

# Return of Organization Exempt From Income Tax

**1999**

Department of the Treasury  
Internal Revenue Service

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

This Form is Open to Public Inspection

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

**A** For the 1999 calendar year, OR tax year period beginning JULY 1, 1999, and ending JUNE 30, 2000

<b>B</b> Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Initial return <input type="checkbox"/> Final return  <input type="checkbox"/> Amended return (required also for state reporting)	<b>C</b> Name of organization HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION	<b>D</b> Employer identification number 54-1905820
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 26021	<b>E</b> Telephone number 001856733-4
	City or town, state or country, and ZIP + 4 CRYSTAL CITY, VA 22215-6021	<b>F</b> Check <input type="checkbox"/> If exemption application is pending
	<b>Please use IRS label or print or type. See Specific Instructions.</b>	

**G** Type of organization  Exempt under section 501(c) (3) (insert number) OR  section 4947(a)(1) nonexempt charitable trust

Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

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

**I** If either box in H is checked "Yes," enter four-digit group exemption number (GEN) \_\_\_\_\_

(b) If "Yes," enter the number of affiliates for which this return is filed: \_\_\_\_\_

**J** Accounting method:  Cash  Accrual

(c) Is this a separate return filed by an organization covered by a group ruling?  Yes  No  Other (specify) \_\_\_\_\_

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

Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See Specific Instructions on page 15.)

<b>Net Assets</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:			
	<b>a</b> Direct public support	1a		
	<b>b</b> Indirect public support	1b		
	<b>c</b> Government contributions (grants)	1c		
	<b>d</b> Total (add lines 1a through 1c) (attach schedule of contributors) (cash \$ _____ noncash \$ _____)	1d		0
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2		
	<b>3</b> Membership dues and assessments	3		8,338
	<b>4</b> Interest on savings and temporary cash investments	4		
	<b>5</b> Dividends and interest from securities	5		
	<b>6a</b> Gross rents	6a		
	<b>b</b> Less: rental expenses	6b		
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6c		0
	<b>7</b> Other investment income (describe _____)	7		
	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	<b>8a</b>	8a		
	<b>b</b> Less: cost or other basis and sales expenses	8b		
	<b>c</b> Gain or (loss) (attach schedule)	8c	0	0
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		0
	<b>9</b> Special events and activities (attach schedule)			
	<b>a</b> Gross revenue (not including contributions reported on line 1a) of _____	9a	4,145	
	<b>b</b> Less: direct expenses other than fundraising expenses	9b		
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	9c		4,145	
<b>10a</b> Gross sales of inventory, less returns and allowances	10a	33,596		
<b>b</b> Less: cost of goods sold	10b	13,876		
<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		19,720	
<b>11</b> Other revenue (from Part VII, line 103) UNRELATED BUSINESS INCOME	11		236	
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		32,439	
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	13	19,150	
	<b>14</b> Management and general (from line 44, column (C))	14	2,908	
	<b>15</b> Fundraising (from line 44, column (D))	15	0	
	<b>16</b> Payments to affiliates (attach schedule)	16		
	<b>17</b> Total expenses (add lines 13 and 14, column (A))	17		22,058
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18	10,381	
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19	8,148	
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	20		
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		18,529

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**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 19.)

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	0			
26	Other salaries and wages	26	0			
27	Pension plan contributions	27	0			
28	Other employee benefits	28	0			
29	Payroll taxes	29	0			
30	Professional fundraising fees	30	0			
31	Accounting fees	31	375	375		
32	Legal fees	32	0			
33	Supplies	33	1,661	1,661		
34	Telephone	34	89	89		
35	Postage and shipping	35	4,735	4,735		
36	Occupancy	36	0			
37	Equipment rental and maintenance	37	0			
38	Printing and publications	38	11,482	11,482		
39	Travel	39	0			
40	Conferences, conventions, and meetings	40	2,553	2,553		
41	Interest	41	0			
42	Depreciation, depletion, etc. (attach schedule)	42	0			
43	Other expenses (itemize): a OFFICE	43a	758	758		
	b ADVERTISING	43b	355	355		
	c DONATIONS	43c	25	25		
	d LICENSES & TAXES	43d	25	25		
	e	43e	0			
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	22,058	19,150	2,908	0

**Reporting of Joint Costs.** - Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments (See Specific Instructions on page 22.)**

What is the organization's primary exempt purpose? PROVIDE INFO & HISTORY ON HOMER LAUGHLIN CHINA WARES	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a _____	
(Grants and allocations \$ _____)	
b _____	
(Grants and allocations \$ _____)	
c _____	
(Grants and allocations \$ _____)	
d _____	
(Grants and allocations \$ _____)	
e Other program services (attach schedule)	(Grants and allocations \$ _____)
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	0

**Part IV Balance Sheets** (See Specific Instructions on page 22.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.			(A) Beginning of year		(B) End of year	
Assets	45	Cash - non-interest-bearing	8,148	45	18,529	
	46	Savings and temporary cash investments		46		
	47a	Accounts receivable		47a		
		b Less: allowance for doubtful accounts		47b	47c	0
	48a	Pledges receivable		48a		
		b Less: allowance for doubtful accounts		48b	48c	0
	49	Grants receivable		49		
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50		
	51a	Other notes and loans receivable (attach schedule)		51a		
		b Less: allowance for doubtful accounts		51b	51c	0
	52	Inventories for sale or use		52		
	53	Prepaid expenses and deferred charges		53		
	54	Investments - securities (attach schedule)		54		
	55a	Investments - land, buildings, and equipment: basis		55a		
		b Less: accumulated depreciation (attach schedule)		55b	55c	0
56	Investments - other (attach schedule)		56			
57a	Land, buildings, and equipment: basis		57a			
	b Less: accumulated depreciation (attach schedule)		57b	57c	0	
58	Other assets (describe _____)		58			
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)		8,148	59	18,529	
Liabilities	60	Accounts payable and accrued expenses		60		
	61	Grants payable		61		
	62	Deferred revenue		62		
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a	Tax-exempt bond liabilities (attach schedule)		64a		
		b Mortgages and other notes payable (attach schedule)		64b		
65	Other liabilities (describe _____)		65			
66	<b>Total liabilities</b> (add lines 60 through 65)		0	66	0	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.					
	67	Unrestricted	8,148	67	18,529	
	68	Temporarily restricted		68		
	69	Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds		70		
	71	Paid-in or capital surplus, or land, building, and equipment fund		71		
	72	Retained earnings, endowment, accumulated income, or other funds		72		
	73	<b>Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	8,148	73	18,529	
	74	<b>Total liabilities and net assets/fund balances</b> (add lines 66 and 73)	8,148	74	18,529	

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





**Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 29.)**

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments . . . . .					
g Fees and contracts from government agencies					
94 Membership dues and assessments . . . . .					8,338
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities . . . . .					
97 Net rental income or (loss) from real estate:					
a debt-financed property . . . . .					
b not debt-financed property . . . . .					
98 Net rental income or (loss) from personal property . . . . .					
99 Other investment income . . . . .					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events . . . . .					4,145
102 Gross profit or (loss) from sales of inventory . . . . .					19,720
103 Other revenue: a _____					
b ADVERTISING	511110	236			
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E)) . . . . .		236		0	32,203
105 Total (add line 104, columns (B), (D), and (E)) . . . . .					32,439

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 30.)**

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
102	SELLING OF ADS HELPS COVER THE COST OF PRINTING & MAILING OF NEWSLETTER.
94,101	DUES & PROCEEDS FROM SPECIAL EVENTS ARE USED AS A MEANS TO HOLD MEETINGS TO PROMOTE INTEREST IN HOMER LAUGHLIN CHINA WARES

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 30.)**

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

This return, including accompanying schedules and statements, and to the best of my knowledge (if preparer (other than officer) is based on all information of which preparer has any knowledge.

1/17-00 J. W. S. [Signature]

**SCHEDULE A  
(Form 990)**

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

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

**Supplementary Information - (See separate instructions.)**

OMB No. 1545-0047

**1999**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION

Employer identification number

54-1905820

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
N/A				
Total number of other employees paid over \$50,000 . . . . . ▶				

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 1 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
N/A		
Total number of others receiving over \$50,000 for professional services . . . . . ▶		

For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990) 1999

**Part III Statements About Activities**

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? . . . . . If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____  Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:		
a	Sale, exchange, or leasing of property? . . . . .		X
b	Lending of money or other extension of credit? . . . . .		X
c	Furnishing of goods, services, or facilities? . . . . .		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . .		X
e	Transfer of any part of its income or assets? . . . . . If the answer to any question is "Yes," attach a detailed statement explaining the transactions.		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.? . . . . .		X
4a	Do you have a section 403(b) annuity plan for your employees? . . . . .		X
b	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See page 2 of the instructions.)		

**Part IV Reason for Non-Private Foundation Status (See pages 2 through 4 of the instructions.)**

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

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

Provide the following information about the supported organizations. (See page 4 of the instructions.)

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

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

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

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

Calendar year (or fiscal year beginning in) . . . . .	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) . . . . .					0
16 Membership fees received . . . . .	11,595				11,595
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose . . . . .	10,963				10,963
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 . . . . .					0
19 Net income from unrelated business activities not included in line 18 . . . . .	2,320				2,320
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf . . . . .					0
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 . . . . .					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets . . . . .					0
23 Total of lines 15 through 22 . . . . .	24,878	0	0	0	24,878
24 Line 23 minus line 17 . . . . .	13,915	0	0	0	13,915
25 Enter 1% of line 23 . . . . .	248.78	0	0	0	
26 Organizations described in lines 10 or 11: a Enter 2% of amount in column (e), line 24 . . . . .					278.3
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1995 through 1998 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts . . . . .					
c Total support for section 509(a)(1) test: Enter line 24, column (e) . . . . .					13,915
d Add: Amounts from column (e) for lines: 18 <u>0</u> 19 <u>2,320</u> 22 <u>0</u> 26b <u></u> . . . . .					2,320
e Public support (line 26c minus line 26d total) . . . . .					11,595
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) . . . . .					83.3273 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year: (1998) _____ (1997) _____ (1996) _____ (1995) _____					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (1998) _____ (1997) _____ (1996) _____ (1995) _____					
c Add: Amounts from column (e) for lines: 15 <u>0</u> 16 <u>11,595</u> 17 <u>10,963</u> 20 <u>0</u> 21 <u>0</u> . . . . .					22,558
d Add: Line 27a total <u>0</u> and line 27b total <u>0</u> . . . . .					0
e Public support (line 27c total minus line 27d total) . . . . .					22,558
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) . . . . .					24,878
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) . . . . .					90.6744 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) . . . . .					0.0000 %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1995 through 1998, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 4 of the instructions.)					

**Part V**

**Private School Questionnaire (See page 4 of the instructions.)**

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

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . .		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? . . . . . If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .		
d	Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? . . . . .		
b	Admissions policies? . . . . .		
c	Employment of faculty or administrative staff? . . . . .		
d	Scholarships or other financial assistance? . . . . .		
e	Educational policies? . . . . .		
f	Use of facilities? . . . . .		
g	Athletic programs? . . . . .		
h	Other extracurricular activities? . . . . .		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency? . . . . .		
b	Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation . . . . .		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 6 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

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

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

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

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

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 7 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .					0
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) . . . . .					0
<b>47</b> Total lobbying expenditures					0
<b>48</b> Grassroots nontaxable amount . . . . .					0
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) . . . . .					0
<b>50</b> Grassroots lobbying expenditures . . . . .					0

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

(For reporting only by organizations that did not complete Part VI-A) (See page 8 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes		No		Amount
<b>a</b> Volunteers . . . . .					
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.) . . . . .					
<b>c</b> Media advertisements . . . . .					
<b>d</b> Mailings to members, legislators, or the public . . . . .					
<b>e</b> Publications, or published or broadcast statements . . . . .					
<b>f</b> Grants to other organizations for lobbying purposes . . . . .					
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .					
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .					
<b>i</b> Total lobbying expenditures (add lines c through h) . . . . .					0

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

