

**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**

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 2004 calendar year, or tax year beginning **JUL 1, 2004** and ending **JUN 30, 2005**

**B** Check if applicable:

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

**C** Name of organization: **CRISTO REY NETWORK**

**D** Employer identification number: **04-3730980**

Number and street (or P.O. box if mail is not delivered to street address) **Room/suite** **E** Telephone number

**2244 S. WOLCOTT AVE.** **1 N** **773-890-6879**

City or town, state or country, and ZIP + 4 **F** Accounting method  Cash  Accrual

**CHICAGO, IL 60608**  Other (Specify) \_\_\_\_\_

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

*H and I are not applicable to section 527 organizations.*

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates: \_\_\_\_\_

**H(c)** Are all affiliates included? **N/A**  Yes  No (If "No," attach a list.)

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

**G** Website: **cristoreynetwork.org**

**J** Organization type (check only one)  501(c) ( **3** ) (Insert no.)  4947(a)(1) or  527

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

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **1,205,793.**

**M** Check  If the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

<b>1</b>	Contributions, gifts, grants, and similar amounts received:			
<b>a</b>	Direct public support	<b>1a</b>	<b>1,184,537.</b>	
<b>b</b>	Indirect public support	<b>1b</b>		
<b>c</b>	Government contributions (grants)	<b>1c</b>		
<b>d</b>	Total (add lines 1a through 1c) (cash \$ <b>1,184,537.</b> noncash \$ _____)	<b>1d</b>	<b>1,184,537.</b>	
<b>2</b>	Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		
<b>3</b>	Membership dues and assessments	<b>3</b>		
<b>4</b>	Interest on savings and temporary cash investments	<b>4</b>	<b>21,256.</b>	
<b>5</b>	Dividends and interest from securities	<b>5</b>		
<b>6a</b>	Gross rental income	<b>6a</b>		
<b>6b</b>	Less: Rental expenses	<b>6b</b>		
<b>6c</b>	Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>		
<b>7</b>	Other investment income (describe _____)	<b>7</b>		
<b>8a</b>	Gross amount from sales of assets other than inventory	<b>8a</b>		
<b>8b</b>	Less: cost of other basis and sales expenses	<b>8b</b>		
<b>8c</b>	Gain or (loss) (attach schedule)	<b>8c</b>		
<b>8d</b>	Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8d</b>		
<b>9</b>	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
<b>a</b>	Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>		
<b>b</b>	Less: direct expenses other than fundraising expenses	<b>9b</b>		
<b>9c</b>	Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>		
<b>10a</b>	Gross sales of inventory, less returns and allowances	<b>10a</b>		
<b>b</b>	Less: cost of goods sold	<b>10b</b>		
<b>10c</b>	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>		
<b>11</b>	Other revenue (from Part VII, line 103)	<b>11</b>		
<b>12</b>	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>	<b>1,205,793.</b>	
<b>13</b>	Program services (from line 44, column (B))	<b>13</b>	<b>2,556,314.</b>	
<b>14</b>	Management and general (from line 44, column (C))	<b>14</b>	<b>263,743.</b>	
<b>15</b>	Fundraising (from line 44, column (D))	<b>15</b>	<b>463,704.</b>	
<b>16</b>	Payments to affiliates (attach schedule)	<b>16</b>		
<b>17</b>	Total expenses (add lines 16 and 44, column (A))	<b>17</b>	<b>3,283,761.</b>	
<b>18</b>	Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>	<b>-2,077,968.</b>	
<b>19</b>	Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>	<b>9,306,687.</b>	
<b>20</b>	Other changes in net assets or fund balances (attach explanation)	<b>20</b>	<b>0.</b>	
<b>21</b>	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>	<b>7,228,719.</b>	

SCANNED JAN 19 2006

**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 Page 2

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 \$2446535, noncash \$)	22 2,446,535.	2,446,535.		
23 Specific assistance to individuals (attach schedule)	23 7,709.	7,709.	Statement 2	
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc. ....	25 310,556.	0.	262,139.	48,417.
26 Other salaries and wages .....	26 6,036.			6,036.
27 Pension plan contributions .....	27			
28 Other employee benefits .....	28			
29 Payroll taxes .....	29			
30 Professional fundraising fees .....	30 119,381.	15,165.		104,216.
31 Accounting fees .....	31			
32 Legal fees .....	32			
33 Supplies .....	33			
34 Telephone .....	34 17,414.	17,414.		
35 Postage and shipping .....	35 8,789.	8,789.		
36 Occupancy .....	36			
37 Equipment rental and maintenance .....	37			
38 Printing and publications .....	38 11,631.			11,631.
39 Travel .....	39			
40 Conferences, conventions, and meetings .....	40 298,967.	5,563.		293,404.
41 Interest .....	41			
42 Depreciation, depletion, etc. (attach schedule)	42 1,604.		1,604.	
43 Other expenses not covered above (itemize)				
a .....	43a			
b .....	43b			
c .....	43c			
d .....	43d			
e See Statement 1	43e 55,139.	55,139.		
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44 3,283,761.	2,556,314.	263,743.	463,704.

Joint Costs. Check  if you are following SOP 98-2.  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ...  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_;  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III: Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? <b>See attached</b>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)
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.)	
a See Schedule Attached	
(Grants and allocations \$ 2,446,535.)	2,556,314.
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)	2,556,314.

**Part IV Balance Sheets**

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

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	394,187.	45	3,908,789.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable	47a 3,500,000.		
	b Less: allowance for doubtful accounts	47b	47c	3,500,000.
	48 a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	6,775,928.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	705.
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments - land, buildings, and equipment: basis	55a		
	b Less accumulated depreciation	55b	55c	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	57a 9,622.			
b Less accumulated depreciation Stmt 3	57b 1,604.	57c	8,018.	
58 Other assets (describe )		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	9,306,687.	59	7,417,512.	
Liabilities	60 Accounts payable and accrued expenses		60	36,503.
	61 Grants payable		61	
	62 Deferred revenue		62	152,290.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe )		65	
66 Total liabilities (add lines 60 through 65)	0.	66	188,793.	
Net Assets or Fund Balances	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	0.	70	0.
	71 Paid-in or capital surplus, or land, building, and equipment fund	0.	71	0.
	72 Retained earnings, endowment, accumulated income, or other funds	9,306,687.	72	7,228,719.
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)	9,306,687.	73	7,228,719.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	9,306,687.	74	7,417,512.	

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	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
<p>a Total revenue, gains, and other support per audited financial statements ▶ a <b>1,205,793.</b></p> <p>b Amounts included on line a but not on line 12, Form 990:</p> <p>(1) Net unrealized gains on investments ..... \$ _____</p> <p>(2) Donated services and use of facilities ... \$ _____</p> <p>(3) Recoveries of prior year grants ..... \$ _____</p> <p>(4) Other (specify): _____ \$ _____</p> <p>Add amounts on lines (1) through (4) ..... ▶ b <b>0.</b></p> <p>c Line a minus line b ..... ▶ c <b>1,205,793.</b></p> <p>d Amounts included on line 12, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 ... \$ _____</p> <p>(2) Other (specify) _____ \$ _____</p> <p>Add amounts on lines (1) and (2) ..... ▶ d <b>0.</b></p> <p>e Total revenue per line 12, Form 990 (line c plus line d) ..... ▶ a <b>1,205,793.</b></p>	<p>a Total expenses and losses per audited financial statements ..... ▶ a <b>3,283,761.</b></p> <p>b Amounts included on line a but not on line 17, Form 990:</p> <p>(1) Donated services and use of facilities ... \$ _____</p> <p>(2) Prior year adjustments reported on line 20, Form 990 ..... \$ _____</p> <p>(3) Losses reported on line 20, Form 990 ... \$ _____</p> <p>(4) Other (specify): _____ \$ _____</p> <p>Add amounts on lines (1) through (4) ..... ▶ b <b>0.</b></p> <p>c Line a minus line b ..... ▶ c <b>3,283,761.</b></p> <p>d Amounts included on line 17, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 ... \$ _____</p> <p>(2) Other (specify): _____ \$ _____</p> <p>Add amounts on lines (1) and (2) ..... ▶ d <b>0.</b></p> <p>e Total expenses per line 17, Form 990 (line c plus line d) ..... ▶ a <b>3,283,761.</b></p>

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)				
(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
Jeffery D. Thielman 885 Centre Street Newton, MA	Vice President 20	0.	0.	0.
Preston Kendall 2244 S. Wolcott Chicago, IL	Vice President 40	0.	0.	0.
John P. Foley, S. J. 2050 No. Clark St. Chicago, IL	President 40	0.	0.	0.
Kristy Blackmore 2244 S. Wolcott Chicago, IL	Director of Communications 40	0.	0.	0.
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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? If "Yes," attach schedule ▶  Yes  No

Part VI Other Information

76 Did the organization engage in any activity not previously reported to the IRS?
77 Were any changes made in the organizing or governing documents but not reported to the IRS?
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78 b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year?
80 a 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?
80 b If "Yes," enter the name of the organization and check whether it is exempt or nonexempt.
81 a Enter direct or indirect political expenditures. See line 81 Instructions
81 b Did the organization file Form 1120-POL for this year?
82 a 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?
82 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)
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?
83 b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
84 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85 b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85 c Dues, assessments, and similar amounts from members
85 d Section 162(e) lobbying and political expenditures
85 e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85 f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85 g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85 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?
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12
86 b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders
87 b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?
88 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911
88 b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
88 c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
88 d Enter: Amount of tax on line 89c, above, reimbursed by the organization
90 a List the states with which a copy of this return is filed
90 b Number of employees employed in the pay period that includes March 12, 2004
91 The books are in care of

Located at 2244 South Wolcott Suite 1, Chicago, IL ZIP + 4 60608

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year

**Part VII Analysis of Income-Producing Activities** (See page 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) Exclu- sion 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					
95 Interest on savings and temporary cash investments					21,256.
96 Dividends and interest from securities					
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					
100 Gain or (loss) from sales of assets other than inventory					
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.		0.	21,256.
105 Total (add line 104, columns (B), (D), and (E))					21,256.

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)
▼	Interest income from money market

**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)

I am preparing this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true and correct. All information on which preparer has any knowledge

Date: 12/27/05  G. Preston Kendall, Vice Presi  
Type or print name and title

Date: \_\_\_\_\_ Check if self- \_\_\_\_\_ Preparer's SSN or PTIN

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

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

OMB No. 1545-0047

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

**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: **CRISTO REY NETWORK** Employer identification number: **04: 3730980**

**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
Jeffrey D. Thielman 885 Centre St, Newton, MA	President 40			
Preston Kendall 2244 South Wolcott Suite 1 North, Chicago, IL	Vice President 40			
John P. Foley, S.J. 2050 No. Clark St., Chicago, IL	Board Chair 5			
Kristy Blackmore	Treasurer			
Total number of other employees paid over \$50,000 ▶		0		

**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 ▶		0

**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 $\blacktriangleright$ \$ _____ \$ _____ (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.		X
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 a 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 )		X
b Do you have a section 403(b) annuity plan for your employees?		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		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  $\blacktriangleright$  \_\_\_\_\_
  - 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. **N/A**  
 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
16 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) .....					
16 Membership fees received .....					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose .....					
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 .....					
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 .....	0.	0.	0.	0.	0.
24 Line 23 minus line 17 .....					
25 Enter 1% of line 23 .....					
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 .....					26a N/A
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 N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e) .....					26c N/A
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total) .....					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) .....					26f N/A %
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 N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total) .....					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) .....					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) .....					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) .....					27h N/A %
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 .....					

**Part V Private School Questionnaire** (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
<hr/>			
<hr/>			
<hr/>			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<hr/>			
<hr/>			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<hr/>			
<hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)

N/A

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

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.)			
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - 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)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

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

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

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

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(a))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(a))				0.
50	Grassroots lobbying expenditures				0.

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

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

N/A

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

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

Yes	No	Amount
		0.

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



Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	Management and General											
	Laptops	06/27/05	SL	3.00	16	9,622.			9,622.			1,604.
	* 990 Page 2 Total											
	Management and General					9,622.		0.	9,622.	0.	0.	1,604.
	* Grand Total 990 Page											
	2 Depr.					9,622.		0.	9,622.	0.	0.	1,604.

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Form 990	Other Expenses	Statement	1
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	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Description				
Maintance and repair	3,559.	3,559.		
Office Expense	25,533.	25,533.		
Small Equipments	6,043.	6,043.		
Insurance	7,751.	7,751.		
Dues and Subscriptions	1,365.	1,365.		
Utilities	1,718.	1,718.		
Rent	9,170.	9,170.		
Total to Fm 990, ln 43	55,139.	55,139.		

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Form 990	Specific Assistance to Individuals	Statement	2
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	Amount
Description	
Food, shelter and clothing for indigents, etc.	7,709.
Total to Form 990, Part II, line 23	7,709.

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Form 990	Depreciation of Assets Not Held for Investment	Statement	3
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	Cost or Other Basis	Accumulated Depreciation	Book Value
Description			
Laptops	9,622.	1,604.	8,018.
Total to Form 990, Part IV, ln 57	9,622.	1,604.	8,018.

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Form 990	List of States Receiving Copy of Return Part VI, Line 90	Statement	4
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States

Illinois  
Illinois

Cristo Rey Network  
2050 N. Clark Street  
Chicago, Illinois 60614-4788

**Form 990; Part III; Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose?

The Cristo Rey Network ("the Network") has been established for the charitable purpose of promoting and supporting Catholic secondary schools that provide quality college preparatory education to young people from low-income families. Specifically, the Network seeks to promote schools that are modeled after Cristo Rey Jesuit High School in Chicago, Illinois, and share the commitment to maximizing their students' potential by providing a quality education integrated with a corporate internship program that enables students to finance the majority of their education and to gain valuable experience working in a professional environment. The Network will engage solely in activities which support or benefit one or more specified Catholic secondary schools, all of which are publicly supported organizations described in sections 501(c)(3) and 509(a)(1) of the Internal Revenue Code of 1986, as amended (the "Code"). None of its activities will be in furtherance of a purpose other than supporting or benefiting such organizations.

The Network seeks to foster cooperation and collaboration among its member schools. For example, the Network will sponsor opportunities for the leaders and faculty of member schools to share ideas and information to maximize each school's effectiveness in achieving its mission. The Network will collect and analyze data regarding operation of the schools and will provide advice to its member schools regarding budgeting, fundraising and curriculum development. In order to ensure that students at its member schools receive the highest quality education and guidance, the Network also will provide professional development programs for personnel and faculty of the member schools. The activities of the Network will be conducted in such a manner to uphold the mission of the member schools and to promote a program of on-going spiritual formation for the students, faculty, staff and leaders of the member schools.

Additionally, the Network will support communities wishing to open new schools, based on the model of the Network's member schools, to provide economically disadvantaged students with a quality education integrated with a corporate internship program. The Network will provide training and consulting on matters such as site selection, transportation, establishment of a corporate internship program, budgeting, scheduling, and other administrative matters. The Network activities will be directed to the successful establishment of such new schools.

Cristo Rey Network  
Form 990 - Part III  
Details on grant and allocation to others

The following information from QuickBooks, account 555-Feasibility Study Coords, 751-CRN/Gates Distribution, 753-Feasibility Study Grants, 755- Pass-thru grants to Schools

Activity Classification	Donee's name	Street Address	City, State and Zip Code	Donee's Relationship	Property description	Amount given	Date of Gift
555 - Feasibility Study Coords Grant for 1/2 cost of Feasibility Study in Newark	Catholic Archbishop of Newark		Newark, NJ	Feasibility Study Sponsor	Check	\$ 35,000	11/22/2004
Grant for Feasibility Study in Oakland.	Catholic Diocese of Oakland		Oakland, CA	Feasibility Study Sponsor	Check	\$ 35,000	1/10/2005
Grant for Feasibility Study in Birmingham	Congregation of the Passion - Holy Cross Province Birmingham, AL			Feasibility Study Sponsor	Check	\$ 40,000	2/7/2005
Grant for Feasibility Study in Sacramento	California Province of Jesuits		Sacramento, CA	Feasibility Study Sponsor	Check	\$ 40,000	2/8/2005
					subtotal	\$ 150,000	
751-CRN/Gates Distribution							
Gates Grant Distribution	San Juan Diego Catholic High School		Austin, Tx	Member School	Check	\$ 160,000	8/1/2004
Gates Grant Distribution	St Martin de Porres High School - Cleveland		Cleveland, OH	Member School	Check	\$ 160,000	8/1/2004
Gates Grant Distribution	North Cambridge Catholic High School		Cambridge, MA	Member School	Check	\$ 160,000	8/1/2004
Gates Grant Distribution	Arupe Jesuit High School		Denver, CO	Member School	Check	\$ 160,000	8/1/2004
Gates Grant Distribution	Cristo Rey Jesuit High School		Chicago, IL	Member School	Check	\$ 150,000	8/1/2004
Gates Grant Distribution	Noire Dame High School		Lawrence, MA	Member School	Check	\$ 160,000	8/1/2004
Gates Grant Distribution	Verbum Dei High School		Los Angeles, CA	Member School	Check	\$ 160,000	8/1/2004
Gates Grant Distribution	Cristo Rey New York High School		New York, NY	Member School	Check	\$ 160,000	8/1/2004
Gates Grant Distribution	De La Salle North Catholic High School		Portland, OR	Member School	Check	\$ 120,000	8/1/2004
Gates Grant Distribution	San Miguel High School		Tucson, AZ	Member School	Check	\$ 160,000	8/1/2004
Gates Grant Distribution	St Martin de Porres High School - Waukegan		Waukegan, IL	Member School	Check	\$ 160,000	8/1/2004
Advertising for 60 Minutes	San Juan Diego Catholic High School		Austin, Tx	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	North Cambridge Catholic High School		Cambridge, MA	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	St Martin de Porres High School - Cleveland		Cleveland, OH	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	Arupe Jesuit High School		Denver, CO	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	Cristo Rey Jesuit High School		Chicago, IL	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	Noire Dame High School		Lawrence, MA	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	Cristo Rey New York High School		New York, NY	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	North Cambridge Catholic High School		Portland, OR	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	San Miguel High School		Tucson, AZ	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	St Martin de Porres High School - Waukegan		Waukegan, IL	Member School	Check	\$ 900	11/22/2004
Advertising for 60 Minutes	Verbum Dei High School		Los Angeles, CA	Member School	Check	\$ 900	11/22/2004
Final Gates/CRN Distribution	San Juan Diego Catholic High School		Austin, Tx	Member School	Check	\$ 160,000	11/22/2004
					subtotal	\$ 1,879,900	

Cristo Rey Network  
Form 990 - Part III  
Details on grant and allocation to others

The following information from QuickBooks, account 555-Feasibility Study Coords, 751-CRNI/Gates Distribution, 753-Feasibility Study Grants, 755- Pass-thru grants to Schools

Activity Classification	Donee's name	Street Address	City, State and Zip Code	Donee's Relationship	Property description	Amount given	Date of Gift
753 - Feasibility Study Grants							
CRN Feasibility Study Grant	Maryland Province of Jesuits		Baltimore, MD	Feasibility Study Sponsor	Check	\$ 70,000	8/3/2004
CRN Feasibility Study Grant	Catholic Bishop of Memphis		Memphis, TN	Feasibility Study Sponsor	Check	\$ 70,000	8/3/2004
CRN Feasibility Study Grant	Wisconsin Province of Jesuits		Minneapolis, MN	Feasibility Study Sponsor	Check	\$ 68,915	8/3/2004
CRN Feasibility Study Grant	Catholic Bishop of Omaha		Omaha, NE	Feasibility Study Sponsor	Check	\$ 60,750	8/3/2004
CRN Feasibility Study Grant	Catholic Archdiocese of Washington, DC		Washington, DC	Feasibility Study Sponsor	Check	\$ 68,620	8/3/2004
				subtotal		\$ 338,285	
755-Pass thru Grants to Schools							
Merril Lynch John Williams from dep 10/27/04	North Cambridge Catholic High School		Cambridge, MA	Member School	Check	\$ 1,500	10/27/2004
Lumina Grant for College Prep	San Juan Diego Catholic High School		Austin, TX	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	North Cambridge Catholic High School		Cambridge, MA	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	St Martin de Porres High School		Cleveland, OH	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	Arrupe Jesuit High School		Denver, CO	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	Notre Dame High School		Lawrence, MA	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	Cristo Rey New York High School		New York, NY	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	San Miguel High School		Tucson, AZ	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	St Martin de Porres High School		Waukegan, IL	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	Verbium Dei High School		Los Angeles, CA	Member School	Check	\$ 7,500	11/5/2004
Lumina Grant for College Prep	De La Salle North Catholic High School		Portland OR	Member School	Check	\$ 7,500	12/10/2005
Eiapesiry Donation from Edward Kelley	North Cambridge Catholic High School		Cambridge, MA	Member School	Check	\$ 250	1/10/2005
Eiapesiry Donation from Thomas Kelley	Notre Dame High School		Lawrence, MA	Member School	Check	\$ 250	1/10/2005
Eiapesiry Donation from Thomas Kittle-Kamp	Cristo Rey Jesuit High School		Chicago IL	Member School	Check	\$ 350	1/10/2005
On-line Gift Via CRN Website from Eric & Sheila London on 2/27/05	Cristo Rey Jesuit High School		Chicago, IL	Member School	Check	\$ 1,000	3/7/2005
				subtotal		\$ 78,350	
				Grand total grant allocation and distribution		\$ 2,446,535	

Form **8868**  
(Rev. December 2004)  
Department of the Treasury  
Internal Revenue Service

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

OMB No. 1545-1708

File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

#### Part I Automatic 3-Month Extension of Time—Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8738 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (0 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension. Instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile).

Type or print	Name of Exempt Organization <b>CRISTO REY NETWORK</b>	Employer identification number <b>04 3730980</b>
File by the due date for filing year return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions <b>2244 S. WOLCOTT SUITE #1 NORTH</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CHICAGO, IL 60608</b>	

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

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 8069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 9870 |

The books are in the care of PRESTON KENDALL

Telephone No. (773) 890-6888 FAX No. (773) 890-6879

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until MARCH 15, 2006 to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶  calendar year 20... or

▶  tax year beginning JULY 1, 2005, and ending JUNE 30, 2005

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 8069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ \_\_\_\_\_

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ \_\_\_\_\_

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form 8868 (Rev. 12-2004)

Page 2

- 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  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

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

- |                                      |   |                                    |
|--------------------------------------|---|------------------------------------|
| <input type="checkbox"/> Form 990    | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 8277 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 8069 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 4720                                |                                    |

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

- The books are in the care of  Telephone No.  FAX No.
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until \_\_\_\_\_, 20\_\_\_\_\_.
- For calendar year \_\_\_\_\_, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_\_ and ending \_\_\_\_\_, 20\_\_\_\_\_.
- If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- State in detail why you need the extension \_\_\_\_\_

- If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 8069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ \_\_\_\_\_
- If this application is for: Form 990-PF, 990-T, 4720, or 8069, 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. \$ \_\_\_\_\_
- Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ \_\_\_\_\_

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature: [Signature] Title: VICE PRESIDENT Date: December 6, 2005

**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 actions otherwise required to be made on a timely 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 extended due date of the return for which an extension was requested.
- Other \_\_\_\_\_

Director \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

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.

Type or print	Name
	Number and street (include suite, room, or apt. no.) or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)