

Return of Organization Exempt From Income Tax

2003

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning MAY 01, 2003, and ending APRIL 30, 2004

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: LATVIAN FOUNDATION, INC. D Employer identification number: 23-7089477. E Telephone number: (269) 382-1176. F Accounting method: Accrual.

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

G Website: WWW.LATVIESUFONDS.INFO

J Organization type (check only one): 501(c)(3)

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: 95,071.

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

Table with columns for Revenue, Expenses, and Net Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received (Total 8,000); 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments (2,470); 4 Interest on savings and temporary cash investments (23,846); 5 Dividends and interest from securities (8,410); 6a Gross rents; 6b Less rental expenses; 6c Net rental income or (loss); 7 Other investment income (describe CAPITAL GAINS) (345); 8a Gross amount from sales of assets other than inventory; 8b Less cost or other basis and sales expenses; 8c Gain or (loss) (attach schedule); 8d Net gain or (loss) (combine line 8c, columns (A) and (B)) (2,173); 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 (from Part VII, line 103); 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) (40,898); 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)) (59,502); 18 Excess or (deficit) for the year (subtract line 17 from line 12) (18,604); 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) (41,992); 21 Net assets or fund balances at end of year (combine lines 18, 19, and 20) (443,691).

RECEIVED DEC 13 2006 OGDEN, UT IRS-OSC

ENVELOPE POSTMARK DATE DEC 06 2006

SCANNED JAN 08 2007

6-13-14 3

Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>42,000</u> , noncash \$ _____) STATEMENT 3	42,000.	42,000.		
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	0.	0.	0.	0.
26	Other salaries and wages				
27	Pension plan contributions				
28	Other employee benefits				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees	2,103.	-	2,103.	
32	Legal fees				
33	Supplies	181.	103.	52	26.
34	Telephone	54.	36.	12.	6.
35	Postage and shipping	1,549.	750.	500.	299.
36	Occupancy				
37	Equipment rental and maintenance	960.	300.	480.	180.
38	Printing and publications	1,061.	620.	280.	161.
39	Travel	3,605.	1,950.	990.	665.
40	Conferences, conventions, and meetings	3,559.		3,009.	550.
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)				
43a	Other expenses not covered above (itemize) a TAXES	271.		271.	
43b	b PROMOTION	152.			152.
43c	c BANK CHARGES	169.		169.	
43d	d INVESTMENT MANAGEMENT	500.		500.	
43e	e CURRENCY EXCHANGE	3,338.		3,338.	
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15.	59,502.	45,759.	11,704.	2,039.

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

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

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

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

	Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others.)
a LATVIAN EDUCATIONAL AND CULTURAL ACTIVITIES	
(Grants and allocations \$ <u>42,000.</u>)	<u>45,759.</u>
b	
(Grants and allocations \$ _____)	
c	
(Grants and allocations \$ _____)	
d	
(Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	<u>45,759</u>

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

Note.		(A)	(B)
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year	End of year
Assets	45 Cash—non-interest-bearing		45
	46 Savings and temporary cash investments	60,441.	46 80,435.
	47a Accounts receivable	47a	47c
	b Less: allowance for doubtful accounts	47b	
	48a Pledges receivable	48a	48c
	b Less allowance for doubtful accounts	48b	
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50
	51a Other notes and loans receivable (attach schedule).	51a	51c
	b Less allowance for doubtful accounts	51b	
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges		53
	54 Investments—securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54
	55a Investments—land, buildings, and equipment: basis	55a	55c
	b Less accumulated depreciation (attach schedule).	55b	
	56 Investments—other (attach schedule)	STATEMENT 4	56 718,515 690,468.
	57a Land, buildings, and equipment: basis	57a	57c
	b Less: accumulated depreciation (attach schedule).	57b	
	58 Other assets (describe ▶)		58
59 Total assets (add lines 45 through 58) (must equal line 74)		59 778,956 770,903.	
Liabilities	60 Accounts payable and accrued expenses		60
	61 Grants payable	77,154.	61 39,691.
	62 Deferred revenue		62
	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)		64b
	65 Other liabilities (describe ▶ <u>LOANS FROM MEMBERS</u>)	281,499.	65 287,521.
66 Total liabilities (add lines 60 through 65)	358,653.	66 327,212.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	386,325.	67 411,713.
	68 Temporarily restricted	33,978.	68 31,978.
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21).	420,303.	73 443,691.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	778,956	74 770,903.

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 IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.) *N/A*

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return *N/A*

a Total revenue, gains, and other support per audited financial statements . . . ▶

b Amounts included on line **a** but not on line 12, Form 990.

(1) Net unrealized gains on investments . . . \$ _____

(2) Donated services and use of facilities \$ _____

(3) Recoveries of prior year grants . . . \$ _____

(4) Other (specify):

 \$ _____

Add amounts on lines (1) through (4) ▶

c Line **a** minus line **b** ▶

d Amounts included on line 12, Form 990 but not on line **a**:

(1) Investment expenses not included on line 6b, Form 990 . . . \$ _____

(2) Other (specify):

 \$ _____

Add amounts on lines (1) and (2) ▶

e Total revenue per line 12, Form 990 (line **c** plus line **d**) ▶

a Total expenses and losses per audited financial statements . . . ▶

b Amounts included on line **a** but not on line 17, Form 990:

(1) Donated services and use of facilities \$ _____

(2) Prior year adjustments reported on line 20, Form 990 \$ _____

(3) Losses reported on line 20, Form 990 . . . \$ _____

(4) Other (specify):

 \$ _____

Add amounts on lines (1) through (4) ▶

c Line **a** minus line **b** ▶

d Amounts included on line 17, Form 990 but not on line **a**:

(1) Investment expenses not included on line 6b, Form 990 . . . \$ _____

(2) Other (specify):

 \$ _____

Add amounts on lines (1) and (2) ▶

e Total expenses per line 17, Form 990 (line **c** plus line **d**) ▶

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
JANIS KUKAINIS, 1907 AUTUMN CREST LN., KALAMAZOO, MI 49008	RESIDENT AGENT LESS THAN 4	-0-	-0-	-0-
AIJA ABENE, 1907 AUTUMN CREST LN., KALAMAZOO, MI 49008	PRESIDENT 4 TO 8	-0-	-0-	-0-
ELISA FREIMANE, 1907 AUTUMN CREST LN., KALAMAZOO, MI 49008	VICE PRESIDENT 4 TO 8	-0-	-0-	-0-
AIVARS CELMINS, 1907 AUTUMN CREST LN., KALAMAZOO, MI 49008	GRANT MANAGER 4 TO 8	-0-	-0-	-0-
ASTRIDA LEVENŠTEINA, 1907 AUTUMN CREST LN., KALAMAZOO, MI 49008	GRANT MANAGER 4 TO 8	-0-	-0-	-0-
SANDRA ROBEINIECE-INKA, 1907 AUTUMN CREST LN., KALAMAZOO, MI 49008	TREASURER 4 TO 8	-0-	-0-	-0-
EDGARS KIRSS, 1907 AUTUMN CREST LN., KALAMAZOO, MI 49008	SECRETARY LESS THAN 4	-0-	-0-	-0-
HAROLDS BULMANIS, 1907 AUTUMN CREST LN., KALAMAZOO, MI 49008	INTERNAL AUDITOR 4 TO 8	-0-	-0-	-0-

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
 If "Yes," attach schedule—see page 28 of the instructions.

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

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
80b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a	Enter direct and indirect political expenditures. See line 81 instructions 81a 0.		
81b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
82b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III.) 82b N/A		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A		
85a	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A		
85b	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A		
85c	c Dues, assessments, and similar amounts from members 85c N/A		
85d	d Section 162(e) lobbying and political expenditures 85d N/A		
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
85g	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? 85g N/A		
85h	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 85h N/A		
86a	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 86a N/A		
86b	b Gross receipts, included on line 12, for public use of club facilities. 86b N/A		
87a	501(c)(12) orgs. Enter a Gross income from members or shareholders. 87a N/A		
87b	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0; section 4912 0; section 4955 0.		
89b	b 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.		X
89c	c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 0.		
89d	d Enter. Amount of tax on line 89c, above, reimbursed by the organization. 0.		
90a	List the states with which a copy of this return is filed MICHIGAN		
90b	b Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) 90b 0.		
91	The books are in care of TIJA KARKLIS Telephone no. (703) 200-8009 Located at 3507 SE RIVERWOOD LN, VANCOUVER, WA ZIP + 4 98683-6687		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					2,470.
95 Interest on savings and temporary cash investments			14	23,846.	
96 Dividends and interest from securities			14	8,410.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income CAPITAL GAINS			18	345.	
100 Gain or (loss) from sales of assets other than inventory			18	(2,173.)	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		30,428.	2,470.
105 Total (add line 104, columns (B), (D), and (E))					32,898

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

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

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

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

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

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

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

Please Sign Here

Signature of officer: Tija Karklis Date: 1/12/06

Type or print name and title: Tija Karklis, Treasurer

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: _____ Preparer's SSN or PTIN (See Gen. Inst. W): _____

EIN: _____ Phone no: () _____



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

Yes No

- 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 ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)
- 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?
 - b Lending of money or other extension of credit?
 - c Furnishing of goods, services, or facilities?
 - d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
 - e Transfer of any part of its income or assets?
- 3a Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)
- 3b Do you have a section 403(b) annuity plan for your employees?
- 4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?

1		X
2		
2a		X
2b		X
2c		X
2d		X
2e		X
3a	X	
3b		X
4		X

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

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

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

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

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

- 14 An organization organized and operated to test for public safety Section 509(a)(4). (See page 6 of the instructions.)

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

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

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28).	33,911.	27,076.	87,511.	5,170.	153,668.
16 Membership fees received	3,635.	170.	303.	283.	4,391.
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					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	36,268.	40,305.	46,647.	43,225.	166,445.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	73,814.	67,551.	134,461.	48,678.	324,504.
24 Line 23 minus line 17	73,814.	67,551.	134,461.	48,678.	324,504.
25 Enter 1% of line 23	738.	676.	1,345.	487.	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a 6,490
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b -0-
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 324,504.
d Add: Amounts from column (e) for lines 18 166,445. 19 _____ 22 _____ 26b _____					26d 166,445.
e Public support (line 26c minus line 26d total)					26e 158,059.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 48.7%
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: N/A					
(2002) _____ (2001) _____ (2000) _____ (1999) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					
(2002) _____ (2001) _____ (2000) _____ (1999) _____					
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c _____
d Add: Line 27a total _____ and line 27b total _____					27d _____
e Public support (line 27c total minus line 27d total)					27e _____
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15					

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

N/A

Table with 3 columns: Question, Yes, No. Rows include questions 29-35 regarding racial nondiscrimination policies, financial aid, and organizational requirements. Many cells are shaded with diagonal lines, indicating 'N/A' responses.

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) N/A

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

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	N/A	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		
38	Total lobbying expenditures (add lines 36 and 37)		
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39).		
41	Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 . . \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 . \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)		
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36		
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38		

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					N/A
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total	
45 Lobbying nontaxable amount						0.
46 Lobbying ceiling amount (150% of line 45(e)).						0.
47 Total lobbying expenditures						0.
48 Grassroots nontaxable amount						0.
49 Grassroots ceiling amount (150% of line 48(e))						0.
50 Grassroots lobbying expenditures						0.

Part VI-B Lobbying Activity by Nonelecting Public Charities N/A
 (For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
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.)			0.

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

LATVIAN FOUNDATION, INC.

23-7089477

STATEMENT 1

FORM 990

GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
US T NOTE 5.75% 8/15/02	\$25,000.00	\$24,437.50	\$0.00	\$562.50
US T NOTE 8.375% 8/15/06	\$25,000.00	\$27,798.52	\$0.00	(\$2,798.52)
VANGUARD FIXED INCOME	\$2,000.00	\$1937.38	\$0.00	\$62.62
TOTAL TO FORM 990, PART I, LINE 8	\$52,000	\$54,173		\$2,173

STATEMENT 2

FORM 990

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

DESCRIPTION	AMOUNT
UNREALIZED GAIN (LOSS) FROM INVESTMENTS	\$37,591.64
GRANT RESERVE FUND INCREASE FROM CANCELLED GRANT	\$4,401.00
TOTAL TO FORM 990, PART I, LINE 20	\$41,992

STATEMENT 3

FORM 990

CASH GRANTS AND ALLOCATIONS

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIOJSHIP	AMOUNT
SEE ATTACHED			NONE	\$42,000.00
TOTAL TO FORM 990, PART II, LINE 22				\$42,000

LATVIAN FOUNDATION, INC.

23-7089477

STATEMENT 4

FORM 990

OTHER INVESTMENTS

DESCRIPTION

VALUATION METHOD

AMOUNT

SECURITY INVESTMENTS

MARKET VALUE

\$746,025.27

TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B

\$746,025

STATEMENT 5

SCHEDULE A (FORM 990)

STATEMENT OF QUALIFICATIONS TO RECEIVE PAYMENTS
PART III LINE 3

INDIVIDUALS RECEIVING GRANTS QUALIFY THROUGH AN APPLICATION PROCESS IN WHICH THE BOARD OF TRUSTEES REVIEWS THE INTENDED USE OF THE GRANT MONEY AND DECIDES WHETHER TO APPROVE.

Form 990, Part II, Line 22**Cash Grants and Allocations**

Description	Donee's Name	Donee's Adress	Amount
Photographic documentation of Latvians in Displaced Person Camps (www.dpalbums.com)	Marianna Auliciema	Dzirnavu iela 66a-56 Riga, LV-1050, Latvia	\$7,500
Introduction of Latvian Youth to Latvia's National Opera and Ballet Performances	Dr. Eduards Upenieks	2 Park Lane Circle Toronto, ON M3B 1Z7 Canada	\$7,500
VI International Young Latvian Musician's Master Class Camp	Dace Aperane	11 Cat Rocks Drive Bedford, NY 10506 USA	\$3,750
Latvian Folk Song "Dainas" Sculpture Park Preparation	Daina Miezane	Skolas iela 10A Akniste, LV-5208, Latvia	\$3,500
Historical "Jecu" Mill Renovation Project Design	Dainis Ozols	Jungas, Nauksenu Township Valmiera County, LV-4244, Latvia	\$3,200
Latvian Wedding Song CD Recording by the Folklore Group "Ilgi"	Ilga Reizniece	Daugavgrivas iela 70/1-35 Riga, LV-1007, Latvia	\$2,900
Folklore Teaching Material Design for Elementary Schools	Gunta Ziemele	Kaletu Township School Liepāja County, LV-3484, Latvia	\$2,385
Andrupene Museum Folkarts Workshop Construction	Janis Brils	Skolas iela 3, Andrupene, Kraslava County, LV-5687, Latvia	\$2,000
Publication of a Book about "Ergli" During Ten Centuries	Inese Mailite	Jurjanu Brothers Museum "Mengeli", Ergli, LV-4840, Latvia	\$1,900
Microfilming of the American Latvian Newspaper "Laiks" for Latvia's National Library	Ilgvars Spilners	119 Alleyne Drive Pittsburgh, PA 15215, USA	\$1,000
Latvian Children's Folkdance and Poetry Recital Video	Daina Grosa	27 Gissing Street Blackburn South, VIC 3130 Australia	\$1,000

Form 990, Part II, Line 22 Cash Grants and Allocations (Cont. - Page 2)

Latvian Children's Folkdance and Poetry Recital Video	Daina Grosa	27 Gissing Street Blackburn South, VIC 3130 Australia	\$1,000
Latvian Book Collection Support for Ludza's Library	Inta Kusnere	Stacijas iela 41-20 Ludza, LV-5701, Latvia	\$1,000
Performances of the Literary Works of Norberts Neiksanitis	Arija Pavlovica	Asune Elementary School Asune, Kraslava County, LV-5676, Latvia	\$875
Environmental Park "Balkan Hills" Development in Balvi County	Dace Dzerve	Balvi County Dev. Office Brivibas iela 45, Balvi, LV-4501, Latvia	\$790
Publication of Research on Log Buildings in Latgale	Juris Gasuls	Karsava County Dev. Office, Vienibas gatve 53 Karsava, LV-5717, Latvia	\$700
		Total	<u>\$42,000</u>

None of the Donees are related to any of the Latvian Foundation's Trustees.