Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

Α	For the 2	002 calendar year, or tax year period beginning	and en	ding		
В	Check if applicable	[use IRS]		•	D Employ	yer identification number
	Addres	s label or SOCIETY ENVIRONMENTA	L JOURNALISTS, I	NC.	52	-0194031
	Name change	type. Number and street (or P.O. box if mail is no		Room/suite	E Teleph	one number
	Initial return	Specific P.O. BOX 2492			21	5-884-8174
	Final return	Instructions. City or town, state or country, and ZIP + 4				ng method: Cash X Accrual
	Amend return	OENKINTOWN, PA 1904			Oth (sp	ner ecify)
	Applica pending	• Section 501(c)(3) organizations and 4947(a)(must attach a completed Schedule A (Form 99) nonexempt charitable trusts 0 or 990-EZ).	H and I are not app H(a) Is this a group i		section 527 organizations. affiliates? Yes X No
G	Web site	:▶WWW.SEJ.ORG		H(b) If "Yes," enter no	umber of a	affiliates >
J	Organiza	tion type (check only one) \blacktriangleright $\boxed{\mathbf{X}}$ 501(c) (3)	no.) 4947(a)(1) or 527			N/A Yes No
K	Check he	ere 🕨 🔲 if the organization's gross receipts are norm	ally not more than \$25,000. The	(If "No," attach a H(d) Is this a separat	ı IISL) e return fi	led by an or-
		tion need not file a return with the IRS; but if the organiza		ganization cove	red by a g	roup ruling? Yes X No
	in the ma	il, it should file a return without financial data. Some stat	es require a complete return.	I Enter 4-digit GE		
						anization is not required to attach
_	Gross re	ceipts: Add lines 6b, 8b, 9b, and 10b to line 12	931,021.	Sch. B (Form 9	90, 990-EZ	Z, or 990-PF).
P	art I	Revenue, Expenses, and Changes in		nces	T-1:5	***
	1	Contributions, gifts, grants, and similar amounts receive	1 1			
	a	Direct public support		628,2	71.	
	Ь	Indirect public support				
	C	Government contributions (grants)	1c			600 004
	ď	Total (add lines 1a through 1c) (cash \$6				1d 628,271.
	2	Program service revenue including government fees an	· · · · · · · · · · · · · · · · · · ·			2 238,561.
	3	Membership dues and assessments			·····-	35,508.
	4	Interest on savings and temporary cash investments				9,143.
	5	Dividends and interest from securities				5 272.
	6 a	Gross rents				
	b	Less: rental expenses				
	_ c	Net rental income or (loss) (subtract line 6b from line 6	a)		·····	6c
<u>a</u>	7	Other investment income (describe	(A) Committee	(D) Other	}	7
Revenue	B a	Gross amount from sale of assets other	(A) Securities	(B) Other		
ğ		than inventory	8a 8b			Le 181
	D	Less: cost or other basis and sales expenses	80			1900 1800 1800
	C	Gain or (loss) (attach schedule) [Net gain or (loss) (combine line 8c, columns (A) and (B		<u> </u>		8d
	d	Special events and activities (attach schedule)	//			ALL:
		Gross revenue (not including \$	of contributions			- 실
	"	reported on line 1a)				
	b	Less: direct expenses other than fundraising expenses				세계 기사
	C					9c
	10 a				1 '	
	15 a	Less: cost of goods sold	L			X V Arct
	c	Gross profit or (loss) from sales of inventory (attach sc		10a)		10c
	11	Other revenue (from Part VII, line 103)	* *			19,266.
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10				931,021.
	13	Program services (from line 44, column (B))				741,570.
Evnense	3 14	Management and general (from line 44, column (C))				14 50,212.
9	15					15 32,744.
, 11	16	- · · · · · · · · · · · · · · · · · · ·				16
_	17	Total expenses (add lines 16 and 44, column (A))				824,526.
	18	Excess or (deficit) for the year (subtract line 17 from lin	e 12)			18 106,495.
Ħ	19	Net assets or fund balances at beginning of year (from	line 73, column (A))			19 642,270.
Net	SE 20	Other changes in net assets or fund balances (attach ex				20 <1,382.
	21	Net assets or fund balances at end of year (combine lin				<u>747,383.</u>
22	3001 -22-03	LHA For Paperwork Reduction Act Notice, see the s	eparate instructions.			Form 990 (2002)

SOCIETY ENVIRONMENTAL JOURNALISTS, INC. 52-0194031

P			nons must complete column nizations and section 4947		u (D) are required for sectional for oth	
	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				
	Benefits paid to or for members (attach schedule)	24				
	Compensation of officers, directors, etc.	25	71,754.			21,526.
	Other salaries and wages	26	134,884.			
	Pension plan contributions	27	9,487.	7,378.		988.
	Other employee benefits	28	35,768.			3,726.
29	Payroll taxes	29	18,563.	<u>14,435.</u>	2,194.	1,934.
	Professional fundraising fees	30				
	Accounting fees	31				
	Legal fees	32	341.	44 000	341.	
33	Supplies	33	17,760.	16,322.		
34	• • • • • • • • • • • • • • • • • • • •	34	13,197.	12,086.		521.
	Postage and shipping	35	21,154.	20,084.		501.
36	Occupancy	36	28,784.	25,906.	1,529.	1,349.
37	1 1	37				
	Printing and publications	38	22,641.			
	Travel	39	62,678.	60,675.	1,064.	939.
40	Conferences, conventions, and meetings	40				
41	Interest	41		···		
	Depreciation, depletion, etc. (attach schedule)	42	7,584.		7,584.	
43	Other expenses not covered above (itemize):					
а	l	43a				
b)	43b				
C		43c				
d		43d				
е		43e	379,931.			586.
<u>44</u>	Total functional expenses (add lines 22 through 43), Organizations completing columns (B)-{D), carry these totals to lines 13-15	44	824,526.	741,570.	50,212.	32,744.
	nt Costs. Check ► 📖 if you are following SOP 98				_	
	any joint costs from a combined educational campai					
	es," enter (i) the aggregate amount of these joint cos					;
	the amount allocated to Management and general \$; and ((iv) the amount allocated to	Fundraising \$	·
L	art III Statement of Program Servi	ce A	ccomplishments			
	at is the organization's primary exempt purpose? 🕨					D 0
	NVIRONMENTAL JOURNALISM					Program Service Expenses
	organizations must describe their exempt purpose achievement ievements that are not measurable. (Section 501(c)(3) and (4) on					(Required for 501(c)(3) and (4) orgs., and 4947(a)(1)
allo	cations to others.)					trusts; but optional for others.)
a	SPONSORSHIP OF AN ANNUA					
	JOURNALISTS ENGAGED IN	RE	PORTING ON T	<u>HE ENVIRONME</u>	NT	
_				Grants and allocations \$)	335,282.
b	SPONSORSHIP OF VARIOUS				OWSHIPS,	
	AND DIVERSITY AWARDS TO			<u>ALIST ENGAGE</u>	DIN	
	REPORTING ON THE ENVIRO	MM!	ENT			
_				Grants and allocations \$)	230,705.
С	DATABASE MANAGEMENT INF					
	AND EDUCATORS WHO HAVE					
	WHICH IS DISTRIBUTED TO) B(OTH MEMBERS .	AND NON-MEMB	ERS	
			<u></u>	Grants and allocations \$)	51,763.
d	PUBLICATION OF NEWSLETT					
	ENVIRONMENTAL JOURNALIS	M]	FOR DISTRIBU	TION TO MEMB	ERS AND	
	SCHOOLS OF JOURNALISM					
_				Grants and allocations \$)	123,820.
	Other program services (attach schedule)	_	,	Grants and allocations \$)]	
	Total of Program Service Expenses (should equal l	ine 44	, column (B), Program serv	/ices)	>	741,570.
	011 22-03					Form 990 (2002)

Part IV Balance Sheets

	ere required, attached schedules and amou uld be for end-of-year amounts only.	unts within t	he description column	(A) Beginning of year		(B) End of year
45				71,475.		133,175
46	Savings and temporary cash investments			324,753.	46	321,171
47.0	Accounts receivable	47	a 5,125.			
	Accounts receivable			7,935.	47c	5,125
"	Less, allowance for doubtful accounts			1,,,,,	476	J, 14J
18 9	Pledges receivable	18				
	Less: allowance for doubtful accounts	48		213,663.	48c	339,205
49	Grants receivable			21.5,005	49	333,403
50	Receivables from officers, directors, trustees,				13	
"	and key employees				50	
51 a	Other notes and loans receivable					
51 a	Less: allowance for doubtful accounts	51	h		51c	
52	Inventories for sale or use				52	
53	Prepaid expenses and deferred charges			8,364.		4,000
54	Investments - securities		Cost FMV	0/5010	54	
	Investments - land, buildings, and		. / 0001 1	-		
00 0	equipment basis	55	a 79,149.			
	oquipment saud		7.5,7=-5.0			
h	Less: accumulated depreciation	55	ь 58,831.	24,260.	55c	20,318
56	Investments - other	SEE		0.		10,405
	Land, buildings, and equipment: basis					
	Less: accumulated depreciation				57c	
58	Other assets (describe >	SEE	STATEMENT 4)	3,648.		775
	•					
59	Total assets (add lines 45 through 58) (must	equal line 74)	654,098.	59	834,174
60	Accounts payable and accrued expenses		•	11,828.		86,791
61	Grants payable		1		61	
62	Deferred revenue				62	
63	Loans from officers, directors, trustees, and l				63	
64	a Tax-exempt bond liabilities				64a	
<u> </u>	b Mortgages and other notes payable				64b	
65	Other liabilities (describe				65	
66	Total liabilities (add lines 60 through 65)			11,828.	66	86,791
	anizations that follow SFAS 117, check here	X and	complete lines 67 through			
	69 and lines 73 and 74.					
67	Unrestricted			404,611.	67	402,586
68	Temporarily restricted			232,344.		341,098
69	Permanently restricted			5,315.	69	3,699
Orga	anizations that do not follow SFAS 117, check	here 🕨 🗌	and complete lines			
-	70 through 74.					
70	Capital stock, trust principal, or current funds	;			70	
67 68 69 Orga 70 71 72 73	Paid-in or capital surplus, or land, building, a				71	
72	Retained earnings, endowment, accumulated	income, or of	her funds		72	
73	Total net assets or fund balances (add lines					
	column (A) must equal line 19; column (B) m	i ust equal line	21)	642,270.	73	747,383
74	Total liabilities and net assets / fund balance			654,098.	74	834,174

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.

	Reconciliation of Revenu Financial Statements wit	ıe	VIRONMENTAL per Audited Revenue per		IV-B Recond Financi	iliation of Exp al Statements	ense with	s per A Expen	udited ses per
	Return	Marian.	varok industrances.		Return			Described at a con-	7 - 192 Steriyayara 9 HEBP
а	Total revenue, gains, and other support per audited financial statements	a	929,639.	a	Total expenses and lo audited financial state Amounts included on	osses per ements	▶	a	824,526.
b	Amounts included on line a but not on			b	line 17, Form 990:	line a but not on			
(1)	line 12, Form 990: Net unrealized gains			(1)	Donated services and use of facilities	.\$			
, ,	on investments \$ <1,382.			(2)	Prior year adjustment	ts			
(2)	Donated services			-	reported on line 20,				
(0)	and use of facilities\$. 32		(0)	Form 990	.\$			
(3)	Recoveries of prior year grants			(3)	Losses reported on line 20, Form 990	¢			
(4)	Other (specify):			(4)	Other (specify):	.Ψ			
٠.,	\$			_		\$			
	Add amounts on lines (1) through (4)	b	<1,382.	>	Add amounts on lines				
C	Line a minus line b	C	931,021.	С	Line a minus line b		🕨	C	824,526.
d	Amounts included on line 12, Form 990 but not on line a:			ď	Amounts included on 990 but not on line a				
(1)	Investment expenses			(1)	Investment expenses				
	not included on				not included on				
	line 6b, Form 990\$				line 6b, Form 990	,\$			
(2)	Other (specify):			(2)	Other (specify):	ታ			
_	Add amounts on lines (1) and (2)	ч	n in the statutus apra, to y 0.		Add amounts on lines	_\$ s (1) and(2)		- d	
e	Total revenue per line 12, Form 990	Ü		1	Total expenses per lin		🖊		
_	(line c plus line d)	е	931,021.		(line c plus line d)		🕨	- e	824,526.
Pa	rt V List of Officers, Directors,	Γrι	istees, and Key I	Empl					
	(A) Name and address			(B) 11	tle and average hours r week devoted to position	(lf not paid, enter	plans	ntributions to byee benefit & deferred pensation	(E) Expense account and other allowances
==								0	
<u>SE</u>	E STATEMENT 5					0.		0.	0.
				<u> </u>					-
				<u> </u>					ļ <u> </u>
									<u> </u>
				ļ			<u> </u>		
				\vdash		+	-		
									
	Did any officer, director, trustee, or key employee r organizations, of which more than \$10,000 was pro						and all		Form 990 (2002)

	990 (2002) SOCIETY ENVIRONMENTAL JOURNALISTS, INC. 52-0194	031		Page 5
Pai	t VI Other Information	Τ	Yes	No
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	Sea tricking	X
	If "Yes," attach a conformed copy of the changes.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	<u> </u>	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	<u> </u>	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79) 15g	X
	If "Yes," attach a statement			
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership,			1000 C
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	75 s 'F ,	X
D	If "Yes," enter the name of the organization			
0.4	and check whether it is exempt or nonexempt.			
	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.	1		77
b	Did the organization file Form 1120-POL for this year?	81b		<u>X</u>
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than	00-		v
_	fair rental value?	82a	KAL:	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.) 82b N/A			
02.	expense in Part II. (See instructions in Part III.) Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	later.
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b		
D 04 0	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
84 a	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not	044	- ydiani	
ь	tax deductible? N/A	84b	7.4	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a		
oo b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
U	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	000	544.0	.
	owed for the prior year.			
	Dues, assessments, and similar amounts from members 85c N/A			
c d	37/3			1 5 1 5 7
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 856 N/A 856 N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A			
ď	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	l in the s	AF
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	UUU		
	allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		2 (4,90)	1 48.0
ь	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A			
ь.	Gross income from other sources. (Do not net amounts due or paid to other sources			
_	against amounts due or received from them.) 87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,	1		
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?			
	If "Yes," complete Part IX	88		Х
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911▶			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			1
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			1
	If "Yes," attach a statement explaining each transaction	89b		X_
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			0.
	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	List the states with which a copy of this return is filed PENNSYLVANIA			
þ	Number of employees employed in the pay period that includes March 12, 2002			6
91	The books are in care of ► MANAGEMENT Telephone no. ► 215 – 84	4-8	<u> 174</u>	
			_	
	Located at ► 321 OLD YORK ROAD SUITE 200 JENKINTOWN, PA ZIP+4 ► 1	904	6	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		. ͺ► L	
22304	and enter the amount of tax-exempt interest received or accrued during the tax year 92	N/		(0000)
01-22	-03	FOLL	11 990	(2002)

Part VI	Analysis of Income-	Producing A			ructions.)		
Note: Ent	er gross amounts unless other	wise		ted business income		ed by section 512, 513, or 514	(E)
indicated			(A) Business	(B)	(C) Exclu-	(D)	Related or exempt
93 Progr	am service revenue:		code	Amount	sion code	Amount	function income
a SU	BSCRIPTIONS						2,791.
ь CO	NFERENCE REVENU	ES					235,770.
c							
е							
f Medic	care/Medicaid payments						
	and contracts from government ag						
	pership dues and assessments						35,508.
	st on savings and temporary cash		1		14	9,143.	
					14	272.	
	ental income or (loss) from real es						
	financed property	i i					
h not de	ebt-financed property						
	ental income or (loss) from person					***	
	investment income						
	or (loss) from sales of assets	***************************************					*******
Ollici 101 Notin	than inventory come or (loss) from special event	·····					
	profit or (loss) from sales of inve						•
102 Gloss 103 Other		шогу	<u></u>				
					13	19,266.	
_	ILING LIST				13	19,200.	
					-		
							
							
e	the Land as known (D) (D) and (E)	<u> </u>		1)	28,681.	274,069.
104 SUDTO	otal (add columns (B), (D), and (E)	·)		1			
	(add line 104, columns (B), (D), a e 105 plus line 1d, Part I, shoul						302,730.
Dod VI	Relationship of Act	ivities to the	Accomo	lishment of Exer	nnt Puri	noses (See page 32 of the	instructions)
	Explain how each activity for wh						
Line No.	exempt purposes (other than by				neu importa	indy to the accomplishment c	n the organization 5
	SEE STATEMENT		or such parp	0303).			
	SEE STATEMENT	. 0		 -			
_				<u> </u>			
n-	Information Regard	ing Tayable	Subsidia	ries and Disrega	rded Fn	tities (See page 32 of the i	nstructions)
Part IX	· · · · · · · · · · · · · · · · · · ·	(B)	Jubsidia		Tucu Lii	(D)	
Name, a	(A) ddress, and EIN of corporation,	Percentage of		(C) Nature of activities		Total income	(E) End-of-year
partr	nership, or disregarded entity	ownership interes					assets
			%				
	N/A	 	%				
		+	%	 -			
nameta a é	SHEOT		%			F1 0 1 1 10	00 (11 1 1 11 1
Part X							
. ,	the organization, during the year, r	= :	-			nal benefit contract?	Yes X No
. ,	the organization, during the year, ,	• •	-		it contract?		Yes X No
Note: If	"Yes" to (b), file Form 8870 an	id Form 4720 (se	e instructio	ns).		1	
Please	Under penalties of perjury, I declare th correct, and complete. Declaration of p	at I have examined this preparer (other than off	s return, includi īcer) is based o	ng accompanying schedules n all information of which pre	and statemen parer has any	its, and to the best of my knowledg knowledge.	ge and belief, it is true,
Sign			\ 				
Here	Signature of officer	' (())!D) / //	Date		int name and title	W
Doid	Preparer's		IJ		Date	Check if self-	Preparer's SSN or PTIN
Paid Properer's	signature	<u>-</u>				employed ▶ □	
Preparer's	Firm's name (or TCUDE	IN & COM	PANY,	P.C.		EIN ►	
	vours if		•				
Use Only	self-employed),		ROAD,	SUITE 200			215) 635-3100

Form 990 (2002)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.)

▶ 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 identifi	cation number
SOCIETY ENVIRONMENTAL JOU	RNALISTS, INC	•	52 01940	31
Part I Compensation of the Five Highest Paid Employ	ees Other Than Off		rs, and Trus	tees
(See page 1 of the instructions. List each one. If there are none, enter "I		,	1(-1)	() Francis
(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
BETH_PARKE	EX. DIRECTOR			
7932 HEATHER RD ELKINS PARK, PA 19046	40+	71,754.	3,588.	
CHRIS RIGEL	ASSOC DIR.			
		FO 165	2 000	
340 EUCLID AVENUE AMBLER, PA 19002	40+	58,165.	2,908.	
Total number of other employees paid				
over \$50,000 Part II Compensation of the Five Highest Paid Indepen	0 Ident Contractors f	or Profession	al Sarvicas	
(See page 2 of the instructions. List each one (whether individuals or fi			ai oei vices	
(a) Name and address of each independent contractor paid more that		(b) Type of	service	(c) Compensation
NONE				
		_		
Total number of others receiving over				
PEO 000 for professional convises	_	patri na atau	문 이 사람들이 뭐라지만 가장!	re, avagement facti, 51.

Sche	dule A (Form 990 or 990-EZ) 2002 SOCIETY ENVIRONMENTAL JOURNALISTS, INC. 52-0194	<u>03,1</u>	<u>. P</u>	age 2
Pa	THE Statements About Activities (See page 2 of the instructions.)	_	⁄es	No
1 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			
	obbying activities ▶ \$\$ (Must equal amounts on line 38, Part VI-A,			
(or line i of Part VI-B.)	1		X
(Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking			
1	Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2 1	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors,			
1	rustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such		XZ	
ı	person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes,"			
á	attach a detailed statement explaining the transactions.)			
a S	Sale, exchange, or leasing of property?	2a		<u>X</u>
b l	_ending of money or other extension of credit?	2b		X
C I	Furnishing of goods, services, or facilities?	2c		_X_
اير	Payment of companyation (or payment or raimburgament of avacances if mary than \$4,000.00	.		v
g i	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		<u> X</u>
	Franctor of any part of its income or accose?			v
ť	Transfer of any part of its income or assets?	2e		<u> X</u>
3	Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	3		X
		4	_	X
Note	: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans			
	it in furtherance of its charitable programs "qualify" to receive payments. rt IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)			##: A
	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.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
,	A nospital of a cooperative hospital service of ganization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
8 9	A redeal, state, or local government or governmental and a 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,			
9	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	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.)			
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 5 of the instructions.)			
	(a) Name(s) of supported organization(s) (b)) Line	numi	ber
	(-),(-)	11 0 F	n abo	ve
14	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			
	Schedule A (Form 99) or 9:	90-E7	 Z) 2002
	conduit of from or			,

d Add: Line 27a total O. and line 27b total O. Public support (line 27c total minus line 27d total) 27e 2,472,585.

f Total support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g 98.0625% h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h 1.9375%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records

9

²⁸ Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Schedule A (Form 990 or 990-EZ

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

Page 4

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	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,		Kik	
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30	AUC III - Nilii	topad tom, o
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	Maames.	
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
		_ 556		
		-	Yes No	
		→ ###		
32	Does the organization maintain the following:			
а	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?	32b		<u> </u>
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?	32d	<u> </u>	at 10 C 10 C
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		— Pii		
		— l ista		
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?			
þ	Admissions policies?			
C	Employment of faculty or administrative staff?			
d	Scholarships or other financial assistance?			
е	Educational policies?		<u> </u>	-
f	Use of facilities?		,	ļ
g	Athletic programs?			
ħ	Other extracurricular activities?	33h		ig svigne
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		— Tibi		
		- 1		
34 a	• • • • • • • • • • • • • • • • • • • •			
b		34b	Myrtinii.	Min. d
	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	ľ	I

Schedule A (Form 990 or 990-EZ) 2002

		N/A			
Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount				ļ	0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 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 11 of the instructions.) N/A During the year, did the organization attempt to influence national, state or local legislation, including any attempt to Yes No Amount influence public opinion on a legislative matter or referendum, through the use of: Paid staff or management (Include compensation in expenses reported on lines c through h.) c Media advertisements Mailings to members, legislators, or the public Publications, or published or broadcast statements Grants to other organizations for lobbying purposes Direct contact with legislators, their staffs, government officials, or a legislative body Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means 0. Total lobbying expenditures (Add lines c through h.) If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

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		SUCTETY ENVIRON				<u> </u>	raye o
гац		_		a nelauonampa with Noncham	abie		
51 D				r organization described in section			
			-	-			
				•		Yes	No
	(i) Cash				51a(i)		X
(ii) Other assets				a(ii)		X
							ŀ
							<u> X</u>
(ii) Purchases of assets from a	noncharitable exempt organization			b(ii)		X
(1	ii) Rental of facilities, equipmer	nt, or other assets			b(iii) b(iv)	_	X
					1 6/.0 1		X
							X
					_		X
g	oods, other assets, or services	given by the reporting organization.	If the organization received	d less than fair market value in any			
tr	ansaction or sharing arrangeme	ent, show in column (d) the value of	the goods, other assets, o	r services received:]	<u>N/A</u>	L
(a)	(b)	(c)		(d)	. In a series as a series		
a Transfers from the reporting organization to a noncharitable exempt organization of: (i) Cash (ii) Other assets b Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization (ii) Purchases of assets from a noncharitable exempt organization (iii) Purchases of assets from a noncharitable exempt organization (iii) Reintal of facilities, equipment, or other assets (iv) Reimbursement arrangements (v) Loans or foan guarantees (vi) Performance of services or membership or fundraising solicitations c Sharing of facilities, 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 organization. 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 Description of transfers, transactions, a base of exempt organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c)0 of to Code (other than section 501(c)3) or in section 527?	naring arr	angen	nents				
			.				
						•	
						•	
					Yes	X	No
b_lf	"Yes," complete the following s	chedule: N/A	r· · · · · · · · · · · · · · · · · · ·				
	(a) Name of org	anization	(b) Type of organization	(c) Description of relationsh	ip		
			-				
							
	 .	Dash Other assets **transactions** Sakes or exchanges of assets with a noncharitable exempt organization **Purchases of assets from a noncharitable exempt organization **Rental of facilities, equipment, or other assets **Commission or form quarantees **Performance of services or membership or fundraising solicitations **goal facilities, adjument, mailing lists, other assets, or paid employees **answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value of the **s, other assets, or services given by the reporting organization. If the organization received less than fair market value in any **action or sharing arrangement, show in column (b) the value of the goods, other assets, or services received. **Amount involved** Name of noncharitable exempt organization** Name of noncharitable exempt organization** Description of transfers, transactions, and transfers, transactions, and transfers, transactions of transactions of transactions of					
223151 01-22-03			<u> </u>	Schedule A (Form	n 990 or 9	90-EZ) 2002

FORM 990 OTHER C	HANGES IN NET A	ASSETS OR FUNI	BALANCES	STATEMENT	1
DESCRIPTION				AMOUNT	
NET UNREALIZED LOSS ON	INVESTMENTS		-	<1,38	32.
TOTAL TO FORM 990, PART	<1,38	32.			
FORM 990	ОТНЕ	R EXPENSES		STATEMENT	2
	(A)	(B)	(C)	(D)	
DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING	
AUDIO-VISUAL	10 175	10 175		- · · · · · · · · · · · · · · · · · · ·	
SERVICES BANK/CREDIT CARD	12,175.	12,175.			
CHARGES	5,153.		5,153.		
CATERING AND	3,133.		3,133.		
FACILITIES	81,939.	81,939.			
CONFERENCE		,			
MANAGEMENT AND					
MARKETING	2,756.	2,756.			
CONSULTANTS	135,945.	135,945.			
INSURANCE	5,614.	5,053.	298.	26	53.
MEMBERSHIP MAILING					
LIST	1,923.	1,923.			
MINORITY AND	21 265	21 265			
FELLOWSHIPS REGIONAL CONFERENCE	31,265.	31,265.			
EXPENSES	25,767.	25,767.			
REGISTRATION	23,707.	25,707.			
SERVICES	13,802.	13,802.			
REPAIRS AND	,,				
MAINTENANCE	3,351.	3,016.	178.	15	57.
STAFF AND BOARD	•	•			
DEVELOPMENT	1,594.	1,240.	188.	16	56.
TRANSPORTATION AND					
TOUR FEES	15,689.	15,689.			
WEBSITE MAINTENANCE	42,958.	42,958.			
•					

FORM 990	OTHER INVESTMENTS			STATI	EMENT	3
DESCRIPTION		VALUATION METHOD	Ŋ	i	AMOUNT 10,405.	
INVESTMENTS		MARKET V	- ALUE			
TOTAL TO FORM 990, PART IV, I	LINE 56, COLUMN B				10,4	05.
FORM 990	OTHER ASSETS			STATI	EMENT	4
DESCRIPTION				Al	TUUOM	
INVESTMENT INCOME RECEIVABLE					7	75.
TOTAL TO FORM 990, PART IV, I	LINE 58, COLUMN B				7'	75.
	IST OF OFFICERS, DIR EES AND KEY EMPLOYEE TITLE AND AVRG HRS/WK	-	_	STATI EMPLOYEE BEN PLAN CONTRIB		
DAN FAGIN 235 PINELAWN ROAD MELVILLE, NY 11747	PRESIDENT 5		0.	0.		0.
PERRY BEEMAN P.O. BOX 957 DES MOINES, IA 50304	FIRST VP/PROG 5	RAM COMMI	PTEE 0.	0.		0.
PETER FAIRLEY 1749 LILLIAN ROAD VICTORIA BC V8S 1L2	2ND VP/MEMBER 5	SHIP COMM	0.	0.		0.
CAROLYN WHETZEL P.O. BOX 1893 REDLANDS, CA 92373-0621	SECRETARY 5		0.	0.		0.
PETER P. THOMSON 53 BOYNTON STREET #1 JAMAICA PLAIN, MA 02130	TREASURER 5		0.	0.		0.

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JIM DETJEN 382 COMMUNICATION ARTS BUILDING EAST LANSING, MI 48824-1212	MEMBER 5	0.	0.	0.

0.

0.

TOTALS INCLUDED ON FORM 990, PART V

0.

JOURNALISTS.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO 6 STATEMENT ACCOMPLISHMENT OF EXEMPT PURPOSES LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES 93A PROVIDES SERVICE TO BOTH MEMBER AND NON-MEMBERS WHICH IN TURN PROVIDES AND FOR THE CONTRIBUTIONS THAT ARE MADE WHICH PROMOTE THE EXCHANGE OF 94 INFORMATION ON CURRENT ENVIRONMENTAL ISSUES 93B NATIONAL AND REGIONAL CONFERENCES HELD TO BUILD A STRONGER, BETTER EDUCATED, AND MORE CLOSELY CONNECTED NETWORK OF JOURNALIST AND EDITORS IN ALL MEDIA WHO COVER ENVIRONMENTAL-RELATED ISSUES, AND THROUGH THAT NETWORK, TO IMPROVE AND INCREASE NEWS COVERAGE OF CRITICALLY IMPORTANT ENVIRONMENTAL ISSUES THROUGH PROGRAMS AND SERVICES DESIGNED BY AND FOR