

Return of Organization Exempt from Income Tax

Under section 501(c) of the Internal Revenue Code (Except Private Foundation)

Form 990
Department of the Treasury
Internal Revenue Service

For the calendar year 1978, or fiscal year beginning 1/1/78, 1978 and ending 12/31/78

Please type, print or attach label. See instruction 9.	Name of organization <u>...</u>	A Employer identification number (see instruction 9)
	Address (number and street) <u>...</u>	B If gross receipts are not normally more than \$10,000 (see general instruction A(5)) check here and do not complete Parts I and II.
	City or town, State, and ZIP code <u>...</u>	C If exemption application is pending, check here D If address changed, check here
E Exempt under section 501(c) (.....). Check appropriate box, if applicable—Exempt under section <input checked="" type="checkbox"/> 501(c) OR <input type="checkbox"/> 501(d).		F Fair market value of assets at end of year (see instruction P) <u>50,000</u>

All Organizations With Gross Receipts of More Than \$10,000—Complete Part I and Lines 1 Through 8, Part II. If Line 8, Part I is Over \$25,000 Also Complete Lines 9 Through 12, Part II.

For rounding off money items to whole dollar amounts see instructions

Part I	Part II	Part III
1 Gross sales and receipts (from line 8, Part II), other than shown on lines 5 and 6		
2 Cost of goods sold		
3 Cost or other basis and sales expenses of assets sold		
4 Gross income (line 1 minus sum of lines 2 and 3)		
5 Gross dues and assessments from members and affiliates		
6 Gross contributions, gifts, grants and similar amounts received (see instruction 6)		
7 Total (add lines 4, 5 and 6)		
8 Gross receipts for filing requirements tests (add lines 1, 5 and 6)	<u>234,736</u>	
9 Expenses attributable to amount on line 4	<u>193,470</u>	
10 Expenses attributable to amount on line 6	<u>109,284</u>	
11 Other program-related expenditures	<u>17,407.97</u>	
12 Excess of receipts over expenditures (line 7 minus sum of lines 9, 10 and 11) Increase or (Decrease) in net worth (see instruction 12)		
		Beginning of year
13 Total assets	<u>479,733</u>	
14 Total liabilities	<u>0</u>	
15 Net worth	<u>479,733</u>	End of year

16 Have you engaged in any activities not previously reported to the Internal Revenue Service? If "Yes," attach a detailed description of these activities Yes

17 Have any changes not previously reported to the Internal Revenue Service been made in your organizing or governing documents? If "Yes," attach a copy of the changes

18 (a) Is this a group return filed for affiliated organizations covered by a group exemption letter? (See instruction G.)
(b) Is this a separate return filed by an organization covered by a group exemption letter?
If "Yes" to either, enter your central or parent organization's four-digit group exemption number (GEN). (See instruction G.)

19 Have you filed a tax return on Form 990-T, "Exempt Organization Business Income Tax Return," for this year?

20 Was there a liquidation, dissolution, termination or substantial contraction during the year? (See instruction N.) If "Yes," attach a schedule of the dispositions for the year showing type of assets disposed of, the dates disposed, the cost or other basis, the fair market value on dates of disposition and the names and addresses of the recipients of the assets distributed

21 (a) Enter amount expended directly or indirectly for political purposes \$ 11,000
(b) Did you file Form 1120-POL, "U.S. Income Tax Return of Certain Political Organizations," for this year?

22 Clubs exempt under section 501(c)(7): (a) Enter initiation fees and capital contributions included in line 5
(b) Enter gross receipts from general public for use of club facilities included in line 1. (See instruction 22.)
(c) Does your governing instrument or any written policy statement provide for discrimination against any person because of race, color or religion? Yes

23 Organizations exempt under section 501(c)(12) enter: (a) The total amount of gross income received from members or shareholders.
(b) The total amount of gross income received from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)

24 If you operate a school (see instructions for Part VI, Schedule A), do you certify that you have complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 537, covering racial nondiscrimination? If "No," attach an explanation Yes

25 The books are in care of ... Telephone No. ...
Located at ...

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 taxpayer) is based on all information of which the preparer has any knowledge.

Signature of officer _____ Date _____
Paid preparer's signature (see instruction I) _____
Title _____
Paid preparer's address (or employer's name and address) _____

Gross Sales and Receipts (line 1, Part I)	1 Gross sales or receipts from all business activities (state nature). (For business activities not reported on Form 990-T, explain your reason for not reporting them on Form 990-T. See instruction J.)	
	2 Interest	
	3 Dividends	
	4 Gross rents	
	5 Gross royalties	
	6 Gross amount received from sale of assets, excluding inventory items (attach schedule—see instruction 6)	
	7 Other income (attach schedule—do not include contributions, gifts, grants, etc.)	Humane Sale
	8 Total (add lines 1 through 7). Enter here and on line 1, page 1	753541

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Organizations With Gross Receipts on Line 8, Part I of More Than \$25,000 Complete Lines 9 Through 43.		(A) Attributable to amount reported on line 4, Part I	(B) Attributable to contributions, etc., reported on line 6, Part I	(C) Other program-related disbursements
Expenses (lines 9, 10 and 11, Part I)	9 Contributions, gifts, grants and similar amounts paid (see instruction 9)			
	10 Disbursements to or for members (attach schedule—see instruction 10)			
	11 Compensation of officers, directors and trustees (see instruction 11)			
	12 Other salaries and wages			
	13 (a) Pension plans (see instructions). (Enter number of plans _____)			
	(b) Employee benefit programs (see instruction 13(b))			
	14 Interest			
	15 Taxes			
	16 Rent			
	17 Depreciation (and depletion) (attach schedule—see instruction 17)			
	18 Direct fees paid for raising contributions, gifts, grants, etc.			
19 Other (attach schedule)				
20 Total. Enter here and on lines 9, 10 and 11, page 1				

		Beginning of tax year		End of tax year	
		(A) Amount	(B) Total	(C) Amount	(D) Total
Assets	21 Cash:				
	(a) Savings and interest-bearing accounts				
	(b) Other				
	22 Accounts receivable net				
	23 (a) Notes receivable net (attach schedule)				
	(b) Loans to officers, directors and trustees				
	24 Inventories				
	25 Gov't obligations: (a) U.S. and instrumentalities				
	(b) State and related subdivisions, etc.				
	26 Investments in corporate bonds, etc. (attach schedule)				
	27 Investments in corporate stocks (attach schedule)				
	28 Mortgage loans (number of loans _____)				
	29 Other investments (attach schedule)				
30 Depreciable (depletable) assets (attach schedule)					
(a) Minus accumulated depreciation (depletion)					
31 Land					
32 Other assets (attach schedule)					
33 Total assets (enter here and on line 13, Part I)					
Liabilities	34 Accounts payable				
	35 Contributions, gifts, grants, etc., payable				
	36 (a) Bonds and notes payable (attach schedule)				
	(b) Mortgages payable				
	(c) Loans from officers, directors and trustees				
37 Other liabilities (attach schedule)					
38 Total liabilities (enter here and on line 14, Part I)					
Net Worth	39 Capital stock or principal fund balance				
	40 Paid-in or capital surplus				
	41 Retained earnings or income fund balance				
	42 Total net worth (enter here and on line 15, Part I)				

Part VII Reason for Non-Private Foundation Status (See instructions for definitions)—Continued

(d) If applicable, enter the number of beneficiary or supported organizations exempt under:

- (1) Section 501(c)(4)
- (2) Section 501(c)(5)
- (3) Section 501(c)(6)

(e) Check here if your organization's sole or primary function is to provide funds to the beneficiary or supported organizations.

10 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 3 of instructions.)

Support Schedule (Complete only if block 6, 7 or 8, page 2, is checked)

Calendar year (or fiscal year beginning in) >	(a)	(b)	(c)	(d)	(e)
	1977	1976	1975	1974	Total
11 Gifts, grants and contributions received. (Do not include unusual grants. See line 24 below)	6048	6815.	7057	6667	26587.
12 Membership fees received					
13 Gross receipts from admissions, sales of merchandise, performance of services, or furnishing of facilities in any activity which is not an unrelated business within the meaning of section 513					
14 Gross income from interest, dividends, rents, royalties, and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975	\$ 825	6963.	6845	10146	29779
15 Net income from unrelated business activities					
16 Tax revenues levied for your benefit and either paid to you or expended on your behalf					
17 The value of services or facilities furnished by a governmental unit to you without charge (do not include the value of services or facilities generally furnished to the public without charge)					
18 Other income (do not include gain or (loss) from sale of capital assets)—attach schedule					
19 Total of lines 11 through 18	11373.	13778	13907.	16813.	56366
20 Line 19 minus line 13	11373	13778	13907	16813.	56366
21 Enter 1% of line 19	1137.3	1377.8	1390.7	1681.3	

22 Organizations described in blocks 6 or 7, page 2:

- (a) Enter 2% of amount in column (e), line 20
- (b) Attach a list showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for the above four-year period exceeded the amount shown in (a) above. Enter the sum of all excess amounts here

N/A

23 Organizations described in block 8, page 2:

(a) Attach a list, with respect to amounts shown on lines 11, 12, and 13, showing the name of, and total amounts received in each year from, each person who is a "disqualified person," and enter the sum of such amounts for each year:

- (1)..... (2)..... (3)..... (4) NONE

(b) Attach a list showing the name and amount included in line 13 for each person (other than a "disqualified person"), but only if the amount for each year exceeds the greater of the amounts on line 21 for each year, or \$5,000. The term "person" includes a bureau or agency of a governmental unit, and each person described in section 170(b)(1)(A)(i) through (vi). Enter the sum of such excess amounts for each year:

- (1)..... (2)..... (3)..... (4) N/A

24 Organizations described in Blocks 6, 7, and 8, page 2, that have received any unusual grants during any of the above tax years, attach a list for each year showing the name of the contributor, the date and amount of grant, and a brief description of the nature of such grant. Do not include such grants in line 11 above. (See page 3 of instructions.)

