22 - 43)</td>
<td>44</td>
<td>692,400</td>
<td>554,234</td>
<td>70,833</td>
</tr>
</tbody>
</table>

**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

What is the organization's primary exempt purpose? **SEE STATEMENT 5**

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) & (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others.)

<table>
<thead>
<tr>
<th>Item</th>
<th>Program Service Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>a SEE STATEMENT 6</td>
<td>Grants and allocations $ 554,234</td>
</tr>
<tr>
<td>b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
</tr>
<tr>
<td>e Other program services</td>
<td>Grants and allocations $</td>
</tr>
<tr>
<td>f Total of Program Service Expenses (should equal line 44, column (B), program services)</td>
<td>$ 554,234</td>
</tr>
</tbody>
</table>
### Balance Sheets (See Instructions)

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>45</td>
<td>Cash – non-interest-bearing</td>
<td>72,341 45</td>
</tr>
<tr>
<td>46</td>
<td>Savings and temporary cash investments</td>
<td>233,425. 46</td>
</tr>
<tr>
<td>47a Accounts receivable</td>
<td>47a</td>
<td>47c</td>
</tr>
<tr>
<td>b Less allowance for doubtful accounts</td>
<td>47b</td>
<td>47c</td>
</tr>
<tr>
<td>48a Pledges receivable</td>
<td>48a 80,000</td>
<td>48c 80,000</td>
</tr>
<tr>
<td>b Less allowance for doubtful accounts</td>
<td>48b</td>
<td>48c</td>
</tr>
<tr>
<td>49</td>
<td>Grants receivable</td>
<td>49</td>
</tr>
<tr>
<td>50</td>
<td>Receivables from officers, directors, trustees, and key employees (attach schedule)</td>
<td>50</td>
</tr>
<tr>
<td>51a Other notes &amp; loans receivable (attach sch)</td>
<td>51a</td>
<td>51c</td>
</tr>
<tr>
<td>b Less allowance for doubtful accounts</td>
<td>51b</td>
<td>51c</td>
</tr>
<tr>
<td>52</td>
<td>Inventories for sale or use</td>
<td>52</td>
</tr>
<tr>
<td>53</td>
<td>Prepaid expenses and deferred charges</td>
<td>8,345. 53</td>
</tr>
<tr>
<td>54</td>
<td>Investments – securities (attach schedule) SEE ST 7 □ Cost X FMV</td>
<td>1,850. 54</td>
</tr>
<tr>
<td>55a Investments – land, buildings, &amp; equipment. basis</td>
<td>55a</td>
<td>55c</td>
</tr>
<tr>
<td>b Less accumulated depreciation (attach schedule)</td>
<td>55b</td>
<td>55c</td>
</tr>
<tr>
<td>56</td>
<td>Investments – other (attach schedule)</td>
<td>56</td>
</tr>
<tr>
<td>57a Land, buildings, and equipment. basis</td>
<td>57a 85,021</td>
<td>57c 12,688</td>
</tr>
<tr>
<td>b Less, accumulated depreciation (attach schedule)</td>
<td>57b STATEMENT 8 72,333</td>
<td>57c 12,688</td>
</tr>
<tr>
<td>58</td>
<td>Other assets (describe ▷ SEE STATEMENT 9 )</td>
<td>213,360. 58</td>
</tr>
<tr>
<td>59</td>
<td>Total assets (add lines 45 through 58) (must equal line 74)</td>
<td>651,667. 59</td>
</tr>
<tr>
<td>60</td>
<td>Accounts payable and accrued expenses</td>
<td>31,083. 60</td>
</tr>
<tr>
<td>61</td>
<td>Grants payable</td>
<td>61</td>
</tr>
<tr>
<td>62</td>
<td>Deferred revenue</td>
<td>62</td>
</tr>
<tr>
<td>63</td>
<td>Loans from officers, directors, trustees, and key employees (attach schedule)</td>
<td>63</td>
</tr>
<tr>
<td>64a Tax-exempt bond liabilities (attach schedule)</td>
<td>64a</td>
<td></td>
</tr>
<tr>
<td>b Mortgages and other notes payable (attach schedule)</td>
<td>64b</td>
<td></td>
</tr>
<tr>
<td>65</td>
<td>Other liabilities (describe ▷ )</td>
<td>65</td>
</tr>
<tr>
<td>66</td>
<td>Total liabilities (add lines 60 through 65)</td>
<td>31,083. 66</td>
</tr>
</tbody>
</table>

**Organizations that follow SFAS 117, check here ▷ X and complete lines 67 through 69 and lines 73 and 74**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>67</td>
<td>Unrestricted 329,643. 67</td>
</tr>
<tr>
<td>68</td>
<td>Temporarily restricted 264,916. 68</td>
</tr>
<tr>
<td>69</td>
<td>Permanently restricted 26,025. 69</td>
</tr>
</tbody>
</table>

**Organizations that do not follow SFAS 117, check here ▷ □ and complete lines 70 through 74**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>70</td>
<td>Capital stock, trust principal, or current funds 70</td>
</tr>
<tr>
<td>71</td>
<td>Paid-in or capital surplus, or land, building, and equipment fund 71</td>
</tr>
<tr>
<td>72</td>
<td>Retained earnings, endowment, accumulated income, or other funds 72</td>
</tr>
<tr>
<td>73</td>
<td>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) 620,584. 73</td>
</tr>
<tr>
<td>74</td>
<td>Total liabilities and net assets/fund balances (add lines 66 and 73) 651,667. 74</td>
</tr>
</tbody>
</table>

---

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.
<table>
<thead>
<tr>
<th>Part IV-A</th>
<th>Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)</th>
<th>Part IV-B</th>
<th>Reconciliation of Expenses per Audited Financial Statements with Expenses per Return</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>a</td>
<td>Total expenses and losses per audited financial statements</td>
</tr>
<tr>
<td>b</td>
<td>Amounts included on line a but not on line 12, Form 990.</td>
<td>b</td>
<td>Amounts included on line 6b, Form 990 but not on line a:</td>
</tr>
<tr>
<td></td>
<td>(1) Net unrealized gains on investments</td>
<td></td>
<td>(1) Investment expenses not included on line 6b, Form 990</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(2) Other (specify):</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Add amounts on lines (1) and (2)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Add amounts on lines (1) through (4)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>b</td>
</tr>
<tr>
<td></td>
<td>c</td>
<td>Line a minus line b</td>
<td>c</td>
</tr>
<tr>
<td></td>
<td>d</td>
<td>Amounts included on line 12, Form 990 but not on line a:</td>
<td>d</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(1) Investment expenses not included on line 6b, Form 990</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>(2) Other (specify):</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Add amounts on lines (1) and (2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Add amounts on lines (1) through (4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e</td>
<td>Total revenue per line 12, Form 990 (line c plus line d)</td>
<td>e</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part V</th>
<th>List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see instructions.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Name and address</td>
<td>(B) Title and average hours per week devoted to position</td>
</tr>
<tr>
<td>JOSEPH DE CHRISTOFARO</td>
<td>EXEC. DIRECTOR</td>
</tr>
<tr>
<td>17150 VIA DEL CAMPO #101</td>
<td></td>
</tr>
<tr>
<td>SAN DIEGO, CA 92127-2137</td>
<td></td>
</tr>
<tr>
<td>SCHEDULE ATTACHED</td>
<td></td>
</tr>
<tr>
<td>PAUL PALMER</td>
<td>EXECUTIVE DIRECTOR</td>
</tr>
<tr>
<td>9642 CLAIBORNE SQUARE</td>
<td></td>
</tr>
<tr>
<td>LA JOLLA, CA 92037</td>
<td></td>
</tr>
</tbody>
</table>

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

Form 990 (2002)
Form 990 (2002)  BIG BROTHERS OF SAN DIEGO COUNTY, INC.  95-2151526  Page 5

Part VI  Other Information (See instructions.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>76</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>77</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>78a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>78b</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>79</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>80a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>81a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>81b</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>82a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>82b</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>83a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>83b</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>84a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>84b</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>85a</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>85b</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>86a</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>86b</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>87a</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>87b</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>88a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>88b</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>89a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>89b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 – Check here

BAA

TIAEA0105L  01/22/03
### Part VII | Analysis of Income-Producing Activities

#### Note: Enter gross amounts unless otherwise indicated.

<table>
<thead>
<tr>
<th></th>
<th>Business code</th>
<th>Amount</th>
<th>Exclusion code</th>
<th>Amount</th>
<th>Related or exempt function income</th>
</tr>
</thead>
<tbody>
<tr>
<td>93</td>
<td>Program service revenue.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Medicare/Medicaid payments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Fees &amp; contracts from government agencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>94</td>
<td>Membership dues and assessments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>95</td>
<td>Interest on savings &amp; temporary cash investments</td>
<td>14</td>
<td>1,811</td>
<td></td>
<td></td>
</tr>
<tr>
<td>96</td>
<td>Dividends &amp; interest from securities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>97</td>
<td>Net rental income or (loss) from real estate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Debt-financed property</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Not debt-financed property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>98</td>
<td>Net rental income or (loss) from personal property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>Other investment income</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>100</td>
<td>Gain or (loss) from sales of assets other than inventory</td>
<td>1</td>
<td>225,581</td>
<td>3,851</td>
<td></td>
</tr>
<tr>
<td>101</td>
<td>Net income or (loss) from special events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>102</td>
<td>Gross profit or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>103</td>
<td>Other revenue.</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>104</td>
<td>Subtotal (add columns (B), (D), and (E))</td>
<td></td>
<td></td>
<td>227,392</td>
<td>3,851</td>
</tr>
<tr>
<td>105</td>
<td>Total (add line 104, columns (B), (D), and (E))</td>
<td></td>
<td></td>
<td></td>
<td>231,243</td>
</tr>
</tbody>
</table>

#### 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

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

N/A

### Part IX | Information Regarding Taxable Subsidiaries and Disregarded Entities

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
<th>(E)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name, address, and EIN of corporation, partnership, or disregarded entity</td>
<td>Percentage of ownership interest</td>
<td>Nature of activities</td>
<td>Total income</td>
<td>End-of-year assets</td>
</tr>
<tr>
<td>N/A</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
</tbody>
</table>

### Part X | Information Regarding Transfers Associated with Personal Benefit Contracts

- a. Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **Yes** X **No**
- b. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **Yes** X **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: [Signature] 3/1/04 Date

Preparer's SSN or PTIN (see instructions)
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.

2002

Name of the organization
BIG BROTHERS OF SAN DIEGO COUNTY, INC.
DBA BIG BROTHERS AND SISTERS
95-2151526

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'.)

<table>
<thead>
<tr>
<th>(a) Name and address of each employee paid more than $50,000</th>
<th>(b) Title and average hours per week devoted to position</th>
<th>(c) Compensation</th>
<th>(d) Contributions to employee benefit plans and deferred compensation</th>
<th>(e) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of other employees paid over $50,000</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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'.)

<table>
<thead>
<tr>
<th>(a) Name and address of each independent contractor paid more than $50,000</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of others receiving over $50,000 for professional services</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.
### Part III Statements About Activities

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: $\text{N/A}$
   - Yes: X

   *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.

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)*
   - a. Sale, exchange, or leasing of property? X
   - b. Lending of money or other extension of credit? X
   - c. Furnishing of goods, services, or facilities? X
   - d. Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? X
   - e. Transfer of any part of its income or assets? X

3. Does the organization make grants for scholarships, fellowships, student loans, etc.? *(See Note below)*
   - Yes: X

4. Do you have a section 403(b) annuity plan for your employees?
   - Yes: X

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

### Part IV Reason for Non-Private Foundation Status

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))*
   - X

6. A school. *(Section 170(b)(1)(A)(ii) (Also complete Part V.)*
   - X

7. A hospital or a cooperative hospital service organization. *(Section 170(b)(1)(A)(iii)*
   - X

8. A Federal, state, or local government or governmental unit. *(Section 170(b)(1)(A)(vi)*
   - X

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)*
   - X

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.)*
   - X

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)*

<table>
<thead>
<tr>
<th>(a) Name(s) of supported organization(s)</th>
<th>(b) Line number from above</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14. An organization organized and operated to test for public safety. *(Section 509(a)(4) (See instructions)*

**BAA**

**TEEA0402L 01/22/03**

**Schedule A (Form 990 or Form 990-EZ) 2002**
### 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>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2001</th>
<th>(b) 2000</th>
<th>(c) 1999</th>
<th>(d) 1998</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)</td>
<td>345,586.</td>
<td>313,170.</td>
<td>411,466.</td>
<td>169,849.</td>
<td>1,240,071.</td>
</tr>
<tr>
<td>16 Membership fees received</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(c)(3)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975</td>
<td>3,315.</td>
<td>8,197.</td>
<td>8,364.</td>
<td>9,810.</td>
<td>29,686.</td>
</tr>
<tr>
<td>19 Net income from unrelated business activities not included in line 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Total of lines 15 through 22</td>
<td>348,901.</td>
<td>321,367.</td>
<td>419,830.</td>
<td>179,659.</td>
<td>1,269,757.</td>
</tr>
<tr>
<td>25 Enter 1% of line 23</td>
<td>3,489.</td>
<td>3,214.</td>
<td>3,498.</td>
<td></td>
<td>1,797.</td>
</tr>
<tr>
<td>26 Organizations described on lines 10 or 11:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Enter 2% of amount in column (e), line 24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 25a. Do not file this list with your return. Enter the total of all these excess amounts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Total support for section 509(a)(1) test: Enter line 24, column (e)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Add Amounts from column (e) for lines 18—22</td>
<td>29,686.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Public support (line 26c minus line 26d total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Public support percentage (line 26e (numerator) divided by line 26c (denominator))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27 Organizations described on line 12:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2001)</td>
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<tr>
<td>(2000)</td>
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<tr>
<td>(1999)</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1998)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
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<tr>
<td>(2001)</td>
<td></td>
<td></td>
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<td>(1999)</td>
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<tr>
<td>(1998)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add. Amounts from column (e) for lines 17—21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Line 27a total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Public support (line 27c total minus line 27d total)</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Public support percentage (line 27e (numerator) divided by line 27f (denominator))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Investment income percentage (line 18, column (e) divided by line 27g (denominator))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.
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?

29 No

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?

30 No

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.)

31 Yes

32 Does the organization maintain the following:

a Records indicating the racial composition of the student body, faculty, and administrative staff?

32a No

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

32b Yes

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

32c Yes

d Copies of all material used by the organization or on its behalf to solicit contributions?

32d Yes

33 Does the organization discriminate by race in any way with respect to

a Students' rights or privileges?

33a Yes

b Admissions policies?

33b Yes

c Employment of faculty or administrative staff?

33c Yes

d Scholarships or other financial assistance?

33d Yes

e Educational policies?

33e Yes

f Use of facilities?

33f Yes

g Athletic programs?

33g Yes

h Other extracurricular activities?

33h Yes

If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)

33 Yes

34a Does the organization receive any financial aid or assistance from a governmental agency?

34a Yes

b Has the organization's right to such aid ever been revoked or suspended?

34b Yes

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.

35 Yes
### Part VI-A
**Lobbying Expenditures by Electing Public Charities**

(See instructions)

(To be completed ONLY by an eligible organization that filed Form 5768)

Check □ if the organization belongs to an affiliated group

Check □ if you checked 'a' and 'limited control' provisions apply

#### Limits on Lobbying Expenditures

(The term ‘expenditures’ means amounts paid or incurred)

<table>
<thead>
<tr>
<th></th>
<th>Affiliated group totals</th>
<th>To be completed for ALL electing organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>36</td>
<td></td>
<td>36</td>
</tr>
<tr>
<td>37</td>
<td></td>
<td>37</td>
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<td>38</td>
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<td>40</td>
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<tr>
<td>41</td>
<td></td>
<td>41</td>
</tr>
</tbody>
</table>

#### If the amount on line 40 is —

- **The lobbying nontaxable amount 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

<table>
<thead>
<tr>
<th></th>
<th>Affiliated group totals</th>
<th>To be completed for ALL electing organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>42</td>
<td></td>
<td>42</td>
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<tr>
<td>43</td>
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<td>43</td>
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<td>44</td>
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</tbody>
</table>

**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)

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2002</th>
<th>(b) 2001</th>
<th>(c) 2000</th>
<th>(d) 1999</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>45 Lobbying nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>46 Lobbying ceiling amount (150% of line 45(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>47 Total lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>48 Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>49 Grassroots ceiling amount (150% of line 48(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>50 Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

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

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

---

BAA Schedule A (Form 990 or 990-EZ) 2002
<table>
<thead>
<tr>
<th>Line no</th>
<th>Amount involved</th>
<th>Name of noncharitable exempt organization</th>
<th>Description of transfers, transactions, and sharing arrangements</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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</tr>
</tbody>
</table>

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527?  

☐ Yes ☒ No

b If 'Yes,' complete the following schedule

<table>
<thead>
<tr>
<th>(a) Name of organization</th>
<th>(b) Type of organization</th>
<th>(c) Description of relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Form 8868 (12-2000)  

*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.

Type or print  
Name of Exempt Organization: BIG BROTHERS OF SAN DIEGO COUNTY, DBA BIG BROTHERS AND SISTERS  
Employer identification number: 95-2151526  
Number, street, and room or suite number. If a P.O. box, see instructions.  
17150 VIA DEL CAMPO, #101  
City, town or post office, state, and ZIP code. For a foreign address, see instructions.  
SAN DIEGO, CA 92127-2137  

Check type of return to be filed (file a separate application for each return):  
X Form 990  
Form 990-EZ  
Form 990-T (Section 401(a) or 408(a) trust)  
Form 1041-A  
Form 5227  
Form 8870  
Form 990-FL  
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 organizations four digit Group Exemption Number (GEN) .  

If it is part of the group, check this box .  
If this is for the whole group, check this box .  
 and attach a list with the names and EINs of all members the extension is for.

1. I request an additional 3-month extension of time until 5/15/04.
2. For calendar year , or other tax year beginning , ending .
3. If this tax year is for less than 12 months, check return: Initial return  
Final return  
Change in accounting period  

4. State in detail why you need the extension .  

SEE ATTACHMENT

8a If this application is for Form 990-FL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions .  

8b 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 .  

8c Balance due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with 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]  
[Date]  

Notice to Applicant — To be completed by the IRS

[□] We have approved this application. Please attach this form to the organization’s return.

[□] We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization’s return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely filed return. Please attach this form to the organization’s return.

[□] We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.

[□] We cannot consider this application because it was filed after the due date of the return for which an extension was requested.

Other:

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.

[Name]

[Type or print]

[Number and street (include suite, room, or apartment number) or a P.O. box number]

[City or town, province or state, and country (including postal or ZIP code)]

SAN DIEGO, CA 92122

[Director]  
[By]  
[Date]  

FIF.20502, 10/04/02  
Form 8868 (Rev 12-2000)
STATEMENT 1
FORM 990, PART I, LINE 8
NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: 12.
COST OR OTHER BASIS: 0.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES $ 12.

OTHER ASSETS

DESCRIPTION: VEHICLE
DATE ACQUIRED: 5/01/1998
HOW ACQUIRED: PURCHASE
DATE SOLD: 11/12/2002
TO WHOM SOLD:
GROSS SALES PRICE: 5,000.
COST OR OTHER BASIS: 15,273.
DEPRECIATION: 14,112.

GAIN (LOSS) 3,839.

TOTAL GAIN (LOSS) OTHER ASSETS $ 3,839.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES $ 3,851.

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

<table>
<thead>
<tr>
<th>SPECIAL EVENTS</th>
<th>GROSS RECEIPTS</th>
<th>LESS CONTRIBUTIONS</th>
<th>LESS DIRECT EXPENSES</th>
<th>NET INCOME (LOSS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GOURMET DINNER</td>
<td>204,702</td>
<td>0</td>
<td>83,870</td>
<td>120,832</td>
</tr>
<tr>
<td>GOLF MARATHON</td>
<td>115,432</td>
<td>0</td>
<td>10,683</td>
<td>104,749</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$320,134</td>
<td>$0</td>
<td>$94,553</td>
<td>$225,581</td>
</tr>
</tbody>
</table>

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

ASSETS RELEASED FROM RESTRICTIONS $ -39,802.
INCOME ON RESTRICTED ASSETS 783.
UNREALIZED LOSSES -798.

TOTAL $ -39,817.
STATEMENT 4
FORM 990, PART II, LINE 43
OTHER EXPENSES

<table>
<thead>
<tr>
<th></th>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL</td>
<td>35,118</td>
<td>28,094</td>
<td>3,512</td>
<td>3,512</td>
</tr>
<tr>
<td>ADVERTISING &amp; RECRUITING</td>
<td>7,428</td>
<td>5,942</td>
<td>743</td>
<td>743</td>
</tr>
<tr>
<td>AUTO MILEAGE REIMBURSEMENT</td>
<td>9,302</td>
<td>7,442</td>
<td>1,860</td>
<td></td>
</tr>
<tr>
<td>AWARDS &amp; RECOGNITION</td>
<td>5,960</td>
<td>4,768</td>
<td>596</td>
<td>596</td>
</tr>
<tr>
<td>BOARD MEETINGS</td>
<td>614</td>
<td>491</td>
<td>123</td>
<td></td>
</tr>
<tr>
<td>DUES AND SUBSCRIPTIONS</td>
<td>1,570</td>
<td>1,570</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FINGERPRINT VOLUNTEERS</td>
<td>10,540</td>
<td>8,432</td>
<td>1,054</td>
<td>1,054</td>
</tr>
<tr>
<td>INSURANCE</td>
<td>3,558</td>
<td>2,846</td>
<td>356</td>
<td>356</td>
</tr>
<tr>
<td>NATIONAL DUES</td>
<td>6,581</td>
<td>5,265</td>
<td>1,316</td>
<td></td>
</tr>
<tr>
<td>NEWSLETTER</td>
<td>5,157</td>
<td>4,126</td>
<td>1,031</td>
<td></td>
</tr>
<tr>
<td>ROTARY CLUB</td>
<td>1,787</td>
<td>1,430</td>
<td>179</td>
<td>178</td>
</tr>
<tr>
<td>SERVICE FEES</td>
<td>7,445</td>
<td>5,956</td>
<td>1,489</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>$95,060</td>
<td>$76,362</td>
<td>$9,368</td>
<td>$9,330</td>
</tr>
</tbody>
</table>

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

BIG BROTHERS & SISTERS OF SAN DIEGO COUNTY IS A MENTORING ORGANIZATION THAT SEeks TO ADDRESS THE SPECIAL PROBLEMS OF CHILDREN LACKING ADEQUATE, MEANINGFUL ADULT ROLE MODELS.

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

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>GRANTS AND SERVICE ALLOCATIONS</th>
<th>PROGRAM EXPENSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>THROUGH THE GENEROSITY OF PATRONS AND GOURMET DINNER</td>
<td></td>
<td>554,234</td>
</tr>
<tr>
<td>CORPORATE TABLE MATCH SPONSORS, PRIZE DONORS AND TICKET BUYERS, THE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORGANIZATION HAS BEEN ABLE TO EXPAND THE NUMBER OF SUSTAINING MATCHES TO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OVER 250 SAN DIEGO KIDS. AND SO IT SHOULD BE-- IN OUR BUSTLING WORLD, IT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SEEMS THAT AN EVER-INCREASING NUMBER OF CHILDREN, THROUGH NO FAULT OF THEIR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OWN, ARE FALLING INTO FAMILY CIRCUMSTANCES LACKING ADEQUATE, MEANINGFUL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADULT ROLE MODELS. HISTORY TEACHES THAT THESE CHILDREN ARE AT MUCH GREATER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RISK OF FALLING THROUGH THE CRACKS IN OUR SOCIETY. BY MATCHING THESE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SINGLE-PARENT KIDS WITH POSITIVE ADULT ROLE MODELS WILLING TO INVEST A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FEW HOURS EACH MONTH TO LISTEN, CARE, PLAY, LEAD BY EXAMPLE AND JUST</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PLAIN &quot;BE THERE&quot; BIG BROTHERS &amp; SISTERS HELPS THESE KIDS NAVIGATE THROUGH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADOLESCENCE AND MATURE INTO HAPPY, PRODUCTIVE AND CONTRIBUTING MEMBERS OF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SOCIETY. OUR TASK NOW IS TO EXPAND THIS GREAT PROGRAM AND BRING IT TO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MORE SAN DIEGO COUNTY KIDS CRYING FOR ASSISTANCE.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>554,234</td>
</tr>
</tbody>
</table>
**STATEMENT 7**
FORM 990, PART IV, LINE 54
INVESTMENTS - SECURITIES

<table>
<thead>
<tr>
<th>OTHER SECURITIES</th>
<th>VALUATION METHOD</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATE OF ISRAEL BONDS</td>
<td>MARKET VALUE</td>
<td>$ 1,850</td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td>$ 1,850</td>
</tr>
</tbody>
</table>

TOTAL INVESTMENTS - SECURITIES $ 1,850.

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

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>BASIS</th>
<th>ACCUM. DEPRECIATION</th>
<th>BOOK VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>FURNITURE AND FIXTURES</td>
<td>$ 100,294</td>
<td>$ 86,445.</td>
<td>$ 13,849.</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$ 85,021.</td>
<td>$ 72,333.</td>
<td>$ 12,688.</td>
</tr>
</tbody>
</table>

**STATEMENT 9**
FORM 990, PART IV, LINE 58
OTHER ASSETS

<table>
<thead>
<tr>
<th>BENEFICIAL INTEREST IN ENDOWMENT FUNDS</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ 25,090.</td>
</tr>
<tr>
<td>LEASEHOLD RIGHTS</td>
<td>$ 167,669.</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$ 192,759.</td>
</tr>
</tbody>
</table>
BIG BROTHERS & SISTERS OF SAN DIEGO COUNTY, INC.  
2004 BOARD OF DIRECTORS MEMBERS

PRESIDENT
  • Vincent Mudd
SAN DIEGO OFFICE INTERIORS
4863 Shawline Street, Suite A
San Diego, CA 92111
Bus: 858 495-7364
Fax: 858 495-9101
E-Mail: vincem@sdoi.com

VICE PRESIDENT
LEGAL SERVICES & AGENCY MANAGEMENT
  • Mark A. Krasner
BLANCHARD, KRASNER & FRENCH
800 Silverado Street, 2nd Floor
La Jolla, CA 92037
Bus: 858 551-2440
Fax: 858 551-2434
E-Mail: mkrasner@bkflaw.com

FIRST VICE PRESIDENT
& CHAIR
CORPORATE SPONSORS
  • Rick Valencia
PROFITLINE
9920 Pacific Heights Boulevard, #200
San Diego, CA 92121-4331
Bus: 858 452-6800
Fax: 858 452-6998
E-Mail: rickv@profitline.com

VICE PRESIDENT
PUBLIC RELATIONS
  • Jan Bourgeois
MARK II PROPERTIES
804 Calle Monera
Escondido, CA 92025
Bus: 858 748-2311 (Pomerado Publ)
Res: 760 738-7036
E-Mail: janbour@cox.net

SECRETARY
  • Michael D. Welch
UNION BANK OF CALIFORNIA
1201 Fifth Avenue
San Diego, CA 92101
Bus: 619 230-3227
Fax: 619 230-3244
E-Mail: michael.welch@uboc.com

VICE PRESIDENT
MARKETING
  • Eric Tunquist
JACK IN THE BOX INC.
8690 Balboa Avenue
San Diego, CA 92123-1516
Bus: 858 522-4508
Fax: 858 505-3888
E-Mail: eric.tunquist@jackinthebox.com

TREASURER
  • Brian J. Bergmark
MACK | BARCLAY INC.
402 West Broadway, 9th Floor
San Diego, CA 92101-3542
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Fax: 619 687-0002
E-Mail: bbergmark@mackbarclay.com

VICE PRESIDENT
TECHNOLOGY
Matthew Spathas
SENTRE PARTNERS
225 Broadway, #1700
San Diego, CA 92101
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Fax: 619 234-7917
E-Mail: mspathas@sentre.com
BIG BROTHERS & SISTERS OF SAN DIEGO COUNTY, INC.  
2004 BOARD OF DIRECTORS MEMBERS 

VICE PRESIDENT 
FUNDRAISING  
- Gerald Shonkwiler  
CONWELL, SHONKWILER ARCHITECTS  
3160 Camino del Rio South, #217  
San Diego, CA 92108  
Bus: 619 283-7217  
Fax: 619 283-1028  
E-Mail: j_shonkwiler@consho.com

CO-CHAIR, FUNDRAISING 
(INDIVIDUAL PATRONS)  
- R. Tony McCune  
McCUNE CHRYSLER-JEEP  
2340 National City Boulevard  
National City, CA 91950  
Bus: 619 477-1101  
Fax: 619 477-8123  
E-Mail: tonymccune@aol.com

CHAIR, FUNDRAISING  
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- Gregory A. Post  
POST KIRBY NOONAN & SWEAT  
600 West Broadway, #1100  
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Bus: 619 231-8666  
Fax: 619 231-9593  
E-Mail: post@pkns.com

CO-VICE PRESIDENT  
RECRUITMENT  
- John Penrith  
San Diego Trust Bank  
P.O. Box 859  
La Jolla, CA 92038  
Bus: 619-525-1704  
Fax: 619-525-1705  
E-Mail: jpenrith@san.rr.com

CHAIR, FUNDRAISING  
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- Richard Laventhal  
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Del Mar, CA 92014  
Res: 858 792-1447  
Fax: 858 792-1462  
E-Mail: patndick@adelphia.net

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(INDIVIDUAL PATRONS)  
- Frank V. Arrington  
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E-Mail: frankarrington@yahoo.com

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RECRUITMENT  
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San Diego, CA 92107  
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Fax: 619 699-1378  
E-Mail: jmulvaney@driveralliant.com

CO-CHAIR  
BOARD DEVELOPMENT  
- Andy Ratner  
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La Jolla, CA 92037  
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Fax: 619 557-4710  
E-Mail: andrew.ratner@ubs.com
BIG BROTHERS & SISTERS OF SAN DIEGO COUNTY, INC.
2004 BOARD OF DIRECTORS MEMBERS

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Cell: 858 361-1165
Fax: 858-597-4360
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VICE PRESIDENT
GOLF TOURNAMENT
• Richard Sterger
Rocket Net Companies
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