## 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.)

1999

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Part I Compensation of the Five High (See page 1 of the instructions. L				nd Trustees
(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
			·	
otal number of other employees paid over 550,000				
Part II Compensation of the Five High (See page 1 of the instructions. Lis				
(a) Name and address of each independent contractor	(b) Type of service (c) Compensation			
otal number of others receiving over \$50,000 for orofessional services				

Schedule A (Form 990) 1999 Page 2 Part III Yes **Statements About Activities** No During the year, has the organization attempted to influence national, state, or local legislation, including any 1 If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities  $\blacktriangleright$  \$ \_ 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. 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: 2a Sale, exchange, or leasing of property? 2b 2c Furnishing of goods, services, or facilities? 2d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? 2e If the answer to any question is "Yes," attach a detailed statement explaining the transactions. 3 4a Do you have a section 403(b) annuity plan for your employees? . . . . . . . . . . . . . . . . . . 4a 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.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.) ☐ 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). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, 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 (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 \( \text{A}\) A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.) ☐ An organization that normally receives: (1) more than 331/3% 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 331/2% 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 zations 2). (See

13	An organization that is not controlled by any disqualified persons (other than foundation managers described in: <b>(1)</b> lines 5 through 12 above; or <b>(2)</b> section 501(c)(4), (5), or (6), if they meet the tesection 509(a)(3).)  Provide the following information about the supported organizations. (See page 4 of the i	e test of section 509(a)(2	
	(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.) Schedule A (Form 99	
		Schedule A (FOIII 99	

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.

Cale	ndar year (or fiscal year beginning in) . <b>•</b>	<b>(a)</b> 1998	<b>(b)</b> 1997	(c) 1996	<b>(d)</b> 199	95	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.).						
16	Membership fees received						
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose						
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.						
19	Net income from unrelated business activities not included in line 18						
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets						
23	Total of lines 15 through 22						
24	Line 23 minus line 17						
25	Enter 1% of line 23						
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colur	nn (e), line 24	, , ▶	26a	
b	Attach a list (which is not open to public inspect person (other than a governmental unit or public 1998 exceeded the amount shown in line 26a.	5 through	26b				
С	Total support for section 509(a)(1) test: Enter lii	ne 24, column (e	)		•	26c	
	Add: Amounts from column (e) for lines: 18		19				
	22		26b		•	26d	
е	Public support (line 26c minus line 26d total)					26e	
f	Public support percentage (line 26e (numera	tor) divided by I	ine 26c (denom	inator))	▶	26f	<u>%</u>
27	Organizations described on line 12: a Fo person," attach a list to show the name of, and of such amounts for each year:	or amounts includ I total amounts re	ded in lines 15, eceived in each y	16, and 17 that w year from, each "c	vere receive lisqualified	ed from person	n a "disqualified ." Enter the sum
	(1998) (1997)		(1996)		_ (1995) _		
b							
	(1998) (1997) (1996) (1995)						
С	Add: Amounts from column (e) for lines: 15				▶	27c	
d	Add: Line 27a total and line 27b total					27d	
е	e Public support (line 27c total minus line 27d total)					27e	
f	Total support for section 509(a)(2) test: Enter a	mount on line 23	, column (e) .	. ▶ 27f			
g	Public support percentage (line 27e (numera					27g	<u>%</u>
h	Investment income percentage (line 18, colu					27h	%
28	<b>Unusual Grants:</b> For an organization describe attach a list (which is not open to public inspec						

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.)

## 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)

			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?	29			
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?	31			
	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?	32b			
c d	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c 32d			
	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:				
а	Students' rights or privileges?	33a			
b	Admissions policies?	33b			
С	Employment of faculty or administrative staff?	33c			
d	Scholarships or other financial assistance?	33d 33e			
	Educational policies?	33f			
g	Athletic programs?	33g			
h	Other extracurricular activities?	33h			
	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?	34a			
b	Has the organization's right to such aid ever been revoked or suspended?	34b			
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			

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

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Pai	t VI		n Regarding Tra ganizations (Se	ansfers To and Transaction e page 8 of the instruction	ns and Relationships With Noncharita s.)	ble		
51						ed in section		
а				to a noncharitable exempt orga	~ · ·	Yes No		
u					m			
		Other assets			a/ii)			
<b>L</b>								
b		er transactions:	6		rion b(i)			
				noncharitable exempt organiza				
(ii) Purchases of assets from a noncharitable exempt organization								
	(iii)		• •	ner assets	b(iii)			
	(iv)				b(iv)			
	(v)				b(v)			
	(vi)	Performance of se	ervices or members	ship or fundraising solicitations	<u>b(vi)</u>			
С	Sha	ring of facilities, eq	uipment, mailing li	sts, other assets, or paid emplo	yees <u>c</u>			
d	goo	f 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 organization. If the organization received less than fair market value in any ransaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:						
	a)	(b)		(c)	(d)			
	no.	Amount involved	Name of none	charitable exempt organization	Description of transfers, transactions, and sharing an	rangements		
					-			
	des		01(c) of the Code (	other than section 501(c)(3)) or i	e or more tax-exempt organizations n section 527? ▶ ☐ Yes	s 🗌 No		
		<b>(a)</b> Name of organiz	ation	(b) Type of organization	(c)  Description of relationship			
		<u>~</u>						