Form 990

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

r the 21	000 calendar year, OR tax year period beginning	and (ending			
	C Name of expeniention				D Employe	er identification number
licable.	I FIESSE I	TED STATES				
Change address	of label of WILDLIFE LAND TRUST				52-	1808517
Change	of type Number and street (or P.O. hox if mail is not delivered	to street address)		Room/suite	E Telepho	ne number
Initial return	Specific 2100 L STREET, N.W.	•				2)452-1100
	Instruc-	<u> </u>		•	F Check	it application pending
Amende						
use atso	o for		(H and I	are not applic	able to sect	ion 527 orgs.)
		o.) 🔲 527				·
	OR 4947(a)(1)	·	H(b) If Ye	es," enter num	ber of affilia	ates >
ectio	on 501(c)(3) organizations and 4947(a)(1) nonexempt character a completed Schedule A (Form 990 or 900-EZ).	ritable trusts				Yes X No
ountin			·		•	hu an
thod:	Cash ZX Accrual Other (specify)		• •			
ck han	a b if the organization's gross receipts are normally not m	nra than €25 000. Tha				
						
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		••••••) 7	<u> </u>
8 a	· · · · · · · · · · · · · · · · · · ·	Securities		(B) Other		8.
					86.	ži
b		86				
		80		<43,8	39.	
d	Net gain or (loss) (combine line 8c_columns (A) and (B))			Stmt	1 80	<43,839.>
g	Special events and activities (at or long to the long)				177	10
а	Gross revenue (no including 5 of c	contributions			1397 138	(#) (1)
	reported on line (2)	92	∟ !		_ 35.7	78 60
b	Less: direct expenses other than had a life xpenses	9b				
t	Net income of (loss) from special events (subtractine 9b from lin	e 9a)				
10 a	Gross sales of inventor (15/5) Fluids and allowances	10a	1			
b	Less: cost of goods solu	10b	_			왕) (대)
			e 10a)			
			-			
12						
13						
14						105,230.
15						3,617,169.
						
17	Total expenses (add lines 16 and 44, column (A))					
						1000
18						
18 19					19	1,673,743.
	Net assets or fund balances at beginning of year (from line 73, coll Other changes in net assets or fund balances (attach explanation)	umn (A))	Stat	ement	2 20	1
19 20	Net assets or fund balances at beginning of year (from line 73, col	umn (A)) See	Stat	ement	2 20	15,743.
	ck in included in including the change of th	please in the contributions of the contributions of the contributions, gifts, grants, and similar amounts received: a Direct public support b Total (add lines 1a through 1c) c Government contributions, gifts, grants, and similar amounts received: a Direct public support b Total (add lines 1a through 1c) c Gross rents b Less: rental expenses c Net rental incorne or (loss) (subtract line 6b from line 6a) 7 Other investment corner land a contribution of corner or (loss) (subtract line 6b) b Less: cost or other basis and sales expenses c Net rental incorne or (loss) (subtract line 6b from line 6a) 7 Other investment and corner land and contributions a Gross are or (loss) (subtract line 6b from line 6a) 7 Other investment made and contributions a Gross are or of (loss) (subtract line 6b from line 6a) 7 Other investment more (describe) a Gross are or of (loss) (subtract line 6b from line 6a) 7 Other investment more (describe) a Gross are or of (loss) (subtract line 6b from line 6a) 7 Other investment more (describe) a Gross are or of (loss) (subtract line 6b from line 6a) 7 Other investment more (loss) (subtract line 6b from line 6a) 7 Other investment more (loss) (subtract line 6b from line 6a) 8 a Gross amount from sale of assets other than inventory b Less: cost or other basis and sales expenses c Net rental incorne or (loss) (subtract line 6b from line 6a) 7 Other investment more (loss) (subtract line 6b from line 6a) 7 Other investment more (loss) (subtract line 6b from line 6a) 7 Other investment more (loss) (subtract line 6b from line 6a) 8 a Gross are of line 1c (loss) (subtract line 6b from line 6a) 9 Special events and active 1c (loss) (subtract line 6b from line 6a) 10 a Gross sales of inventions special events (subtract line 6b from line 6a) 10 a Gross sales of inventions special events (subtract line 6b from line 6a) 10 a Gross and contributions (special events (special even	Prepage of the component of the compone	Presset C. Name of organization Presset C. Name of organization Presset C. Name of organization C. Name of	Preserved C. Name of organization Preserved Preserv	December December

SCANNED JUL 1 2 2001

52-1808517

WILDLIFE LAND TRUST

Part II Statement of All of Part III Functional Expenses (4) 0	rganizat rganiza	ions must complete column tions and section 4947(a)(1)	(A). Columns (B), (C), an I nonexempt chardable tru	a (D) are required for section ists but optional for others.	11 30 1(c)(3) a110
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 \$ 11,550 . noncash \$	22	11,550.	11,550.	Statement 4	
23 Specific assistance to individuals (attach schedule	23				
24 Benefits paid to or for members (attach schedule)	24				<u> </u>
25 Compensation of officers, directors, etc.	25	0.	0.	0.	0.
26 Other salaries and wages	26				
27 Pension plan contributions	27			<u>-</u>	
28 Other employee benefits	28	57,853.	57,853.		
29 Payroll taxes	29				02 056
30 Protessional fundraising fees	30	83,056.			83,056.
31 Accounting fees	31				
32 Legal fees	32	9,190.	9,190.		
33 Supplies	33	19,212.	19,212.		
34 Telephone	34	2,759.	2,759.		
35 Postage and shipping	35	3,882.	3,882.	+ 	
36 Occupancy	36	10,958.	10,958.		
37 Equipment rental and maintenance					
38 Printing and publications	38				
39 Travel		60,462.	60,462.		
40 Conferences, conventions, and meetings	1				
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	6,907.	6,907.		
43 Other expenses (itemize):					,
a	43a		<u></u>		
b	43b		<u> </u>	<u> </u>	
ε	43c				
d	43d				
e See Statement 3	43e	4,359,432.	720,089.	105,230.	3,534,113.
Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	. 44	4,625,261.	902,862.	105,230.	3,617,169.
Reporting of Joint Costs. Did you report in column (B					·
fundraising solicitation?					Yes X No
If "Yes," enter (i) the aggregate amount of these joint o	osts \$: (i	ii) the amount allocated to	Program services \$;
(iii) the amount allocated to Management and general		; and (i	iv) the amount allocated t	o Fundraising \$	
Part III Statement of Program Sen	rice A	ccomplishments			
What is the organization's primary exempt purpose?					
ORGANIZED TO PROTECT WIL	D A	NIMALS & THEI	R HABITAT.		Program Service Expenses
All organizations must describe their exempt purpose achievem	ents in e	clear and concise manner. State ti	he number of clients served, p	ublications issued, etc. Discuss	(Required for 501(c)(3) and
achievements that are not measurable. (Section 501(c)(3) and (4) allocations to others)	organiza	itions and 4947(a)(1) nonexempt of	nancable trusts must also ente		(4) orgs. and 4947(a)(1) trusts; but optional for others
a ORGANIZED TO PROTECT W	ILD	ANIMALS AND	THEIR HABIT	AT, AND	
	CRU	ELTY INFLICTE	D UPON THEM	1.	
		(G	rants and allocations \$	11,550.	902,862.
b					
		(G	rants and allocations \$		
C					
	_	(G	rants and allocations \$)	
d					
		(G	irants and allocations \$)	
e Other program services (attach schedule)			rants and allocations \$)	
f Total of Program Service Expenses (should equa	Il line 4	4, column (B), Program servi	ices)	<u></u>	902,862
023011		2			Form 990 (2000

Part IV Balance Sheets

Note:		re required, attached schedules and amounts w Id be for end-of-year amounts only.	ithin the	description column	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing			1,844,413.	45	1,210,768.
	46	Savings and temporary cash investments			1,044,413.	46	1,210,700.
	47 a	Accounts receivable	47a	203,887.			
		Less: allowance for doubtful accounts	l			476	203,887.
	_						
	48 a	Pledges receivable					
		Less: allowance for doubtful accounts				48c	
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees,					
		and key employees				_50_	
Assets	51 a	Other notes and loans receivable	51a				
Ass		Less, allowance for doubtful accounts				51c	
-	52	Inventories for sale or use				52	
	53	Prepaid expenses and deterred charges			111,888.	53	311,984.
	54	Investments - securities	1	Cost FMV		54	
	55 a	Investments - land, buildings, and					
		equipment basis	55a				
			i			145 C	
	Ь	Less: accumulated depreciation				55c	
	56	Investments - other			<u> </u>	56	
		Land, buildings, and equipment: basis		1,098,006.	007 067		1 000 006
		Less: accumulated depreciation			907,967.		1,098,006.
	58	Other assets (describe S	ee s	tatement 5	6,839.	58_	13,478.
		Total appets (add Spec 45 through 50) (much appet)	ina 741		2,871,107.	59	2,838,123.
	59 60	Total assets (add lines 45 through 58) (must equal			233,379.	60	1,022,248.
	61	Accounts payable and accrued expenses			233,375.	61	1/022/210.
Ś	62	Deferred revenue		,	· · · · · · · · · · · · · · · · · · ·	62	
Liabilities	63	Loans from officers, directors, trustees, and key emp				63	
abi		Tax-exempt bond liabilities				64a	· <u> </u>
ت		Mortgages and other notes payable			963,985.		
	65	Other liabilities (describe)		65	•
		•					
	66	Total liabilities (add lines 60 through 65)			1,197,364.	66	1,022,248.
	Orgai	nizations that follow SFAS 117, check here 🕨 🗓 🗓	and co	mplete lines 67 through			
en.		69 and lines 73 and 74					4-4 4-4
Ö	67	Unrestricted			910,816.		672,810.
alar	68	Temporarily restricted			760 007	68	70,000.
ÖÖ To	69	Permanently restricted			762,927.	69	1,073,065.
Net Assets or Fund Balances	Organ	nizations that do not follow SFAS 117, check here 70 through 74.	· Ш	and complete lines			
ō	70	Capital stock, trust principal, or current funds				70	
Sets	71	Paid-in or capital surplus, or land, building, and equi		l l		71	
Asi	72	Retained earnings, endowment, accumulated income				72	
že į	73	Total net assets or fund balances (add lines 67 thro				#- (F-)	
-		column (A) must equal line 19 and column (B) must	-		1,673,743.	73	1,815,875.
	74	Total liabilities and net assets / fund balances (a			2,871,107.	74	2,838,123.

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	990 (2000) WILDLIFE	LAND TRUST				52-1	8085	17 Page
Pa	rt IV-A Reconciliation of Revenu		Part	IV-B Recond	iliation of Exp	enses	per A	udited
	Financial Statements wit	h Revenue per			ial Statements	With	Expen:	ses per
	Return Total revenue, gains, and other support	a de la compansión de la compa	а	Return Total expenses and h	ner 24220	Т	77 DR DR D	are a a zerowa a
4	Total revenue, gains, and other support per audited financial statements	$a \mid 4,751,650.$		audited financial state	ements	▶	a 4,	609,518.
b	Amounts included on line a but not on		b	Amounts included or line 17, Form 990:	ine a but not on	ŀ		
•	line 12, Form 990:		m	Donated services		ļ		
(1)	Net unrealized gains		\ ``	and use of facilities	\$			
	on investments\$		(2)	Prior year adjustmen	ts			
(2)	Donated services			reported on line 20,				
	and use of facilities \$			Form 990	\$			
(3)	Recoveries of prior		(3)	Losses reported on				
	year grants\$			line 20, Form 990 .	\$!		
(4)	Other (specify):		(4)	Other (specify).		Ţ		
	\$				_\$			
	Add amounts on lines (1) through (4)	b]	Add amounts on line	s (1) through (4)	▶	ь	
C	Line a minus line b	. 4,751,650	C	Line a minus line b		▶[c 4,	609,518.
đ	Amounts included on line 12, Form		d	Amounts included or	ine 17, Form			
	990 but not on line a:		1	990 but not on line a	۱.			
(1)	Investment expenses		(1)	Investment expenses	3			robiili
	not included on			not included on				
	line 6b, Form 990 \$			line 6b, Form 990	. \$			
(2)	Other (specify):		(2)	Other (specify):		l		
,	S			tmt 6	s 15,7	43.		
	Add amounts on lines (1) and (2)		_	tmt 6 Add amounts on line	s (1) and (2)	▶	d	15,743
	Total revenue per line 12 Form 000		е	Total expenses per li		[
	(line c plus line d)	e 4,751,650.	·	(line c plus line d)			e 4,	625,261.
Pε	irt V List of Officers, Directors, 1	rustees, and Key I	Emplo	yees (List each or	ne even if not comper	nsated.)		
				le and average hours			ibutions to e benefit	(E) Expense account and
	(A) Name and address		pe	r week devoted to position	(if not paid, enter	plans &	deferred ensation	other allowance
	UL G. IRWIN		CHA	IRMAN			ı	
$\bar{1}\bar{4}$	004 CROSSLAND LANE		ļ					
ĎĀ	RNESTOWN, MD 20878			T-TIME	0.		0.	0.
JO	HN GRANDY		VIC	E CHAIRMAN	1			
47	02 WARREN STREET, NW		ŀ					
WĀ	SHINGTON, DC		PAR'	T-TIME	0.		0.	0.
	THOMAS WAITE III		TRE.	AS/SECR		1		
	61 GLENRIDGE COURT							
VΪ	ENNA, VA 22182		PAR'	T-TIME	0.		0.	0.
JA	N HARTKE		VP (CHAIRMAN				
$\bar{1}\bar{1}$	280 SPYGLASS COVE LANE		1	-				
RE	STON, VA			T-TIME	0.		0.	0.
JO	HN KULLBURG		DIR:	ECTOR				-
$\bar{20}$	653 ANNDYKE WAY		j					
<u>GE</u>	RMANTOWN, MD			L-TIME	0.		0.	0.
LA	RA B. MANGAN		ASS	T. SECRETA	IRY		Ţ	
<u>1</u> 3	071-A SHADYSIDE LANE		1				ļ	
ĞĒ	RMANTOWN, MD		FUL	L-TIME	0.		0.	0.
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HUMANE SOCIETY OF THE UNITED STATES 52-1808517 Form 990 (2000) WILDLIFE LAND TRUST Page 5 N/A Yes No Part VI Other Information 76 Х Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 77 Were any changes made in the organizing or governing documents but not reported to the IRS? 77 If "Yes," attach a conformed copy of the changes. Х 78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78a 78b b If 'Yes,' has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? 79 If "Yes," attach a statement 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80a See Statement 8 b If "Yes," enter the name of the organization exempt OR nonexempt. and check whether it is 81 a Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 Did the organization file Form 1120-POL for this year? 81b 82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than 82a 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 for reporting in Part III.) 83a 83 a Did the organization comply with the public inspection requirements for returns and exemption applications? b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 83b Did the organization solicit any contributions or gifts that were not tax deductible? 84a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not 84b tax deductible? 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 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. Dues, assessments, and sim Section 162(e) lobbying and Aggregate nondeductible arr Taxable amount of lobbying Does the organization elect t h If section 6033(e)(1)(A) due allocable to nondeductible I 501(c)(7) organizations. E b Gross receipts, included on 87 501(c)(12) organizations. b Gross income from other so against amounts due or rece At any time during the year, 88 or an entity disregarded as s If "Yes," complete Part IX 89 a 501(c)(3) organizations. E section 4911 ► b 501(c)(3) and 501(c)(4) or transaction during the year of If "Yes," attach a statement of c Enter: Amount of tax impose sections 4912, 4955, and 49 Enter: Amount of tax on line 90 a List the states with which a c Number of employees employees **Q1** The books are in care of

	85c	N/A			
Dues, assessments, and similar amounts from members		N/A			Ar.
Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		N/A			96 () 345 ()
Taxable amount of lobbying and political expenditures (line 85d less 85e)		N/A			
Does the organization elect to pay the section 6033(e) tax on the amount in 85f?		N/A	85g		4
If section 6033(e)(1)(A) dues notice were sent, does the organization agree to add the amount in 85f to its					_
allocable to nondeductible lobbying and political expenditures for the following tax year?			85h		
501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A		- S	77
Gross receipts, included on line 12, for public use of club facilities		N/A	注意	. (j. 15. lig.) 11. lig (18. lig)	
501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A	7:31	사이탈	
Gross income from other sources. (Do not net amounts due or paid to other sources		-	丁沙計		
against amounts due or received from them.)	87b	N/A			3
At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or		·	7		
or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 30				į.	
If "Yes," complete Part IX			88		X
501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:				Serg L	
section 4911 ► 0 • ; section 4912 ► 0 • ; section 491	55 ▶	0.	. 41		
501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			-	`	
transaction during the year or did it become aware of an excess benefit transaction from a prior year?					
If "Yes," attach a statement explaining each transaction			89ь		Х
Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under					
sections 4912, 4955, and 4958		•		1	0.
					0.
Enter: Amount of tax on line 89c, above, reimbursed by the organization					
Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed DISTRICT OF COLUMBIA	A	>			
Enter: Amount of tax on line 89c, above, reimbursed by the organization	A	>			0
Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed DISTRICT OF COLUMBIA Number of employees employed in the pay period that includes March 12, 2000	<u>A</u>	90b	52-1		0
Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed DISTRICT OF COLUMBIA Number of employees employed in the pay period that includes March 12, 2000	<u>A</u>	>	52-1		0
Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed DISTRICT OF COLUMBIA Number of employees employed in the pay period that includes March 12, 2000 The books are in care of CONTROLLER	<u>A</u>	90b		100	0
Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed DISTRICT OF COLUMBIA Number of employees employed in the pay period that includes March 12, 2000	<u>A</u>	90b		100	0
Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed DISTRICT OF COLUMBIA Number of employees employed in the pay period that includes March 12, 2000 The books are in care of CONTROLLER Located at 2100 L STREET, N.W., WASHINGTON, DC	ATelephor	. 90b	2003	100	
Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed DISTRICT OF COLUMBIA Number of employees employed in the pay period that includes March 12, 2000 The books are in care of CONTROLLER	ATelephor	. 90b	2003	100 7	

Part VII Analysis of Income-P	U U	nrelated t	usiness income	Exclude	d by section 512, 513, or 514	45)
Enter gross amounts unless otherwise	(A)		(B)	(C)	(D)	(E) Related or exempt
ndicated.	Busin		Amount	Exclu- sion	Amount	function income
93 Program service revenue:	cod			code		Tanation mount
a				+ +		
b						
·	L L	-		+ +		
d		_		+ +		
	1	-		+		
f Medicare/Medicaid payments				-}		<u> </u>
g Fees and contracts from government ager				╀		
94 Membership dues and assessments				+		
95 Interest on savings and temporary		- 1		14	132,258.	
cash investments		-		+ * *	132,230.	
96 Dividends and interest from securities	T 17	-3 3 - 7 2	4 Martin Berlin de De De de en en en en			
97 Net rental income or (loss) from real estat		13/4 (4/4)	ligis di kacama	: 1 37		are are 1000 and 2000 804 804 6
a debt-financed property	1					
b not debt-financed property				+		
98 Net rental income or (loss) from personal				+ +		-
99 Other investment income				+ +		<u> </u>
09 Gain or (toss) from sales of assets				1.0	-42 020	
other than inventory				18	<43,839.	<u> </u>
01 Net income or (loss) from special events						
02 Gross profit or (loss) from sales of invent	ory					
03 Other revenue:				١ , إ	150 400	
a LIST RENTAL INCOME	<u> </u>			15	159,493.	
b	 					
t				 -		
d				4		
e				1	0.47 0.10	
04 Subtotal (add columns (B), (D), and (E))				<u>. </u>	247,912.	0
05 Total (add line 104, columns (B), (D), and						247,912
lote: Line 105 plus line 1d, Part I, should	equal the amount on i	ine 12, l	Part I.			
Part VIII Relationship of Activ						
Line No. Explain how each activity for whic				ed import	antly to the accomplishment	of the organization's
exempt purposes (other than by p	providing funds for such	purposes).			<u> </u>
	_ 					
			 			
والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج	ng Taxable Subsi	diarie:		ded En		
V 424 1.10 X	(B) Percentage of	N	(C) ature of activities	ŀ	(D) Total income	(E) End-of-year
V 424 1.10 X	Percentage of 1					assets
(A) Name, address, and EIN of corporation,	ownership interest		·			
(A) Name, address, and EIN of corporation, partnership, or disregarded entity						
(A) Name, address, and EIN of corporation.	ownership interest					
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	ownership interest %					
Name, address, and EIN of corporation, partnership, or disregarded entity N/A	ownership interest % % % %					
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	ownership interest % % % %	ociate	d with Persona	al Bene	fit Contracts	
Name, address, and EIN of corporation, partnership, or disregarded entity N/A	wnership interest % % % % % gransfers Ass					Yes X N
Name, address, and EIN of corporation, partnership, or disregarded entity N/A Part X Information Regardir	wnership interest % % % % % mg Transfers Ass	r indirec	ly, to pay premiums o	n a perso		Yes X N

SCHEDULE A

(Form 990 or 990-EZ)

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

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. Name of the organization HUMANE SOCIETY OF THE UNITED STATES

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number

WILDLIFE LAND TRUST			52 18085	17
Part I Compensation of the Five Highest Paid Empl (See instructions. List each one. If there are none, enter "None.")		icers, Director		
(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
None				
]	
		 	<u> </u>	
	{			
Total number of other employees paid		\$ 14 C Y 17 X 1 W 1		
over \$50,000	0			
Part II Compensation of the Five Highest Paid Inde (See instructions. List each one (whether individuals or firms). If the		for Profession	al Services	
(a) Name and address of each independent contractor paid more	e than \$50,000	(b) Type of s	service	(c) Compensation
NATIONAL OUTDOOR SPORTS ADVERTISING	, INC.			
1200 POTOMAC STREET, NW, WASHINGTON	, DC 20007	ADVERTISIN	iG	83,056.
				
				_
Total number of others receiving over				
\$50,000 for professional services	▶] 0			Siavan Hybri

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

Schedule A (Form 990 or 990-EZ) 2000

Schedule A (Form 990 or 990-EZ) 2000

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-EZ) 2000 WILDLIFE LAND TRUST

Par	Note: You may use th	e worksheet in the ins	ructions for converting	from the accrual to the	he cash method of acc	counting.
	lar year (or fiscal year ling in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	2,962,018.	3,186,298.	4,594,317.	3,835,742.	14,578,375.
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	202,746.	288,886.	<34,154.	>	457,478.
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	52,189.	52,231.	91,439.		195,859.
	organization after June 30, 1975	·	32,231.	71,4376		233,0001
19	Net income from unrelated business		İ			
20	activities not included in line 18 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					710
23	Total of lines 15 through 22	3,216,953.	3,527,415.	4,651,602.	3,835,742	. 15,231,712.
24	Line 23 minus line 17			4,685,756	3,835,742	. 14,774,234.
25	Enter 1% of line 23	32,170.				205 405
26	Organizations described on lines 1	G or 11: a Enter 2% of	l amount in column (e), lii	ne 24 .	<u>26a</u>	295,485.
b	Attach a list (which is not open to pugovernmental unit or publicly suppoin line 26a. Enter the sum of all thes	orted organization) whose	total gifts for 1996 throu	gh 1999 exceeded the ar	nount shown	
	Total support for section 509(a)(1)	tact: Entar line 24 colum	n (a)		▶ 26c	14,774,234.
	Add: Amounts from column (e) for		195.859. 1	9		制度如果的污染 使定数数
•	Add. Amounts from Column (c) for			6b		195,859.
е	Public support (line 26c minus line	26d total)	•		▶ 26e	
f	Public support percentage (line 26	le (numerator) divided b	v line 26c (denominator)	1)	251	98.6743
27	Organizations described on line 12	2: a For amounts includ	ed in lines 15, 16, and 17	that were received from	a "disqualified person," at	ttach a list (which is not oper
	to public inspection) to show the na	ime of, and total amounts	received in each year fro	m, each "disqualified per	son." Enter the sum of su	ich amounts for each year:
	(1999) N/A	(1998)		(1997)		6)
b	For any amount included in line 17	that was received from a	nondisqualified person, a	ttach a list to show the na	ame of, and amount rece	ived for each year,
~	that was more than the larger of (1 individuals) After computing the differences amounts) for each year:) the amount on line 25 for Eference between the amo	or the year or (2) \$5,000.	(Include in the list organi	izations described in line:	s 5 through 11, as well as
	(1999)	(1998)		(1997)	(199	6)
c	Add: Amounts from column (e) for 17Add. Line 27a total	lines: 15		16	<u> </u>	. N/A
	17	20	Llina 27h tatal	_ 41	270	
đ	Add. Line 27a total Public support (line 27c total minus	and	1 mie 270 (O(d)		276	
e	Public support (line 2/c total minus Total support for section 509(a)(2)	tact: Enter amount on lin		▶ 271		<u> </u>
1	Public support for section 509(a)(2) Public support percentage (list	rest. Enter amount on his no 27e formesstost di	vided by line 27f (den	ominator))		37/3
-						
9	Investment income percentage	re (line 18 column (e	(numerator) divided	by line 27f (denomina	ator)) > 27h	N/A º

these grants in line 15. (See page 5 of the instructions.)

None

Schedule A (Form 990 or 990-EZ) 2000 WILDLIFE LAND TRUST

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.) Does the organization maintain the following:		(To be completed ONLY by schools that checked the box on line 6 in Part IV)	<u>N/</u>	<u>A</u>	
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? 30 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.) Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff? 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? 32c 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.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? 33d Admissions policies? 33e Educational p				Yes	No
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Schedule A (Form 990 or 990-EZ) 2000

Schedule A (Form 990 or 990-EZ) 2000 WILDLIFE LAND TRUST

P		Expenditures by Ele ed ONLY by an eligible organ	-						N/A
Che		anization belongs to an affili							
Che	ck here L If you ch	ecked "a" above and "limited	control" provisions apply.		- т				
		mits on Lobbying E	-				(a) ited group totals		(b) To be completed for ALL electing organizations
_	· (The tan	in expenditures means and	Junts paid of incurred.)				/A		
36	Total lobbying expenditures to	o influence public opinion (a	rassionts Inhhvinn\		36	17,	, 11		
37	Total lobbying expenditures to				37		_		
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39	Other exempt purpose expend				39	-			
40	Total exempt purpose expend			The state of the s	40				
41	Lobbying nontaxable amount	. Enter the amount from the	following table -	[-					
	If the amount on tine 40 is -	The lobbyin	ng nontaxable amount is -	ļ	<i>.</i> 1				
	Not over \$500,000	20% of the arr	nount on line 40					8.48	
	Over \$500,000 but not over \$1,000	0,000 \$100,000 plus	15% of the excess over \$500,0	000	* 4		Hizid.		
	Over \$1,000,000 but not over \$1,56			1 5	41	10 17			
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42	Grassroots nontaxable amout				42				
43	Subtract line 42 from line 36.				43				<u>-</u>
44	Subtract line 41 from line 38.	Enter -0- If line 41 is more to	nan line 38		44	9 35 35 16 A		10.1	i milga mengeri malijemen jar
	Caution: If there is an amo	uset on oither line 42 or li	oo AA yay must filo Eam	m 4720		a katik tiyo			
			Labbuisa C-a						
_		<u> </u>	Loudying Exp	penditures During	4-Yea	r Averagin	g Period		N/A
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Schedule A (Form 990 or 990-EZ) 2000 WILDLIFE LAND TRUST 52-1808517 Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 51 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Yes Nο a Transfers from the reporting organization to a noncharitable exempt organization of: Х a(ii) (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) Rental of facilities, equipment, or other assets (iv) Reimbursement arrangements b(v) (v) Loans or loan guarantees b(vi) (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 N/A transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: (d) (a) (c) Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements Amount involved Line no. 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 X No ______ Yes Gode (other than section 501(c)(3)) or in section 527? h If "Yes," complete the following schedule: (b) (c) (a) Description of relationship Type of organization Name of organization

Schedule B (Form 990 or 990-EZ)

Schedule of Contributors

Supplementary Information for line 1d of Form 990 or line 1 of Form 990-EZ (see instructions)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

وزا.

Name of organization HUMANE SOCIETY OF THE UNITED STATES

Employer identification number 52-1808517

Organization type (check one)-Section: X 501(c)(3) ◀ (enter number) 527 or 4947(a)(1) nonexempt chantable trust Section 501(c)(7), (8), or (10) organizations-Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year. (But see General rule below.) Enter here the total gifts received during the year for a religious, charitable, etc., purpose >\$

Note: This form is generally not open to public inspection except for section 527 organizations.

General Instructions

Purpose of Form

Schedule B (Form 990 or 990-EZ) is used by organizations required to file Form 990, Return of Organization Exempt From Income Tax, or Form 990-EZ, Short Form Return of Organization Exempt From Income tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ).

WILDLIFE LAND TRUST

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization.

Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 9090-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ.

Caution: Schedule B (Form 990 or 990-EZ) is not a substitute for the list of contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ).

Public Inspection

Schedule B (Form 990 or 990-EZ) is:

- Open to public inspection for a section 527 political organization.
- Generally not open to public inspection for the other organizations that must file this form

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ.

See the Instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ).

Contributors Required To Be Listed On Part I

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations.

General rule. Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's gifts of \$1,000 or more for the year.

Section 501(c)(3) organizations. For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(iii)(a)).

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the

greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For noncharitable contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the General rule discussed above.

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000, aggregate all of a contributor's gifts for the year (regardless of amount) For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III.

If section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list any charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

Specific Instructions

Note: You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.

Part I. In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year; and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona tide bid and asked prices) on the contribution date. See Regulations section 20,2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes, must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III. total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

023451 12-19-00

Name of organization
HUMANE SOCIETY OF THE UNITED STATES

WILDLIFE LAND TRUST

Employer identification number

52-<u>1808517</u>

Part I	Contributors		
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
_1		\$146,796.	Individual Payroll Noncash X (Complete Part II if a noncash contribution.)
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
2	Name, address and 21. Cook		Individual Payroll Noncash X (Complete Part II if a noncash contribution.)
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
3		- s	Individual Payroll Noncash (Complete Part II if a noncash contribution.)
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
4			Individual Payroll Onncash Complete Part II if a noncash contribution.)
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
5		\$	Individual Payroll Noncash (Complete Part II if a noncash contribution.)
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
6		\$	Individual Payroll Noncash (Complete Part II if a noncash contribution.)

HUMANE SOCIETY OF THE UNITED STATES

52-1808517

WILDLIFE LAND TRUST

(a)	<u> </u>		
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	LAND GIFT		
1			
		\$	
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I		(SSS III SIII SIII SIII SIII SIII SIII	· · · · · · · · · · · · · · · · · · ·
	LAND GIFT		
2			
		s	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I			
		· ·	
		\$	
-			
(a) No.	(L)	(c)	(d)
from	(b) Description of noncash property given	FMV (or estimate)	Date received
Part I		(see instructions)	
		— <u>.</u>	
		\$	
(a)			_
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I			<u> </u>
			
			
		s	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d) Date received
from Part I	Description of noncash property given	(see instructions)	Date leceived
	I	\$	1

Form 990 Pa	rt V - Officer Compensati Related Organizations	Statement 7		
Officer's Name	Name of Related Organization	Compen- sation	Employee Ben Plan Contrib	Expens Accoun
PAUL G. IRWIN	THE HUMANE SOCIETY OF THE UNITED STATES	269,370.	19,478.	0
G. THOMAS WAITE III	THE HUMANE SOCIETY OF THE UNITED STATES	136,450.	8,908.	0
JAN HARTKE	THE HUMANE SOCIETY OF THE UNITED STATES	111,500.	8,908.	0
JOHN KULLBURG	THE HUMANE SOCIETY OF THE UNITED STATES	106,090.	7,944.	0
Form 990 I	dentification of Related Part VI, Line 8		State	ement
Name of Organization			Exempt 1	NonExemp
THE HUMANE SOCIETY OF			X X	
THE NATIONAL ASSOCIATENVIRONMENTAL EDUCATI	ON			
CENTER FOR RESPECT OF HUMANE SOCIETY INTERN	F LIFE AND THE ENVIRONMENT		X X	
EARTHVOICE INTERNATION			x	
MEADOWCREEK, INC.		1	X X	
WORLDWIDE NETWORK, IN EARTHKIND USA	VC •		X	

Form 990	Cash Grants and Allocations		Statement	4
Classification	Donee's Name Donee's Address	Donee's Relationshi	p Amour	nt
	COMPACT CAPE COD CONSERVATION TRUST	None	50	00.
	MAGIC, INC.	None	<u>.</u>	50.
	JANE GOODALL INSTITUTE	None	1,00	00.
	GOLDEN STREAM CORRIDOR PRESERVE	None	10,00	00.
Total Included	on Form 990, Part II, line 22		11,55	50.
Form 990	Other Assets		Statement	5
Description			Amount	
ACCRUED INTERES	_	13,478.		
Total to Form 9	=	13,478.		
Form 990	Other Expenses Included on Form	990	Statement	6
Description			Amount	
MANAGEMENT AND GENERAL ALLOCATION			15,743.	
Total to Form 990, Part IV-B			15,743.	

Form 990 Gair	n (Loss) From S	are or other	Assets		Statement	1
Description		Date Acquired	Date Sold		Method Equired	
Description		Acquired				
LAND				DO	ONATED	
Name of Buyer	Gross Gales Price Ot		pense Sale	Deprec	Net Ga	
	73,686.	117,525.	0.		0. <43,8	39.>
To Fm 990, Part I, ln	73,686.	117,525.	0.		0. <43,8	39.> —
Form 990 Other	Changes in Net	Assets or Fur	nd Balance	es	Statement	2
Description					Amount	
-						
PRIOR PERIOD ADJUSTMENT	г				15,7	43.
				_	15,7 15,7	
PRIOR PERIOD ADJUSTMEN	t I, line 20	r Expenses		<u>-</u>		
PRIOR PERIOD ADJUSTMENT Total to Form 990, Par	t I, line 20	(B)	(C)	- -	15,7	43.
PRIOR PERIOD ADJUSTMENT Total to Form 990, Par	t I, line 20 Othe	 _	(C) Managem and Gen		15,7 Statement	43.
PRIOR PERIOD ADJUSTMENT Total to Form 990, Par	Othe	(B) Program	Managem and Gen		15,7 Statement (D)	3 ng

Form **8868** (December 2000)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Internal R	evenue Service					
• If you	are filing for an Ad	omatic 3-Month Extension ditional (not automatic) 3-P t II unless you have alread	Month Extension, compl	ete only Part II (on pag		•
Part I	Automati	3-Month Extension	of Time - Only submit	original (no copies nee	ded)	
All other	corporations (inclu	t ions requesting an automal ding Form 990-C filers) must Os and trusts must use Form	use Form 7004 to reques	t an extension of time	to file income	tax
Type or print	1	t Organization OCIETY OF THE LAND TRUST	UNITED STATE	5	E	mployer identification number 52-1808517
File by the due date for filing your return. See	2100 L S	and room or suite no. If a PTREET, N.W.	·			
instructions	City, town or po	st office, state, and ZIP cod	e. For a foreign address,	see instructions.		
Check ty	ype of return to be	filed (file a separate applica	tion for each return):			
□ Fo	rm 990 rm 990-BL rm 990-EZ rm 990-PF	 1	corporation) sec. 401(a) or 408(a) trust) rust other than above)		Form 4720 Form 5227 Form 6069 Form 8870	, }
box ► 1 I re to	. If it is for par	t of the group, check this bo 3-month (6-month, for 990 anization return for the organ	and attach a line and attach a line. -T corporation) extension	st with the names and	EINs of all me	
>	tax year begin		, and end	ing		·
2 lí t	his tax year is for le	ss than 12 months, check re	eason: Initial retu	COPY	Zum [Change in accounting period
		r Form 990-BL, 990-PF, 990 . See instructions				<u>\$</u>
		r Form 990-PF or 990-T, ent nolude any prior year overpa				\$
		ct line 3b from line 3a. Inclu , by using EFTPS (Electronic	• • •		•	/-
			Signature and Ve	rification		
		clare that I have examined this fo and that I am authorized to pre		schedules and statement	ts, and to the be	est of my knowledge and belief,
Signature	▶ Dan	Noodson	Title > CAG		Da	te \5/11/01
		duction Act Notice, see ins	truction			Form 8868 (12-2000)