

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2000

Department of the Treasury Internal Revenue Service

For calendar year 2000 or other tax year beginning , 2000, and ending , 20 See separate instructions.

Header section containing fields A through G: A Check box if address changed, B Exempt under section, C Book value of all assets at end of year, D Employer identification number, E New unrelated bus. activity codes, F Group exemption number, G Check organization type.

H Describe the organization's primary unrelated business activity. I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? J The books are in care of Telephone number

Table for Part I: Unrelated Trade or Business Income. Columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13 including Gross receipts or sales, Cost of goods sold, Capital gain net income, etc.

Table for Part II: Deductions Not Taken Elsewhere. Rows 14-34 including Compensation of officers, Salaries and wages, Repairs and maintenance, etc.

**Part III Tax Computation**

<b>35 Organizations Taxable as Corporations</b> (see instructions for tax computation on page 12). Controlled group members (sections 1561 and 1563)—check here <input type="checkbox"/> . <b>See instructions</b> and:			
<b>a</b> Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____			
<b>b</b> Enter organization's share of: (1) additional 5% tax (not more than \$11,750) \$ _____ (2) additional 3% tax (not more than \$100,000) \$ _____			
<b>c</b> Income tax on the amount on line 34			<b>35c</b>
<b>36 Trusts Taxable at Trust Rates</b> (see instructions for tax computation on page 12) Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)			<b>36</b>
<b>37 Proxy tax</b> (see page 13 of the instructions)			<b>37</b>
<b>38 Alternative minimum tax</b>			<b>38</b>
<b>39 Total</b> (add lines 37 and 38 to line 35c or 36, whichever applies)			<b>39</b>

**Part IV Tax and Payments**

<b>40a</b> Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	<b>40a</b>		
<b>b</b> Other credits (see page 13 of the instructions)	<b>40b</b>		
<b>c</b> General business credit—Check if from: <input type="checkbox"/> Form 3800 or <input type="checkbox"/> Form (specify) ▶	<b>40c</b>		
<b>d</b> Credit for prior year minimum tax (attach Form 8801 or 8827)	<b>40d</b>		
<b>e Total credits</b> (add lines 40a through 40d)			<b>40e</b>
<b>41</b> Subtract line 40e from line 39			<b>41</b>
<b>42</b> Recapture taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611			<b>42</b>
<b>43 Total tax</b> (add lines 41 and 42)			<b>43</b>
<b>44 Payments:</b> <b>a</b> 1999 overpayment credited to 2000	<b>44a</b>		
<b>b</b> 2000 estimated tax payments	<b>44b</b>		
<b>c</b> Tax deposited with Form 8868	<b>44c</b>		
<b>d</b> Foreign organizations—Tax paid or withheld at source (see instructions)	<b>44d</b>		
<b>e</b> Backup withholding (see instructions)	<b>44e</b>		
<b>f</b> Other credits and payments (see instructions)	<b>44f</b>		
<b>45 Total payments</b> (add lines 44a through 44f)			<b>45</b>
<b>46</b> Estimated tax penalty (see page 4 of the instructions). Check <input type="checkbox"/> if Form 2220 is attached			<b>46</b>
<b>47 Tax due</b> —If line 45 is less than the total of lines 43 and 46, enter amount owed			<b>47</b>
<b>48 Overpayment</b> —If line 45 is larger than the total of lines 43 and 46, enter amount overpaid			<b>48</b>
<b>49</b> Enter the amount of line 48 you want: <b>Credited to 2001 estimated tax</b> ▶ <b>Refunded</b> ▶			<b>49</b>

**Part V Statements Regarding Certain Activities and Other Information** (See instructions on page 14.)

<b>1</b> At any time during the 2000 calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," the organization may have to file Form TD F 90-22.1. If "Yes," enter the name of the foreign country here ▶	Yes	No
<b>2</b> During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see page 14 of the instructions for other forms the organization may have to file.		
<b>3</b> Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		

**Schedule A—Cost of Goods Sold** (See instructions on page 15.)

Method of inventory valuation (specify) ▶

<b>1</b> Inventory at beginning of year	<b>1</b>			<b>6</b> Inventory at end of year	<b>6</b>		
<b>2</b> Purchases	<b>2</b>			<b>7 Cost of goods sold.</b> Subtract line 6 from line 5. (Enter here and on line 2, Part I.)	<b>7</b>		
<b>3</b> Cost of labor	<b>3</b>			<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes	No
<b>4a</b> Additional section 263A costs (attach schedule)	<b>4a</b>						
<b>b</b> Other costs (attach schedule)	<b>4b</b>						
<b>5 Total</b> —Add lines 1 through 4b	<b>5</b>						

**Please Sign Here** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<b>Paid Preparer's Use Only</b>	Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours, if self-employed), address, and ZIP code ▶		EIN ▶	Phone no. ( )

**Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)**

(See instructions on page 16.)

**1** Description of property

(1)
(2)
(3)
(4)

<b>2</b> Rent received or accrued		<b>3</b> Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
<b>(a)</b> From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	<b>(b)</b> From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total		

**Total income** (Add totals of columns 2(a) and 2(b). Enter here and on line 6, column (A), Part I, page 1.) . . . ▶

**Total deductions.** Enter here and on line 6, column (B), Part I, page 1. . . ▶

**Schedule E—Unrelated Debt-Financed Income** (See instructions on page 16.)

<b>1</b> Description of debt-financed property		<b>2</b> Gross income from or allocable to debt-financed property	<b>3</b> Deductions directly connected with or allocable to debt-financed property	
			<b>(a)</b> Straight line depreciation (attach schedule)	<b>(b)</b> Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
<b>4</b> Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	<b>5</b> Average adjusted basis of or allocable to debt-financed property (attach schedule)	<b>6</b> Column 4 divided by column 5	<b>7</b> Gross income reportable (column 2 × column 6)	<b>8</b> Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals.</b> . . . . . ▶			Enter here and on line 7, column (A), Part I, page 1.	Enter here and on line 7, column (B), Part I, page 1.

**Total dividends-received deductions** included in column 8 . . . . . ▶

**Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations** (See instructions on page 17.)

<b>1</b> Name of Controlled Organization	<b>2</b> Employer Identification Number	<b>Exempt Controlled Organizations</b>			
		<b>3</b> Net unrelated income (loss) (see instructions)	<b>4</b> Total of specified payments made	<b>5</b> Part of column (4) that is included in the controlling organization's gross income	<b>6</b> Deductions directly connected with income in column (5)
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

<b>7</b> Taxable Income	<b>8</b> Net unrelated income (loss) (see instructions)	<b>9</b> Total of specified payments made	<b>10</b> Part of column (9) that is included in the controlling organization's gross income	<b>11</b> Deductions directly connected with income in column (10)
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on line 8, Column (A), Part I, page 1.	Add columns 6 and 11. Enter here and on line 8, Column (B), Part I, page 1.

**12 Totals** . . . . .

**Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization**

(See instructions on page 17.)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b> . . . . . ▶	Enter here and on line 9, column (A), Part I, page 1.			Enter here and on line 9, column (B), Part I, page 1.

**Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income**

(See instructions on page 18.)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)							
(2)							
(3)							
(4)							
<b>Column totals</b> . . . . . ▶	Enter here and on line 10, col. (A), Part I, page 1.	Enter here and on line 10, col. (B), Part I, page 1.					Enter here and on line 26, Part II, page 1.

**Schedule J—Advertising Income** (See instructions on page 18.)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Column totals</b> (carry to Part II, line (5)) . . . . . ▶						

**Part II Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

(1)							
(2)							
(3)							
(4)							
(5) <b>Totals from Part I</b>							
<b>Column totals, Part II</b> . . . . . ▶	Enter here and on line 11, col. (A), Part I, page 1.	Enter here and on line 11, col. (B), Part I, page 1.					Enter here and on line 27, Part II, page 1.

**Schedule K—Compensation of Officers, Directors, and Trustees** (See instructions on page 18.)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
<b>Total</b> —Enter here and on line 14, Part II, page 1. . . . . ▶			

