

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)

2004

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A For the 2004 calendar year, or tax year beginning, 2004, and ending, 20

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

C Name of organization: CLAUDIUS CROZET PARK INC
D Employer identification number: 54-6052265
E Telephone number: (434) 823-2211
F Accounting method: [X] Cash [] Accrual

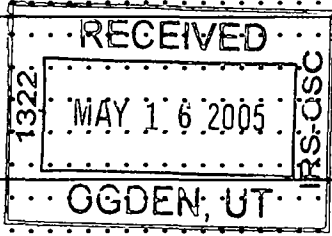
Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? [] Yes [X] No
H(b) If "Yes," enter number of affiliates
H(c) Are all affiliates included? [] Yes [] No
H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [X] No
I Group Exemption Number
M Check [] if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF).

G Website:
J Organization type (check only one) [X] 501(c)(3)
K Check here [] if the organization's gross receipts are normally not more than \$25,000
L Gross receipts Add lines 8b, 8c, 9b, and 10b to line 12: 226,279

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

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, Total. Includes lines 1-21 for revenue and expenses, ending with Total revenue of 105,893 and Total expenses of 133,516.



SCANNED JUL 14 2005

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Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25			
26	Other salaries and wages	26 38,910	38,910		
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29 3,106	3,106		
30	Professional fundraising fees	30			
31	Accounting fees	31 1,835	350	1,485	
32	Legal fees	32			
33	Supplies	33 12,147	11,848	299	
34	Telephone	34 815		815	
35	Postage and shipping	35			
36	Occupancy	36 31,151	15,408	15,743	
37	Equipment rental and maintenance	37			
38	Printing and publications	38 375	375		
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42 44,937	24,493	20,444	
43	Other expenses not covered above (itemize) a <u>GUARD SUIT</u>	43a 240	240		
	b _____	43b			
	c _____	43c			
	d _____	43d			
	e _____	43e			
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 133,516	94,730	38,786	

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? <u>CULTURAL AND RECREATIONAL</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
a PROVIDED SWIMMING, EXHIBITS AND ATHLETIC FACILITIES FOR THE COMMUNITY (Grants and allocations \$ _____)	94,730
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)	94,730

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

		(A)		(B)	
		Beginning of year		End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only					
45	Cash - non-interest-bearing	12,078	45	12,297	
46	Savings and temporary cash investments	83,314	46	98,339	
47 a	Accounts receivable				
b	Less allowance for doubtful accounts		47c		
48 a	Pledges receivable				
b	Less allowance for doubtful accounts		48c		
49	Grants receivable		49		
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50		
A 51 a	Other notes and loans receivable (attach schedule)				
b	Less allowance for doubtful accounts		51c		
52	Inventories for sale or use	1,223	52	1,223	
53	Prepaid expenses and deferred charges		53		
54	Investments - securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54		
55 a	Investments - land, buildings, and equipment basis				
b	Less accumulated depreciation (attach schedule)		55c		
56	Investments - other (attach schedule)		56		
57 a	Land, buildings, and equipment basis	934,621			
b	Less accumulated depreciation (attach schedule)	537,921	57c	396,700	
58	Other assets (describe _____)		58		
59	Total assets (add lines 45 through 58) (must equal line 74)	537,093	59	508,559	
L 60	Accounts payable and accrued expenses	364	60	231	
61	Grants payable		61		
62	Deferred revenue		62		
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63		
64 a	Tax-exempt bond liabilities (attach schedule)		64a		
b	Mortgages and other notes payable (attach schedule)		64b		
65	Other liabilities (describe <u>PAYROLL LIABILITIES</u>)	708	65	708	
66	Total liabilities (add lines 60 through 65)	1,072	66	939	
Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
67	Unrestricted		67		
68	Temporarily restricted		68		
69	Permanently restricted		69		
Organizations that do not follow SFAS 117, check here <input checked="" 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	536,021	72	507,620	
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)	536,021	73	507,620	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	537,093	74	508,559	

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

Part VI Other Information (See page 28 of the instructions)		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	76	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	77	X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	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?	80a	X
b	If "Yes," enter the name of the organization <input type="checkbox"/> 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	
b	Did the organization file Form 1120-POL for this year?	81b	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?	82a	X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
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	
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
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	88	X
89a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> ; section 4912 <input type="checkbox"/> ; section 4955 <input type="checkbox"/>		
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	89b	X
c	Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	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 <input type="checkbox"/> VA		
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90b	1
91	The books are in care of <input type="checkbox"/> JOANN PERKINS TREASURER Telephone no <input type="checkbox"/> 434-823-4987 Located at <input type="checkbox"/> CROZET VIRGINIA ZIP + 4 <input type="checkbox"/> 22932		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	

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

	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 POOL DAILY ADMISSIONS					22,380
b SEASON PASSES					39,506
c SWIM LESSONS					7,511
d POOL RENTAL AND PARTIES					832
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies . . .					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	892	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					1,725
98 Net rental income or (loss) from personal property . .					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					25,184
102 Gross profit or (loss) from sales of inventory					6,057
103 Other revenue					
a PAY TELEPHONE			03	30	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				922	103,195
105 Total (add line 104, columns (B), (D), and (E))					104,117

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)
1	SEE ATTACHMENT NO. 1

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

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

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

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

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

Please 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

Robert A. Mappi 15/12/05

Date

resident

Date	Check if	Preparer's SSN or PTIN (See Gen Inst W)
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SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

2004

Department of the Treasury
Internal Revenue Service

Supplementary Information – (See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization: **CLAUDIUS CROZET PARK INC** Employer identification number: **54-6052265**

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

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 ▶		

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)	1	X
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?	2a	X
b	Lending of money or other extension of credit?	2b	X
c	Furnishing of goods, services, or facilities?	2c	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e	Transfer of any part of its income or assets?	2e	X
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)	3a	X
b	Do you have a section 403(b) annuity plan for your employees?	3b	X
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	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 **BOB**
 - 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 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

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	1,204	95,958	251,250	276,107	624,519
16 Membership fees received				52,217	52,217
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	224,083	221,637	200,471	162,036	808,227
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	892	1,849	3,926	3,818	10,485
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	226,179	319,444	455,647	494,178	1,495,448
24 Line 23 minus line 17	2,096	97,807	255,176	332,142	687,221
25 Enter 1% of line 23	2,262	3,194	4,556	4,942	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 13,744
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 2000 through 2003 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 687,221
d Add Amounts from column (e) for lines 18 10,485 19 _____ 22 _____ 26b _____					26d 10,485
e Public support (line 26c minus line 26d total)					26e 676,736
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 98.47%
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	(2003) _____ (2002) _____ (2001) _____ (2000) _____				
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	(2003) _____ (2002) _____ (2001) _____ (2000) _____				
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 2000 through 2003, 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					

m44

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

▶ Attach to your tax return.

2004
Attachment
Sequence No **67**

Name(s) shown on return

Business or activity to which this form relates

Identifying number

CLAUDIUS CROZET PARK INC

PROGRAM SERVICES - 1

54-6052265

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount See page 2 of the instructions for a higher limit for certain businesses	1	\$100,000
2	Total cost of section 179 property placed in service (see page 2 of the instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	\$400,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see page 2 of the instructions	5	

	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7		8
9	Tentative deduction. Enter the smaller of line 5 or line 8		9
10	Carryover of disallowed deduction from line 13 of your 2003 Form 4562		10
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)		11
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11		12
13	Carryover of disallowed deduction to 2005 Add lines 9 and 10, less line 12 . ▶	13	

Note: Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Deduction Allowance and Other Depreciation (Do not include listed property)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see page 3 of the instructions)	14	
15	Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16	Other depreciation (including ACRS) (see page 4 of the instructions)	16	242

Part III MACRS Depreciation (Do not include listed property) (See page 4 of the instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2003	17	24,019
18	If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B - Assets Placed in Service During 2004 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		1,160	5	HY	200 DB	232
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C - Assets Placed in Service During 2003 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L
b	12-year		12 yrs.		S/L
c	40-year		40 yrs	MM	S/L

Part IV Summary (See page 6 of the instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr	22	24,493
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Name as shown on Return

CLAUDIUS CROZET PARK INC

Employer identification number

54-6052265

FORM 990 PART I LINE 9A

DESCRIPTION	AMOUNT
CONTRIBUTIONS FROM ARTS AND CRAFTS.....	776
TOTAL:	776

FORM 990 PART II LINE 33 PROGRAM SUPPLI

DESCRIPTION	AMOUNT
POOL OFFICE SUPPLY.....	234
POOL GEN SUPPLY.....	2,071
POOL CHEMICALS.....	8,425
POOLSIDE AESTHETICS.....	1,080
SWIM LESSON SUPPLIES FOR POOL.....	38
TOTAL:	11,848

FORM 990 PART II LINE 33 GEN SPLY

DESCRIPTION	AMOUNT
GEN OFFICE.....	157
MISCELLANEOUS.....	107
BANK FEES.....	35
TOTAL:	299

FORM 990 PART II LINE 36 PRO OCCUPANCY

DESCRIPTION	AMOUNT
WATER.....	3,863
ELECTRIC.....	5,160
MAINTENANCE.....	3,026
INSURANCE.....	1,444
CONTRACT LABOR.....	1,915
TOTAL:	15,408

Name as shown on Return

CLAUDIUS CROZET PARK INC

Employer identification number

54-6052265

PART II FUNCTIONAL EXPENSES LINE 36

DESCRIPTION	AMOUNT
WATER.....	712
ELECTRIC.....	1,105
MAINTENANCE.....	1,912
HEATING OIL.....	328
INSURANCE.....	6,592
LICENSES FEES.....	25
REPAIRS TO BLDGS AND GROUNDS.....	5,069
TOTAL:	15,743

LINE 10B COST OF GOODS SOLD

DESCRIPTION	AMOUNT
CONCESSIONS PURCHASES.....	8,779
SALES TAX.....	698
TOTAL:	9,477

LINE 9B DIRECT EXPENSES OF SPECIAL EVENTS

DESCRIPTION	AMOUNT
ARTS AND CRAFTS FESTIVALS.....	74,221
SWIM TEAM EXPENSES.....	11,050
ARTS AND CRAFTS PAYROLL.....	12,000
ARTS AND CRAFTS PAYROLL TAXES.....	991
SWIM TEAM PAYROLL.....	11,605
SWIM TEAM PAYROLL TAXES.....	942
TOTAL:	110,809

PART IV NON-INTEREST BEARING

DESCRIPTION	AMOUNT
GF CHECKING ACCOUNT.....	2,144
CROZET GATORS CHECKING ACCOUNT.....	9,028
ARTS AND CRAFTS CHECKING ACCOUNT.....	1,125
TOTAL:	12,297

Overflow Statement

Name as shown on Return CLAUDIUS CROZET PARK INC	Employer identification number 54-6052265
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LINE 10A GROSS SALES FROM INVENTORY

DESCRIPTION	AMOUNT
POOL CONCESSIONS.....	13,039
SWIM TEAM CONCESSIONS.....	2,495
TOTAL:	15,534

LINE 9A

DESCRIPTION	AMOUNT
ARTS AND CRAFT FESTIVALS.....	113,164
SWIM TEAM.....	23,605
LESS 776 CONTRIBUTIONS.....	(776)
TOTAL:	135,993

LINE 26 SAVING AND TEMP SAVINGS

DESCRIPTION	AMOUNT
MONEY MARKET NB.....	40,410
CD GB.....	57,929
TOTAL:	98,339

Statement Summary

2004

Form 990 - Part V

List of Officers, Directors, Trustees, and Key Employees

Name(s) shown on return		Identifying Number		
CLAUDIUS CROZET PARK INC		54-6052265		
(A) Name and address	Title and Average Hrs	(C) Compensation	(D) Contrib.	(E) Expense
JACK BURTON 6235 MIDWAY RD CVILLE VA	VICE PRES	0	0	0
JON HALL 5565 BROOKWOOD CROZET VA	BOARD MEMBER	0	0	0
KATHY HALL 5565 BROOKWOOD CROZET VA	FEST DIRECTOR	12,000	0	0
BONNIE LUCAS 5555 JAMESTOWN RD CROZET VA	BOARD MEMBER	0	0	0
ROBBIE MAUPIN 200 HEATHER CRST PL CVILLE VA	PRESIDENT	0	0	0
NICK MUNGER 315 HERON LN CVILLE VA	ATTORNEY BRD	0	0	0
DANNY NEWTON 5559 BROOKWOOD CROZET VA	BOARD MEMBER	0	0	0
JOANN PERKINS 5568 ST GEORGE CROZET VA	TREASURER	0	0	0
EMERY TAYLOR 1205 RED PINE CR CROZET	BOARD MEMBER	0	0	0
TONY VIA 6031 JARMANS GAP CROZET VA	BOARD MEMBER	0	0	0
GAYLE WRIGHT 1036 ROSENCRANS CROZET VA	BOARD MEMBER	0	0	0
KELLY STRICKLAND 411 CRANBERRY LANE, CVILLE, VA	SECRETARY	0	0	0
STEVE RAYLE 4896 HIGHLANDS PL, CVILLE, VA	BOARD MEMBER	0	0	0
FRED WILLIAMSON 5623 SUGAR RIDGE RD CROZET VA	BOARD MEMBER	0	0	0
NANCY B CARLEY 1457 CROZET AVE CROZET VA	BOARD MEMBER	0	0	0
NAT PERKINS 1850 BROWNS GAP TRPK CVILLE VA	BOARD MEMBER	0	0	0
SUAN WOODWARD P O BOX 206 WHITE HALL VA	BOARD MEMBER	0	0	0