## Form **990**

Retur. If Organization Exempt Froi Income Tax

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

200

2002

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

_		2002 calendar year, or tax year period beginning U	JL 1, 2002 and e	iding JUN 30,	2003	
В	Check If upplicable	e: Please C Name of organization		1	Employer i	dentification number
Γ	Addre		WORLD SERVICES.	INC	95-3	090596
	Name	type. Number and street (or P O box if mail is no			Telephone	
	Initial	10727 MODDMORE DE ACE				773-9999
	Final	Instruc- City or town state or country and 71D . 4			F Accounting met	
	Amen	ded Chamchiobuti Ca 0131	_	1	Other (specify)	
	Applic	eation • Section 501(c)(3) organizations and 4947(a)(1	) nonexempt charitable trusts	H and I are not applic		tion 527 organizations.
-		must attach a completed Schedule A (Form 99	0 or 990-EZ).	H(a) Is this a group ret		
G 1	Neb sit	e: NWW . NA . ORG		H(b) if "Yes," enter nun		
		ation type (check only one) X 501(c) ( 3 ) (insert	no.) 4947(a)(1) or 527	H(c) Are all affiliates in	cluded? 1	N/A Yes No
		nere 🕨 🔲 if the organization's gross receipts are norm		(If "No," attach a li H(d) Is this a separate	St.) return filed b	V 20 Or-
		ation need not file a return with the IRS; but if the organizat		ganization covere	d by a group	ruling? Yes X No
i	n the m	ail, it should file a return without financial data. Some state	es require a complete return.	I Enter 4-digit GEN	<b>&gt;</b>	
		(1)		M Check ▶ ☐ if	the organiza	tion is <b>not</b> required to attach
L	Gross r	eceipts: Add lines 6b, 8b, 9b, and 10b to line 12	9015886.	Sch. B (Form 990	, 990-EZ, or	990-PF).
P	irt I	Revenue, Expenses, and Changes in I		nces	(September)	•
	1	Contributions, gifts, grants, and similar amounts receive	1			
	а	- 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	100000	70336	7.	
	b					1
	C	Government contributions (grants)	1c	<del>'</del>		702267
	d	Total (add lines 1a through 1c) (cash \$	703367. noncash \$	)		703367.
	2	Program service revenue including government fees and				1702134.
	3	Membership dues and assessments			3	26222
	4	Interest on savings and temporary cash investments		26233.		
	5	Dividends and interest from securities		••••••••••	5	
	6 a	77.77.77.77.77.77.77.77.77.77.77.77.77.				
	b					
						RECEIVED
	C	Net rental income or (loss) (subtract line 6b from line 6a			6c Atto	RECEIVED may General's Office
ane	7	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe ►	)		) 400	mey General's Office
venue	C	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe ► Gross amount from sale of assets other	) (A) Securities	(B) Other	) 400	RECEIVED mey General's Office UN 2 8 2010
Revenue	7 8 a	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe ► Gross amount from sale of assets other than inventory	(A) Securities		) A)1101	UN 28 2010
Revenue	7 8 a b	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe ► Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses	(A) Securities 8a		<b>A</b> (0)	UN 28 2010
Revenue	7 8 a b	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe ▶ Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule)	(A) Securities  8a 8b 8c	(B) Other	<b>Ano</b>	UN 28 2010
Revenue	7 8 a b c	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B)	(A) Securities 8a 8b 8c	(B) Other	<b>Ano</b>	UN 28 2010
Revenue	7 8 a b c d	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)	(A) Securities  Ba  8b  8c	(B) Other	<b>Ano</b>	UN 28 2010
Revenue	7 8 a b c d	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses  Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$	(A) Securities  8a 8b 8c ) of contributions	(B) Other	<b>Ano</b>	UN 28 2010
Revenue	7 8 a b c d	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule) Gross revenue (not including \$ reported on line 1a)	(A) Securities  8a 8b 8c  of contributions  9a	(B) Other	Gh.	UN 28 2010
Revenue	7 8 a b c d 9 a	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule) Gross revenue (not including \$ reported on line 1a) Less: direct expenses other than fundraising expenses	(A) Securities 8a 8b 8c 8c 9a 9b	(B) Other	86	UN 28 2010
Revenue	6 7 8 8 8 8 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses  Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses  Net income or (loss) from special events (subtract line 9	(A) Securities  8a 8b 8c ) of contributions  9a 9b	(B) Other	6 8d 9c	UN 28 2010
Revenue	7 8 a b c d 9 a b	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe ►  Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses  Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses  Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a	(B) Other	96 1.	UN 28 2010
Revenue	7 8 a b c d 9 a b c	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses  Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses  Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a 10b	(B) Other  649334 208697	9c 1.3.3.	UN 28 2010
Revenue	7 8 a b c d 9 a b c	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule) Gross revenue (not including \$ reported on line 1a) Less: direct expenses other than fundraising expenses Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances Less: cost of goods sold Gross profit or (loss) from sales of inventory (attach schedule)	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a 10b edule) (subtract line 10b from line	(B) Other  649334 208697 (0a) STMT 1	96 1 3	UN 28 2010 Registry of aritable Trusts
Revenue	7 8 a b c d 9 a b c	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe   Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule) Gross revenue (not including \$ reported on line 1a) Less: direct expenses other than fundraising expenses Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances Less: cost of goods sold Gross profit or (loss) from sales of inventory (attach sch Other revenue (from Part VII, line 103) Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c)	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a 10b edule) (subtract line 10b from line	(B) Other  649334 208697  (Oa) STMT 1	9c 1. 3.	UN 28 2010 Registry of aritable Trusts
	7 8 a b c d 9 a b c 10 a b c	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe   Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses  Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances  Less: cost of goods sold  Gross profit or (loss) from sales of inventory (attach schedule)  Other revenue (from Part VII, line 103)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c)  Program services (from line 44, column (B))	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a 10b edule) (subtract line 10b from line	(B) Other  649334 208697  (Oa) STMT 1	9c 1 3 10c 11  12	UN 28 2010 Registry of aritable Trusts  4406368. 90811.
	7 8 a b c d 9 a b c 10 a b c	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe   Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses  Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances  Less: cost of goods sold  Gross profit or (loss) from sales of inventory (attach schedule)  Other revenue (from Part VII, line 103)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c)  Program services (from line 44, column (B))	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a 10b edule) (subtract line 10b from line	(B) Other  649334 208697  (Oa) STMT 1	9c 1 3 10c 11  12	UN 28 2010  Registry of aritable Trusts  4406368. 90811. 6928913.
	7 8 a b c d 9 a b c 10 a b c	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses  Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances  Less: cost of goods sold  Gross profit or (loss) from sales of inventory (attach schedule)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c)  Program services (from line 44, column (B))  Management and general (from line 44, column (C))	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a) 10a 10b edule) (subtract line 10b from line	(B) Other  649334 208697  10a) STMT 1	9c 1310c 1112 1314	UN 28 2010  Registry of aritable Trusts  4406368.  90811. 6928913. 4995605.
Expenses	7 8 a b c d 9 a b c 10 a b c 11 12	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe   Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses  Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances  Less: cost of goods sold  Gross profit or (loss) from sales of inventory (attach schedule)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c)  Program services (from line 44, column (B))  Management and general (from line 44, column (C))  Fundraising (from line 44, column (D))  Payments to affiliates (attach schedule)	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a 10b edule) (subtract line 10b from line	(B) Other  649334 208697  10a) STMT 1	9c 1. 3. 10c 11 12 13 14 15 16	4406368. 90811. 6928913. 4995605. 555063.
	7 8 a b c d 9 a b c 10 a b c 11 12 13 14 15 16 17	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe  Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses  Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances  Less: cost of goods sold  Gross profit or (loss) from sales of inventory (attach schedule)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c)  Program services (from line 44, column (B))  Management and general (from line 44, column (C))  Fundraising (from line 44, column (D))  Payments to affiliates (attach schedule)  Total expenses (add lines 16 and 44, column (A))	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a 10b edule) (subtract line 10b from line	(B) Other  649334 208697  10a) STMT 1	9c 1. 3. 10c 11 12 13 14 15 16 17	4406368. 90811. 6928913. 4995605. 5550668.
Expenses	7 8 a b c d 9 a b c 10 a b c 11 12 13 14 15 16 17 18	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe   Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule) Gross revenue (not including \$ reported on line 1a) Less: direct expenses other than fundraising expenses Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances Less: cost of goods sold Gross profit or (loss) from sales of inventory (attach sch Other revenue (from Part VII, line 103) Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c) Program services (from line 44, column (B)) Management and general (from line 44, column (C)) Fundraising (from line 44, column (D)) Payments to affiliates (attach schedule) Total expenses (add lines 16 and 44, column (A)) Excess or (deficit) for the year (subtract line 17 from line	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a)  10a 10b edule) (subtract line 10b from line 4, and 11)	(B) Other  649334 208697 (0a) STMT 1	9c 1. 3. 10c 11 12 13 14 15 16 17 18	4406368. 90811. 6928913. 4995605. 5550668. 1378245.
Expenses	7 8 a b c d 9 a b c 10 a b c 11 12 13 14 15 16 17 18 19	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe   Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule) Gross revenue (not including \$ reported on line 1a) Less: direct expenses other than fundraising expenses Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances Less: cost of goods sold Gross profit or (loss) from sales of inventory (attach sch Other revenue (from Part VII, line 103) Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c Program services (from line 44, column (B)) Management and general (from line 44, column (C)) Fundraising (from line 44, column (D)) Payments to affiliates (attach schedule) Total expenses (add lines 16 and 44, column (A)) Excess or (deficit) for the year (subtract line 17 from line Net assets or fund balances at beginning of year (from line	(A) Securities  8a 8b 8c ) of contributions  ga 9b of from line 9a)  10a 10b edule) (subtract line 10b from line 4, and 11)	(B) Other  649334 208697 (0a) STMT 1	9c 1. 3. 10c 11 12 13 14 15 16 17 18 19	4406368. 90811. 6928913. 4995605. 5550668. 1378245. 3130846.
	7 8 a b c d 9 a b c 10 a b c 11 12 13 14 15 16 17 18 19 20	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe   Gross amount from sale of assets other than inventory  Less: cost or other basis and sales expenses Gain or (loss) (attach schedule)  Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule)  Gross revenue (not including \$ reported on line 1a)  Less: direct expenses other than fundraising expenses Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances  Less: cost of goods sold  Gross profit or (loss) from sales of inventory (attach schedule)  Other revenue (from Part VII, line 103)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c)  Program services (from line 44, column (B))  Management and general (from line 44, column (C))  Fundraising (from line 44, column (D))  Payments to affiliates (attach schedule)  Total expenses (add lines 16 and 44, column (A))  Excess or (deficit) for the year (subtract line 17 from line Net assets or fund balances at beginning of year (from line Other changes in net assets or fund balances (attach expenses)	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a) 10a 10b edule) (subtract line 10b from line 3, and 11)	(B) Other  649334 208697 (Oa) STMT 1	9c 1	4406368. 90811. 6928913. 4995605. 5550668. 1378245. 3130846. 0.
Expenses	7 8 a b c d 9 a b c 10 a b c 11 12 13 14 15 16 17 18 19 20 21	Net rental income or (loss) (subtract line 6b from line 6a Other investment income (describe   Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B) Special events and activities (attach schedule) Gross revenue (not including \$ reported on line 1a) Less: direct expenses other than fundraising expenses Net income or (loss) from special events (subtract line 9 Gross sales of inventory, less returns and allowances Less: cost of goods sold Gross profit or (loss) from sales of inventory (attach sch Other revenue (from Part VII, line 103) Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c Program services (from line 44, column (B)) Management and general (from line 44, column (C)) Fundraising (from line 44, column (D)) Payments to affiliates (attach schedule) Total expenses (add lines 16 and 44, column (A)) Excess or (deficit) for the year (subtract line 17 from line Net assets or fund balances at beginning of year (from line	(A) Securities  8a 8b 8c ) of contributions  9a 9b of from line 9a) 10a 10b edule) (subtract line 10b from line 4, and 11)  12) 120 1873, column (A)) Islanation) 1818, 19, and 20)	(B) Other  649334 208697 (Oa) STMT 1	9c 1	4406368. 90811. 6928913. 4995605. 5550668. 1378245. 3130846.

, P	Functional Expenses and (4	) orga	nizations and section 4947	'(a)(1) nonexempt chanabl	e trusts but optional for oth	iers.				
	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	242858.	218572.	24286.					
26	Other salaries and wages	26	1747964.	1573168.	174796.					
27	Pension plan contributions	27	44518.	40066.	4452.					
28	Other employee benefits	28	178491.	160641.	17850.					
29	Payroll taxes	29	186145.	167531.	18614.					
30	Professional fundraising fees	30	24.024	00050	2420	<del> </del>				
31	Accounting fees	31	31391.	28252.	3139.					
32	Legal fees	32	9184.	8266.	918.					
33	Supplies	33	F0176	50250	F010					
34	Telephone	34	58176.	52358.	5818. 9207.					
35	Postage and shipping	35	92069.	82862.	35411.					
36	Occupancy	36	354109. 151163.	318698. 136047.	15116.					
37	Equipment rental and maintenance	38	173721.	156349.	17372.					
38	Printing and publications	39	207852.	187067.	20785.	<del></del>				
39 40	Travel	40	1241613.	1117452.	124161.					
41		41	6305.	5675.	630.					
42	Interest Depreciation, depletion, etc. (attach schedule)	42	106338.	95704.	10634.					
100,000	Other expenses not covered above (itemize):	42	100330.	J370±.	10034.					
	Cirio expenses not estated above (normale).	43a								
		43b								
		43c								
d		43d								
е	SEE STATEMENT 2	43e	718771.	646897.	71874.					
44	Total functional expenses (add lines 22 through 43), organizations completing columns (B)-(D), carry these totals to lines 13-15	44	5550668.	4995605.	555063.	0.				
	nt Costs. Check 🕨 🔛 if you are following SOP 98					10A-10A-10A-10A-10A-10A-10A-10A-10A-10A-				
Are	any joint costs from a combined educational campai	gn and	fundraising solicitation re	ported in <b>(B)</b> Program servi	ces? ▶ [	Yes X No				
If "Y	'es," enter (i) the aggregate amount of these joint cos	ts \$ _	· ;	(ii) the amount allocated to	Program services \$	<del>;</del>				
	the amount allocated to Management and general \$		; and	(iv) the amount allocated to	Fundraising \$					
	art III Statement of Program Servi									
Wha	at is the organization's primary exempt purpose? 🕨	SI	EE STATEMENT	3		Drogram Capuica				
Alla	rganizations must describe their exempt purpose achievement	n in n ol	ner and consider manner. State	the number of eliente consed ou	bligations issued ata Discuss	Program Service Expenses				
achl	evernents that are not measurable. (Section 501(c)(3) and (4) or					(Required for 501(c)(3) and (4) orgs., and 4947(a)(1)				
	ations to others.)	ATTA	PATCHE METHER ATA	DOORTOG AMON	VACITO /NA \	trusts; but optional for others.)				
а	MAINTENANCE OF CORRESPO			NG AND DISTR						
	GROUPS AND SERVICE COMM WORLD SERVICE CONFERENCE									
	OF THE ARCHIVES AND FIL			Grants and allocations \$	MATHIENANCE	3607933.				
b	OF THE ARCHIVES AND FIL	ويدا	OF NA	arants and anddations of		3007333.				
_	<del></del>									
			<del></del>							
(Grants and allocations \$										
c	<del></del>									
			(0	Grants and allocations \$	)	or to the total the text of th				
d										
	<del></del>									
				rants and allocations \$	)					
	Other program services (attach schedule)			rants and allocations \$						
2230 01-2	Total of Program Service Expenses (should equal li	ne 44,	column (B), Program serv	ices)	<u>\</u>	3607933.				
	2.02					Form 990 (2002)				

Form 990 (2002)

INC

Form 990, (2002)

	Vhere required, attached schedules and amo hould be for end-of-year amounts only.	unts within the des	cription column	(A) Beginning of year		<b>(B)</b> End of year
4	5 Cash - non-interest-bearing			1661581.	45	1300502.
4				165555.	46	1428376.
7	o curings and temperary easi investments	******************************	_			1120070
4	7 a Accounts receivable	478	902803.			
1	b Less; allowance for doubtful accounts		25023.	813986.	47c	877780
	E Coot, anomalios for addition addition					<u> </u>
4	8 a Pledges receivable	a concentration of the concentration	14/1888 170 (01.417/00.40420.1.4 pt 1.47/1984/82)			
	b Less; allowance for doubtful accounts				48c	
4					49	· · · · · · · · · · · · · · · · · · ·
5						
	and key employees				50	
Assets	1 a Other notes and loans receivable		-			
ISS	b Less: allowance for doubtful accounts	51b			51c	
5				562840.	52	664838.
5				649651.	53	1091366.
54		▶ [	Cost FMV		54	
1	5 a Investments - land, buildings, and					
	equipment: basis	55a			***	
1						
	b Less: accumulated depreciation	55b			55c	
56		ACAMOMENT CANONIC IN THE CONTRACT OF THE CONTR			58	
57	7 a Land, buildings, and equipment: basis		1542440.			
	b Less: accumulated depreciation	57b	1231675.	793041.	57c	310765.
58		SEE STA	TEMENT 4 )	97504.	58	495003.
59		equal line 74)		4744158.	59	6168630.
60	Accounts payable and accrued expenses			541624.	60	158656.
81	Grants payable				61	
62				938355.	62	1282286.
<b>≘</b> 63					63	
ea 64 64	a Tax-exempt bond liabilities				64a	
2	<b>b</b> Mortgages and other notes payable			133333.	64b	87931.
65	Other liabilities (describe	SEE STA	TEMENT 5 )		65	130666.
			}			
66				1613312.	66	<u> 1659539.</u>
Or	ganizations that follow SFAS 117, check here	and comple	te lines 67 through			
တ္	69 and lines 73 and 74.		1		\$366	
මු   <b>67</b>	************************************			3130846.	67	4509091.
E 68					88	
D 69	the contraction of the contracti				69	
5 Or	ganizations that do not follow SFAS 117, check i	nere 🕨 💹 and d	complete lines			
8	70 through 74.					
Net Assets or Fund Balances 12	The second control of the second control contr				70	
98 71	to recommend the state of the s				71	
¥ 72	<del>-</del> .				72	
Z 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) m	ust equal line 21)		3130846.	73	4509091.
74	Total liabilities and net assets / fund balanc	es (add lines 66 and	/3)	4744158.	74	6168630.

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.

Form	1990 (2002) NARC II	70	ANONYMOUS V	JART.	D SERVIC	TNC	95-3	30905	96 Page 4	
*	rt IV-A Reconciliation of Rever Financial Statements w	nue	per Audited	WORLD SERVIC /, INC 95-3090596 Page Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return						
8	Return Total revenue, gains, and other support per audited financial statements	► a	6928913	a	Total expenses and ic	ments	>	a	5550668.	
b	Amounts included on line a but not on line 12, Form 990:			b (1)	Amounts included on line 17, Form 990: Donated services	line a but not on				
(1)	Net unrealized gains on investments \$				and use of facilities Prior year adjustment					
(2)	Donated services and use of facilities \$			(-,	reported on line 20, Form 990		8 2 3			
(3)	Recoveries of prior			(3)	Losses reported on					
(4)	year grants \$S Other (specify):	-		(4)	line 20, Form 990 Other (specify):	. 5				
	Add amounts on lines (1) through (4)			4	Add amounts on lines			b	0.	
c d	Line a minus line b  Amounts included on line 12, Form 990 but not on line a:	> c	6928913.	d	Line a minus line b Amounts included on 990 but not on line a	line 17, Form	🏲	C	5550668.	
(1)	investment expenses			(1)	Investment expenses					
	not included on line 6b, Form 990\$	_			not included on line 6b, Form 990	.\$				
(2)	Other (specify):\$	_		(2)	Other (specify):	\$				
е	Add amounts on lines (1) and (2)			е	Add amounts on lines Total expenses per lin		🕨	d	0.	
(line c plus line d) • 6928913.    Part V   List of Officers, Directors, Trustees, and Key			Fmpl	(line c plus line d)	e even if not comper		е	5550668.		
ii-ii-	(A) Name and address			(B) Ti	tle and average hours er week devoted to position		(D) Cont employ plans	ributions to ee benefit deferred ensation	(E) Expense account and other allowances	
								<u> </u>		
SE:	E STATEMENT 6				<del> </del>	242858.	22	428.	10541.	
		- <b>-</b> -								
				-						
					8					
				-						
		<del></del>								
75 D	olid any officer, director, trustee, or key employee rganizations, of which more than \$10,000 was pu	receiv rovide	ve aggregate compensati ed by the related organiza	on of mations?	ore than \$100,000 from	n your organization			Form <b>990</b> (2002)	

	990 (2002) NARC ICS ANONYMOUS WORLD SERVIC 3, INC 95-3090	1596		Page 5
Pa	nt VI Other Information		Yes	-
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?	77	AND RESERVE	X
	If "Yes," attach a conformed copy of the changes.	Section.		
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
þ	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?	79	-284774-82A	X
	If "Yes," attach a statement			
80 a				
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	reconstant o	X
b	If "Yes," enter the name of the organization			
	and check whether it is exempt or nonexempt.	Constant,		
	Enter direct or indirect political expenditures. See line 81 instructions			
b	Did the organization file Form 1120-POL for this year?	81b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than		1	
	fair rental value?	82a	SINSTERNA	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.)			
83 a	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	
84 a	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? N/A	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	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.			
C	Dues, assessments, and similar amounts from members			
đ	Section 162(e) lobbying and political expenditures 85d N/A			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f N/A			
9	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) organizations. Enter, a Initiation fees and capital contributions included on line 12 86a N/A	4 9 100 4		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
<b>B</b> 7	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A			
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,	1000	10.011.2-11.00.2	- Contract
	or an entity disregarded as separate from the organization under Regulations sections 301,7701-2 and 301,7701-3?			1
	If "Yes," complete Part IX	88		Х
39 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911 ▶ <u>0 .</u> ; section 4912 ▶ <u>0 .</u> ; section 4955 ▶ <u>0 .</u>			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit		31.371.713	300000000000000000000000000000000000000
_	transaction during the year or did it become aware of an excess benefit transaction from a prior year?		l	
	If "Yes," attach a statement explaining each transaction	89b	1	x
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	OSU		
	sections 4912, 4955, and 4958			0.
ď	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
00 a	List the states with which a copy of this return is filed NONE			<u> </u>
				16
)1	Number of employees employed in the pay period that includes March 12, 2002	2 0	000	46
. 1	The books are in care of ► TOM RUSH  Telephone no. ► 818-77	3-9	779	
	Located at N. 10727 NODDHORE DI AGE GITAMGRIODMIT GETTERS	404		
	Located at ► 19737 NORDHOFF PLACE, CHATSWORTH, CALIFORNIA ZIP+4 ► 9	131	<u>r                                     </u>	
2	Seeking 40.47(-)(4)			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		PL	
3041	and enter the amount of tax-exempt interest received or accrued during the tax year   92	<u>N/2</u>	7	
1.22-0		LATE	000 (	COURT

1	VII Analysis of Income-			(See page 31 of the instruc		7, 1NC 93-	3030330 (4900
	Enter gross amounts unless other			ted business income		ded by section 512, 513, or 514	(5)
indica		wise	(A)	(B)	(C)	(D).	(E) Related or exempt
			Business code	Amount	Exclu- sion	Amount	function income
	rogram service revenue:	mc	0000		code	<del> </del>	1702134.
	CONVENTION RECEIP						1/02134.
b,				<del> </del>	<del> </del>	<del> </del>	f
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e .	Lodinara (Madianid noumants	~~~~~		<del> </del>	<del> </del>		
	Medicare/Medicaid payments				<del> </del>	<del> </del>	<del></del>
	ees and contracts from government ag	And the page of the page of the page.				<del> </del>	<del> </del>
	lembership dues and assessments				14	26233.	
	nterest on savings and temporary cash				1 4	20233.	
	ividends and interest from securities				MARKE		
	et rental income or (loss) from real est				N. NANEL VAN		
	ebt-financed property			<del> </del>			<del> </del>
	ot debt-financed property		<del></del>	<del> </del>		<del> </del>	
	et rental income or (loss) from person			<del> </del>			
	ther investment income			<del> </del>			<del> </del>
	ain or (loss) from sales of assets						
0	ther than inventory			<del></del>			
	et income or (loss) from special events						4406368.
	ross profit or (loss) from sales of inver	ntory					4400300.
	ther revenue:				0.1	00011	
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e _	ubtatel (add ashimas (D) (D) and (E)		enzanaraz arak		grown gart	117044	6109502
104 Si	ubtotal (add columns (B), (D), and (E))	)		0.	3 9 9 9 7 1 1 1 2 3 4 3 3	·	
105 To	otal (add line 104, columns (B), (D), ar	nd (E))	• • • • • • • • • • • • • • • • • • • •			·	6108502. 6225546.
105 To	otal (add line 104, columns (B), (D), ar Line 105 plus line 1d, Part I, should	nd (E)) d equal the amou	ınt on line 1	2, Part I.			6225546.
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Part  (a) D  (b) D  Note: Please  Sign  Here	ntal (add line 104, columns (B), (D), ar ine 105 plus line 1d, Part I, should Mill Relationship of Action. Explain how each activity for whexempt purposes (other than by SEE STATEMENT Information Regarding, address, and EIN of corporation, artnership, or disregarded entity  N/A  Information Regarding the organization, during the year, regid the organization, during the year, regid the organization, during the year, part of the corporation of the	ind (E)) d equal the amounties to the aich income is report providing funds for 7  ing Taxable \$ Percentage of ownership interes  graph of the aich aich aich aich aich aich aich aich	Accompline 1. Ac	ishment of Exemp  (E) of Part VII contributed (Ses).  ies and Disregarde (C)  Nature of activities  ted with Personal rectly, to pay premiums on a city, on a personal benefit coist, all information of which preparer all information of which preparer (C)  Date  Ty	Benea persontract?	rposes (See page 32 of the tantity to the accomplishment to the accomplishment to the accomplishment (D)  Total income  Pfit Contracts (See page 32 of the (D)  Total income  Pfit Contracts (See page 32 of the (D)  Total income	instructions.) of the organization's  instructions.)  (E) End-of-year assets  e 33 of the instructions.) Yes X No Yes X No

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Or \_\_nization Exempt Under Sect. \_n 501(c)(3)

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

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2002

Name of the organization Employer identification number 95 3090596 NARCOTICS ANONYMOUS WORLD SERVICES, INC 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.") (b) Title and average hours per week devoted to d) Contributions to (e) Expense account and other (a) Name and address of each employee paid employee benefit plans & deferred compensation (c) Compensation more than \$50,000 position allowances ASST EX DIR REBECCA MEYER 19737 NORDHOFF PL, CHATSWORH, CA 9131140 85248 8665 0. MIKE POLIN EVENTS MGR 19737 NORDHOFF PL, CHATSWORH, CA 9131140 6090. 0. 59187 ANN PETERS PROD MANAGER 19737 NORDHOFF PL, CHATSWORH, CA 9131140 58250 7210. 0. TOM RUSH CONTROLLER 0. 19737 NORDHOFF PL, CHATSWORH, CA 9131140 55285 8768. IT MANAGER STEVE LANTOS 19737 NORDHOFF PL, CHATSWORH, CA 9131140 56024 3962 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

Sched	dule A (F	orm 990 or 990-EZ) 2002 NA. DTICS ANONYMOUS WORLD SERV ES, INC 95-309	059	6	age 2
Pa	it III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1 [	Ouring th	e year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence			
р	ublic op	inion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the	1		
le	obbying	activities 🕨 \$ (Must equal amounts on line 38, Part VI-A,			
		f Part VI-B.)	1	CASSES SAN	X
		ions that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking			TREE STATE
		st complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
		e year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors,			
		directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes,"			
	-	detailed statement explaining the transactions.)			
		nange, or leasing of property?	2a	100000000000000000000000000000000000000	X
a	عاد, فمن	lange, or leasing or property:			
b L	ending o	of money or other extension of credit?	2b	-	Х
c F	urnishin	g of goods, services, or facilities?	2c		х
	Davman*	of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	x	ļ
a F	ayını	טו טייוויף וויסמוטיו (טו אַמַאַיוויצווג טו דפווויטעו זיפוויפנוג טו פאף וויסטיס זו וויטיפ נוומוי שָּוֹ,טיטיס ני	20	1	1
ρТ	Fransfer (	of any part of its income or assets?	2e		x
	14110101				
3 E	oes the	organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	3	L	X
4 D	o you ha	ave a section 403(b) annuity plan for your employees?	4		X
		a statement to explain how the organization determines that individuals or organizations receiving grants or loans therance of its charitable programs "qualify" to receive payments.			
Pai	t IV	Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)			
The o	rganizati	on 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	님	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	لــا	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city,			
10		and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv)			
10	س	(Also complete the Support Schedule in Part IV-A.)	•		
11a	$\Box$	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 <b>Support Schedule</b> in Part IV-A.)			
12	X	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.)			
40		An organization that is not controlled by any disqualified necessary (other than foundation measure) and controlled by any disqualified	ibod !		
13	لبيا	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations descr (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).)	ivea IN;		
		Provide the following information about the supported organizations. (See page 5 of the instructions.)			
			(b)Lin	e num	ber
		(a) Name(s) of supported organization(s)		om abo	
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			
		Schedule A (Form	990 or	990-E2	2002

Plant Print	adule A (Form 990 or 990-EZ) 2002 Note: You may use the	Complete only if you ch	ONYMOUS WORI ecked a box on line 10 tructions for converting	, 11, or 12.) Use cash	method of accounti	3090596 Page 3
Cale	ndar year (or fiscal year					
begi 15	nning in)  Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
	grants. See line 28.)					
16	Membership fees received					
17	Gross receipts from admissions,					
	merchandise sold or services performed, or furnishing of		j			}
	facilities in any activity that is		}	ļ		}
	related to the organization's charitable, etc., purpose	6411297.	5702574.	5495562.	2332579.	19942012.
18	Gross income from interest,	0411297.	3702374.	3493302.	2332313.	15542012.
	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	20975.	39537.	19454.	4773.	84739.
19	Net income from unrelated business		1			ļ
	activities not included in line 18  Tax revenues levied for the					
20	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	6432272.	5742111.	5515016.	2337352.	20026751.
24	Line 23 minus line 17	20975.	39537.	19454.	4773.	84739.
25	Enter 1% of line 23	64323.	57421.	55150.	23374.	
26	Organizations described on lines 1		± 500		1.3000, co.60, to.	N/A
D	Prepare a list for your records to sho unit or publicly supported organization					
	Do not file this list with your return.		1 <del>2</del> 0		1.6 10 00	N/A
C	Total support for section 509(a)(1) to					N/A
d	Add: Amounts from column (e) for li	nes: 18	19			
	×	22	26b		▶ 26d	N/A
e	Public support (line 26c minus line 2	?6d total)			<u> 26e</u>	N/A
	Public support percentage (line 26e					N/A %
27	Organizations described on line 12:					
	records to show the name of, and to such amounts for each year:	iai amounts received in ea	ch year from, each "disqua	alified person." Do not file	e this list with your retu	rn. Enter the sum of
	(2001) 0	(2000)	0 /10	001	0 (1008)	0
Ь	For any amount included in line 17 th	nat was received from each	h person (other than "diso	ualified persons") prepar	re a list for your records	to show the name of
	and amount received for each year, the		9	100 100 10 70	(5)	5
	described in lines 5 through 11, as w					
	the larger amount described in (1) or					
	(2001) 0	• (2000)	0 • (199	99)	O • (1998)	0.
C	Add: Amounts from column (e) for li	nes: 15		16		
	Add: Amounts from column (e) for lin	<u>942012.</u> 20_		21	> 27c	19942012.
ď	Add: Line 2/a total	U and	line 27b total	****	U . ► 27d	0.
e f	Public support (line 27c total minus I Total support for section 509(a)(2) te	ine 270 total)	23 column (e)	276	D026751	19942012.
g	Public support percentage (line	e 27e (numerator) divi	ded by line 27f (denon	ninator))	)U26/51. ▶ 27g	99.5769%
•	Investment income percentage					.4231%
28 L	Inusual Grants: For an organization of show, for each year, the name of the our return. Do not include these grants	described in line 10, 11, contributor, the date and				a list for your records of file this list with
	our return. Do not include these grants	N(	ONE		Schedu	ile A (Form 990 or 990-EZ) 2002

Page 3

Part V	<b>Private</b>	School	Questionnaire	(See page 7 of	the instructions.

		-
N	1	Δ

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing	29	Yes	No
30	instrument, or in a resolution of its governing body?  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.)			
32 a	Does the organization maintain the following:  Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32b		
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.)	32d		
33 a b	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies?			
c d e	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies?	33c 33d 33e		
f g h	Use of facilities? Athletic programs? Other extracurricular activities?	33g	90.6423	- Labbara
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a b	Does the organization receive any financial aid or assistance from a governmental agency?  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	35	495 (16)X.)	

Schedule A (Form 990 or 990-EZ) 2002

Check	<b>Promote</b>		Expenditures by Eled ONLY by an eligible organ	ecting Public Cha	r <b>ities</b> (See pa					_95	N/A
Limits on Lobbying Expenditures  (The term "expenditures" means amounts paid or incurred.)  To be completed for ALL electing organizations  N/A  To fall lobbying expenditures to influence a bejoistive body (direct lobbying)  38 Total lobbying expenditures to influence a bejoistive body (direct lobbying)  37 Total lobbying expenditures to influence a bejoistive body (direct lobbying)  38 Total lobbying penditures to influence a bejoistive body (direct lobbying)  39 Office examply purpose expenditures as a direct solution of the second to the s	Chi					vou ch	ecker	i "a" and "i	imited (	control	provisions apply.
Total lobbying expenditures to influence public opinion (grassroots lobbying).  38 Total lobbying expenditures to influence a lepiciative body (direct lobbying).  37 Total lobbying expenditures to influence a lepiciative body (direct lobbying).  38 Total lobbying expenditures (add lines 39 and 37).  39 Total lobbying propose expenditures.  39 Total lobbying propose expenditures.  40 Total acewarp purpose expenditures.  40 Total acewarp purpose expenditures.  41 Total acewarp purpose expenditures.  42 Total acewarp purpose expenditures.  43 Subtractive 41 Total acewarp purpose expenditures.  44 Total acewarp purpose expenditures.  45 Subject on the 41 total acewarp purpose expenditures.  46 Total acewarp purpose expenditures.  47 Total acewarp purpose expenditures.  48 Subject on the 41 total acewarp purpose expenditures.  49 Subject on the 41 total acewarp purpose.  49 Carsarcos expenditures.  40 Subject line 42 from line 40 is.  40 Subject line 42 from line 40 is.  41 Subject line 42 from line 40 is.  42 Carsarcos contaxable amount (entar 25% or line 41 is more than line 38 acewary 51,500,000 contaxable amount (entar 25% or line 41 is more than line 38 acewary 51,500,000 contaxable amount (entar 25% or line 41 is more than line 38 acewary 51,500,000 contaxable amount (entar 25% or line 41 is more than line 38 acewary 51,500,000 contaxable amount (entar 25% or line 41 or line 41 is more than line 38 acewary 51,500,000 contaxable amount (entar 25% or line 41 or line 41 is more than line 38 acewary 51,500,000 contaxable acewary 51,500,000 con	011	Li	imits on Lobbying	Expenditures	<u></u>	<u> </u>		(a Affiliated	) I group		(b) To be completed for ALL
38 Total lobbying expenditures to influence public polition (grassroots lobbying) 37 Total lobbying perpenditures to influence a legislative body (direct lobbying) 37 Sharp total lobbying perpenditures and clines 63 and 37) 39 Total lobbying perpenditures (and lines 63 and 37) 49 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt purpose expenditures (and lines 38 and 39) 40 Total exempt on the service of the	_	(Trie ter	in expenditures means am	ounts paid of incurred.)		1	-	NT / Z			
37 Total lobbying expenditures to influence a lepicative body (direct lobbying)  38 Total lobbying expenditures  39 Total lobbying perioditures  40 Total exempt purpose expenditures  40 Total exempt purpose expenditures  40 Total devempt purpose expenditures  41 Example 1 Lobbying notabable amount I Emit the amount from the following table  If the amount on line 40 is  1 The lobbying points able amount I Emit the amount from the following table  If the amount on line 40 is  1 The lobbying notabable amount I Emit the amount from the following table  If the amount on line 40 is  1 The lobbying notabable amount I Emit the amount from the following table  If the amount on line 40 is  1 The lobbying notabable amount I Emit 200,000  2 Strip 2 The amount on the second of the second of 1,000,000  3 The second of 1,000,000  4 Strip 2 The amount of 1,000,000  4 Strip 2 The second of 1,000,000  5 The second of 1,000,000  4 Strip 2 The second of 1,000,000  5 The second of 1,000,000  4 Strip 2 The second of 1,000,000  5 The second of 1,000,000  4 Strip 2 The second of 1,000,000  5 The second of 1,000,000  4 Strip 2 The second of 1,000,000  5 The second	20	Total lobbying expenditures t	to influence public opinion (	araceroote lobbying)		36		14/2	2		
38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontable amount. Enter the amount from the following table— If the amount in line 40 is — The following nontable amount is— Not ow \$500,000 — 500 or the amount on site of the consolour in line 40 is — The following nontable amount is— Not ow \$500,000 — 500 or the amount on site 40 is — The following nontable amount is— Not ow \$500,000 — 500 or the amount on site 40 is — The following nontable amount is— Not ow \$500,000 — \$100,000 pit \$100,000 — \$100,000 pit \$100,000 — \$100,000 pit \$100 or \$100,000 — \$100,000	0.00			Ext. Two traces managements							
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41 Lobbying nontaxable amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not owe \$500,000 or \$500,000 or \$500,000 part 9% of the amount on line 40 is— Stop,000 or \$500,000 or \$500,000 or \$500,000 part 9% of the amount on line 40 is— Over \$500,000 but not over \$100,000 or \$500,000 part 9% of the amount on line 40 is— Over \$1,000,000 or \$100,000 or \$100,0	10010										
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Ow st 17,00,000  ***Subtract line 42 from line 35. Enter -0- if line 41 is more than line 36  42. Grassroots nontaxable amount (enter 25% of line 41)  43. Subtract line 41 from line 36. Enter -0- if line 41 is more than line 36  44. Subtract line 41 from line 38. Enter -0- if line 41 is more than line 36  44. Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38  44. **Learn Averaging Period Under Section 501(h)**  **Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.**  **Leave 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.  **Lobbying Expenditures During 4-Year Averaging Period**  **Lobbying Expenditures During 4-Year Averaging Period**  **Divide are beginning in   2002 2001 2000 1999 Total**  **Divide are beginning in   2002 2001 2000 1999 Total**  **Divide Assortion Enter an amount (150% of line 45(e))  **Quarticle Assortion Enter an amount (150% of line 45(e))  **Quarticle Assortion Enter an amount (150% of line 45(e))  **Quarticle Assortion Enter an Amount Enter and Indian Enter an Amount Enter and Indian Enter						41	20: 35×2	······································	engista a a a straig	relevance i ra	ning of the second second device before the second
42 Grassroots nontaxable amount (enter 25% of line 41) 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 44 Subtract line 41 from line 36. Enter -0- if line 41 is more than line 38  Caution: // 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.  Lobbying Expenditures During 4-Year Averaging Period  N/A  Calendar year (or  (a)  (b)  (c)  (d)  (e)  (fiscal year beginning in)  2002  2001  2000  1999  Total  54 Lobbying ceiling amount  (150% of line 45(e)).  46 Crassroots nontaxable amount  0.48 Grassroots nontaxable amount  0.49 Grassroots ceiling amount  (150% of line 46(e)).  50 Grassroots indige amount  (150% of line 46(e)).  10 Jenaturia B)  Corresponditures  (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 lepisation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  4 Volunteers  4 Pald staff or management (include compensation in expenses reported on lines e through h.)  4 Mellings to members, egistators, or the public  4 Mellings to members, egistators, or the public  5 Grassroot ontax or the decimal processes of the public objects on the organizations for inobying purposes  5 Grants to other organizations for inobying purposes  6 Direct contact with legislators, their staffs, government officials, or a legislative body  6 Rallics, donorstations, or published or broadcast statements  6 Grants to other organizations conventions, speeches, lectures, or any other means  1 Total lobbying expenditures (Add lines of through h.)  1 Tyes 1 to ory the above, also catalcan a statement gliving a detailed description of the lobbying acti											THE
43 Subtract line 42 from line 36. Enter-0-it line 42 is more than line 36 44 Subtract line 41 from line 38. Enter-0-it line 41 is more than line 38 44 Subtract line 41 from line 38. Enter-0-it line 41 is more than line 38  Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 from yours 50 on page 17 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  N/A  Calendar year (or (a) (b) (e) (d) (e) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	40								ecternity?	ist saccest	
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.  **A'vest 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.)  **Lobbying Expenditures During 4-Year Averaging Period**  **N/A**  **Callendar year (or fiscal year beginning in)						_	-				<del> </del>
Castion: 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.)    Lobbying Expenditures During 4-Year Averaging Period   N/A							-				
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.)    Lobbying Expenditures During 4-Year Averaging Period   N/A	77	Subtract line 4   non line 50.	. Litter -0- ii iine 4 i is mote i			3.00 M		4311411111			
(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.)    Lobbying Expenditures During 4-Year Averaging Period   N/A		Caution: If there is an amo	ount on either line 43 or li	ne 44, you must file For	n 4720.						
fiscal year beginning in)    2002    2001    2000    1999    Total  45 Lobbying nontaxable amount    46 Lobbying ceiling amount    (150% of line 45(e))    47 Total lobbying expenditures    48 Grassroots nontaxable amount    (150% of line 48(e))    49 Grassroots nontaxable amount    (150% of line 48(e))    50 Grassroots lobbying expenditures    60 Grassroots lobbying expenditures    70 Contains the first of the reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)  80 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    8 Paid staff or management (Include compensation in expenses reported on lines e through h.)    8 Media advertisements    4 Mailings to members, legislators, or the public    8 Publications, or published or broadcast statements    9 Grants to other organizations for lobbying purposes    9 Direct contact with legislators, their staffs, government officials, or a legislative body    h Ralles, demonstrations, seminars, conventions, speeches, lectures, or any other means    1 Total lobbying expenditures  (Add lines c through h.)    9 O .	0-1		(-)	<del></del>	r		ar A	eraging P			
amount  46 Lobbying ceiling amount (150% of line 45(e)).  7 Total lobbying expenditures.  9 Expenditures.  9 Grassroots nontaxable amount (150% of line 48(e)).  9 Grassroots ceiling amount (150% of line 48(e)).  9 Grassroots ceiling amount (150% of line 48(e)).  9 Grassroots lobbying expenditures.  9 Concept of line 48(e).  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 e 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.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)  1 Total lobbying expenditures (Add lines c through h.)	fisc	al year beginning in)									. 250
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Section   Sect	Schedu Part	VII Information Reg	2 NA. <u>OTICS ANONY</u> garding Transfers To and zations (See page 12 of the instr	d Transactions and	EERV ES, INC 95-30 d Relationships With Nonchari		6	Page 6
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(vi) Parformance of services or membership or fundrishing solicitations.  Sharing of facilities, equipment, mailing lists, other massets, or pald employees  If the answer to any of the above is "vies," complete the following schedule. Column (b) should always show the fair marter value of the goods, other assets, or services given by the reporting or ganization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received.  (a)  (b)  Name of noncharitable exempt organization  Description of transfers, transactions, and sharing arrangements  \$2 a  is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??								X
c. Sharing of tacilities, equipment, mailing lists, other assets, or paid employees  d. If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting or ganization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:  (a) (b) (c) Amount involved Name of noncharitable exempt organization  Bescription of transfers, transactions, and sharing arrangements  (b) Rame of noncharitable exempt organization  Bescription of transfers, transactions, and sharing arrangements  (c) (c) (d) Description of transfers, transactions, and sharing arrangements  (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f								X
d It the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting graphization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services that his market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services that his market value in any transactions, and sharing arrangements of the goods, other assets, or services that his market value in any transactions, and sharing arrangements of the goods, other assets, or services received.  (a) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d						500		X
goods, other assets, or services given by the reporting or ganization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:    (a)								
Line no. Amount involved Name of noncharitable exampt organization Description of transfers, transactions, and sharing arrangements		goods, other assets, or services	given by the reporting organization.	. If the organization received	d less than fair market value in any		N/A	1
52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a)		(c)		(d)			
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship		o. Amount involved	Name of noncharitable ex	empt organization	Description of transfers, transactions, and	sharing ar	range	ments
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
Code (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule:  N/A  (a)  Name of organization  Type of organization  Description of relationship								
(a) Type of organization Description of relationship  (b) Type of organization Description of relationship	1	Code (other than section 501(c)	(3)) or in section 527?			Yes	[2	No.
Name of organization Type of organization Description of relationship	b	f "Yes," complete the following s	schedule: N/A	T	<b>y</b>			
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002				(b) Type of organization	(c) Description of relations	nip		
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002			<del></del>	ļ	ļ			
223 151 223 151 223 253 Schedule A (Form 990 or 990-F7) 2002								
223 151 01-22-03 Schedule A (Form 990 or 990-F7) 2002		<del></del>						
223 151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223 151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223 151 01-22-03 Schedule A (Form 990 or 990-F7) 2002			· · · · · · · · · · · · · · · · · · ·					
223 151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223 151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002			· · · · · · · · · · · · · · · · · · ·					
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
223151 01-22-03 Schedule A (Form 990 or 990-F7) 2002								
Obligation at the day of association	223 15 1 01-22-03				Schadula & /Forn	n 990 ar a	90-F7	2002

FORM	1 990 INCOME AND COST OF GOODS INCLUDED ON PART I, LIN	
INC	DME	
2.	GROSS RECEIPTS	7770374 1277033 6493341
5.	COST OF GOODS SOLD (LINE 13)	2086973
6. 7. 8.	INVENTORY AT BEGINNING OF YEAR	562840
10.	MATERIALS AND SUPPLIES	2188971 2751811
	INVENTORY AT END OF YEAR	664838 2086973

FORM 990	OTHER	EXPENSES		STATEMENT	
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISII	ac.
INSURANCE EXPENSES	5983 <b>9.</b>	53855.	5984.		
OFFICE EXPENSE	118638.	106774.	11864.		
COMPUTER SOFTWARE &	00745	01671	0074		
SUPPLIES AMORTIZATION OF	90745.	81671.	9074.		
COPYRIGHTS AND					
PRADEMARKS	105412.	94871.	10541.		
BAD DEBT EXPENSE	21439.	19295.	2144.		
MERCHANDISE COST	9103.	8193.	910.		
FOREIGN CURRENCY	3103.	01551	520.		
TRANSLATION	17705.	15935.	1770.		
OUES AND FEES	10425.	9383.	1042.		
TRAINING AND OTHER					
EMPLOYEE EXPENSES	63060.	56754.	6306.		
PUBLIC RELATIONS	18471.	16624.	1847.		
CREDIT CARD					
TRANSACTION FEES	50743.	45669.	5074.		
BANK CHARGES	3013.	2712.	301.		
COMPUTER CONSULTING	120928.	108835.	12093.		
CONTRACT LABOR	25197.	22677.	2520.		
MISCELLANEOUS					
EXPENSES	4053.	3649.	404.		
TOTAL TO FM 990, LN 43	718771.	646897.	71874.		
FORM 990 STATEMENT OF	F ORGANIZATION' PART		MPT PURPOSE	STATEMENT	3
EXPLANATION					
PROVIDER OF COMMUNICATION	ONS AND INFORMA	TION FOR FELL	OWSHIP OF NAR	COTICS ANON	
PROVIDER OF COMMUNICATION		TION FOR FELL ASSETS	OWSHIP OF NAR	COTICS ANON STATEMENT	
FORM 990			OWSHIP OF NAR		
FORM 990			OWSHIP OF NAR		4
PESCRIPTION DEPOSITS	OTHER	ASSETS	OWSHIP OF NAR	STATEMENT	46.
	OTHER	ASSETS	OWSHIP OF NAR	STATEMENT	

FORM 990 C	THER LIABILITIES		STAT	EMENT	5
DESCRIPTION			Al	MOUNT	
ACCRUED SALARIES AND WITHHOLDI	NGS PAYABLE			130666	6.
TOTAL TO FORM 990, PART IV, LI	NE 65, COLUMN B			130666	5.
	T OF OFFICERS, DIRE		STAT	EMENT	6
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
JANE NICKELS 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	CHAIRPERSON PART-TIME	0.	0.	0	0.
BOB JORDAN 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	VICE CHAIRPERS PART-TIME	O.	0.	0	0.
CRAIG ROBERTSON 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	TREASURER PART-TIME	0.	0.	0	ο.
SUSAN CHESS 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	SECRETARY PART-TIME	0.	0.	0	).
BELLA BLAKE 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0	).
DANIEL SCHUESSLER 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0	).
DAVID JAMES 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0	١.
GIOVANNA GHISAYS 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0	•

NARCOTICS ANONYMOUS WOTED SERVI	CES, INC	)	95-	-3090596	
JIM BUERER 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0.	
LIB EDMONDS 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0.	
RON HOFIUS 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0.	
SAUL ALVARADO 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0.	
TOM MCCALL 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0.	
TONY WALTERS 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	BOARD MEMBER PART-TIME	0.	0.	0.	
ANTHONY EDMONDSON 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	EXECUTIVE DIRE	CTOR 102325.	4995.	10541.	
REBECCA MEYER 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	ASST. EXECUTIVE		8665.	0.	
TOM RUSH 19737 NORDHOFF PLACE CHATSWORTH, CALIFORNIA 91311	CONTROLLER FULL-TIME	55285.	8768.	0.	
TOTALS INCLUDED ON FORM 990, PART	v	242858.	22428.	10541.	
FORM 990 PART VIII - RELAT: ACCOMPLISHMEN	IONSHIP OF ACTIVE T OF EXEMPT PURP		STATE	MENT 7	
LINE EXPLANATION OF RELATIONSHIP	P OF ACTIVITIES				
93A AMOUNTS RECEIVED FROM THOS	E WHO ATTENDED TI	HE CONVENTION	I IN ORDE	R TO	
CARRY OUT THE CONVENTION IN FURTHERANCE OF THE PURPOSE CONSTITUTING THE BASIS FOR THE EXEMPTION OF THE ORGANIZATION.  102 TO PRODUCE AND DISTRIBUTE NARCOTICS ANONYMOUS LITERATURE AS INFORMATION FOR THE FELLOWSHIP OF NARCOTICS ANONYMOUS.					

### NARCOTICS ANONYMOUS WORLD SERVICES, INC. EIN: 95-3090596 ATTACHMENT TO FORM 990 - STATEMENT 8

#### YEAR ENDED JUNE 30, 2003

PART IV, LINE 64B

6/30/2002

6/30/2003

NOTE PAYABLE

DUE TO CITIBANK, F.S.B.

\$ 133,333

\$ 87,931

ORIGINAL LOAN BALANCE: \$250,000

**INTEREST RATE**: ANNUAL RATE OF CITIBANK'S "BASE RATE" + 1.25%

REPAYMENT TERMS: BEGINNING FEBRUARY 29, 2000 PAY THE PRINCIPAL BALANCE IN

60 EQUAL MONTHLY INSTALLMENTS + MONTHLY INTEREST AND CHARGES.

MATURITY DATE: Oct 1, 2023

**SECURITY: PERSONAL PROPERTY AND FIXTURES** 

LOAN PURPOSE: TO PURCHASE DATABASE SOFTWARE

TOTAL NOTE PAYABLE

\$ 133,333

\$ 87,931

(FORM 990, LINE 64B)

#### **Narotics Anonymous World**

FORM 990 June 30, 2003

#### DEPRECIATION SCHEDULE FORM 990 PART II AND IV, LINES 42 AND 57 LAND, BUILDINGS AND EQUIPMENT

STATEMENT # 9 EIN: 95-3090596

	S	

Description	Beg of Year	Additions	Retirements	End of Year
Building, Building Equip, and Improvements	1,933,657	86,184	(477,401)	1,542,440
Total Fixed Assets (to Form 990 Page 3, Line 57a)	1,933,657			1,542,440

ACCUM	IULATED DEP	PRECIATION		
Description	Beg of Year	(to line 42) Additions	Retirements	End of Year
Building, Building Equip, and Improvements	1,140,616	106,338	(15,279)	1,231,675
Total Accumulated Depreciation (to Form 990 Page 3, Line 57b)	1,140,616			1,231,675
Fixed Assets - net of depreciation (to Form 990, Page 3, Line 57c)	793,041	<del></del>	_	310,765

Form 88	58 (12-2000)	Page 2
• If you	are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and	check this box
	nly complete Part II if you have already been granted an automatic 3-month extension of	
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	
Part I	Additional (not automatic) 3-Month Extension of Time - Must file	Original and One Copy.
Type or	Namo of Exempt Organization	Employer identification number
print.		
Flio by tho	NARCOTICS ANONYMOUS WORLD SERVICES, INC	95-3090596
bushists	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
due date for	13/3/ WONDHOTT FIRE	
roturn. Sco Instruction:		
	CHATSWORTH, CA 91311	
	type of return to be filed (File a soparato application for each return):	
		n 1041-A Form 5227 Form 8870
F0	orm 990 BL Form 990-PF Form 990-T (trust other than above) Form	n 4720 Form 6069
STOP: I	Do not complete Part II if you were not already granted an automatic 3-month extension	on a previously filed Form 8868.
a Kaba	organization does not have an office or place of business in the United States, chock this bo	
	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	
	. If it is for part of the group, check this box	
	The second secon	THE EAST OF AN INCOME SHOWING THE PROPERTY OF THE
4 11	equest an additional 3-month extension of time untilMAY_17, 2004	
		nd ending JUN 30, 2003 .
		return Change in accounting period
	ate in detail why you need the extension	
	EE STATEMENT 8	
8a If I	this application is for Form 990 BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, loss	any
no	nrofundable credits, See instructions	<u>\$</u>
b If 1	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and es	timated
ta	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and es x payments made. Include any prior year everpayment allowed as a credit and any amount p	aid
P	roviously with Form 8868	
е Ва	plance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required	, deposit with FTD
cc	oupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruction	ons 9 N/A
	Signature and Verification	
Under pe	nallies of perjury, I declare that I have examined this form, including accompanying schedules and staten	ients, and to the best of my knowledge and bolic!,
It is true,	correct, and complete, and that I am authorized to propare this form.	1.1
Signaturo	I false Stelson Title & GPA	Date > 2/6/64
المانية المانية المانية	Notice to Applicant - To Be Completed by the	ne IRS
NW	e have approved this application. Pleaso attach this form to the organization's return.	
[]w	e 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
da	te of the organization's return (including any prior extensions). This grace period is considere	ed to be a valid extension of time for elections
ot	herwise required to be made on a timely return. Please attach this form to the organization's	return.
	e have not approved this application. After considering the reasons stated in item 7, we can	
fik	b. We are not granting the 10-day grace period.	English Contraction
∐_w	e cannot consider this application because it was filed after the due date of the return for w	hich an extension was requested.
	lher	
		FEES, CILLIAN
Director		Date grave VI 1910, 1, 1 december 1
Alternat	te Mailing Address - Entor the address if you want the copy of this application for an addition	and 2 months authorism entitled the find the factor of the
different	to maining Address - Enter the address if you want the copy of this application for an address if then the one entered above.	NIST 2-HOURT EXTRIBUTION LONDINGS IN SIL BROADER
	Name	
	LINDOUIST LLP	·
Тура	Number and street (include suite, room, or apt. no.) Or a P.O. box number	
or brint	THREE POINTE DRIVE, SUITE 312	
	City or town, province or state, and country (including postal or ZIP code)	
223832 04-82-02	BREA, CALIFORNIA 92821	
	1) P	Form 8868 (12-2000)

Fo.m 8868 (December 2000)

Department of the Treasury

# Application for Extension of Time 10 File an Exempt Organization Return

OMB No. 1545-1709

File a separate application for each return.	
<ul> <li>If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box</li></ul>	2 of this form).
Part   Automatic 3-Month Extension of Time - Only submit original (no copies need	ed)
Note: Form 990-T corporations requesting an automatic 6-month extension - check this box and complete All other corporations (including Form 990-C filors) must use Form 7004 to request an extension of time to returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form	file income tax
Type or Name of Exompt Organization	Employer identification number
print	
NARCOTICS ANONYMOUS WORLD SERVICES, INC	95~3090596
due data for Number, street, and room or suite no. If a P.O. box, see Instructions.	
relum Sos	
City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
CHATSWORTH, CA 91311	Wy Was the War
Check type of return to be filed (file a separate application for each return):	
X Form 990 Form 990-T (corporation)	Form 4720
Form 990-Bl. Form 990-T (sec. 401(a) or 408(a) trust)	Form 5227
Form 990-EZ Form 990-T (trust other than above)	Form 6069
Form 990-PF Form 1041-A	Form 8870
LA LAW LAI. Will.	
<ul> <li>If the organization does not have an office or place of business in the United States, check this box</li> <li>If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)</li></ul>	. If this is for the whole group, check this
I request an automatic 3-month (6-month, for 990-T corporation) extension of time until FEB to file the exempt organization return for the organization named above. The extension is for the organization calendar year or x tax year beginning JUL 1, 2002 , and ending JUN 30, 2	
2 If this tax year is for less than 12 months, check reason: Initial return Final return	um Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, 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 everpayment allowed as a credit	¢
my between image impage with busi test exceptations another a contra	
o Balance Due. Subtract line 3b from line 3a, Include your payment with this form, or, if required, de	posit with FTD
coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	
Signature and Verification	
_	
Under penaltics of perjury, I declare that I have examined this form, including accompanying schedules and statements it is true, correct, and complete, and that I am authorized to prepare this form.	and to the best of my knowledge and belief,
1.0.0)	ulisa
Signature \ / Carlles / Meer Timo \ ( / / )	Date > ///463
LHA For Paperwork Reduction Act Notice, sug instruction	Form 8868 (12-2000)