Form 990-T		Ex	cempt Orga	rn	OMB No. 154	lo. 1545-0687						
	tment of the Treasury	For cale		proxy tax und ther tax year beginning See separa	g	, 1994, and		,	19	199	4	
Intern	Check box if		Namo of organizati		. 1 1.6. 1.							
A ☐ address changed									D Employer identification number (Employees' trust, see instructions for Block D.			
_	empt under section	Please	Number street and	d room or suite no. (If a	PO hox	see nage 5 of i	instructions \					
\mathbb{H}	D 501()() or Print or Number, street, and room or suite no. (If a P.O. box, see page 5 of instructions.)								E Unrelated business activity codes			
Ш	408(e)	Туре	City or town, state,	and 7IP code						tions for Block E)	ny codes	
	ok value of all assets	1	City of town, state,	and Zii code								
at	end of year	F Grou	 In exemption nu	ımber (see instruct	ions for	Block F)				<u>; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; </u>		
<u>-</u>	Check type of or		<u> </u>		501(c)		ection 401('a) truc	+ D c	ection 408(a	a) truct	
	31	J							ı 🗆 3	ection 400(a	a) iiusi	
Ηι	Describe the orga	anization's	s primary unrelat	ted business activities	ty. (See	instructions	for Block F	1.)				
									-	.		
1 [During the tax year,	, was the c	corporation a subs	idiary in an affiliated	group or	a parent-sub	sidiary contr	olled g	roup?	► ∐ Yes	∐ No	
			e or Business		ation. (See instructions for Block I. (A) Income (E			(B) Expe	nege	(C) Net		
			or business	' Income	1	(A) IIICOIII		D) Expe	11303	(C) Net		
1a					1.							
b				c Balance ▶	1c							
2	-											
3	•				3						-	
4a				0)	4a						-	
b	Net gain (loss) (F	orm 4797	, Part II, line 20)	(attach Form 4797)	4b							
С	•				4c							
5				statement)								
6												
7	Unrelated debt-	-financed	income (Schedu	ule E)	7							
8	Interest, annuit	ties, roya	Ities, and rents	s from controlled								
	organizations (S	Schedule	F)		8							
9	Investment inc	ome of	a section 501(c)(7), (9), or (17)								
	organization (So	chedule G	5)		9							
10				lule I)								
11					11							
12				nedule)	12							
13												
Pa				ere (See instruction								
	(Except	tor contr	ibutions, aeauc	tions must be dir	ectly co	nnected wi	tn the unre	lated	business	income.)		
14	Compensation	of officers	s, directors, and	trustees (Schedule	e K) .							
15	Salaries and wa	ages .							. 15			
16	Repairs and ma	aintenance	e						. 16			
17	Bad debts								. 17			
18	Interest (attach	schedule)						. 18			
19	Taxes and licen	ises							. 19			
20	Charitable cont	ributions	(see instructions	for limitation rules	s) . .				. 20			
21	Depreciation (at	ttach Forr	m 4562)			21						
22	Less depreciati	on claime	d on Schedule	A and elsewhere o	n return	. 22a			22b			
23	Depletion								. 23			
24	Contributions to	o deferred	l compensation	plans					. 24			
25	Employee bene	fit progra	ms	·					. 25			
26	Excess exempt	expense	s (Schedule I)						. 26		\bot	
27	Excess readers	hip costs	(Schedule J)						. 27		\bot	
28	Other deduction	ns (attach	schedule) .						. 28		\bot	
29	TOTAL DEDUC	TIONS (ad	dd lines 14 throu	ugh 28)					29		\perp	
30				net operating loss of								
31												
32				re specific deducti								
33												
34	Unrelated busin	ness taxab	ole income (subt	ract line 33 from lir	ne 32). If	line 33 is gr	eater than I	ine 32	,			

Par	t III	Tax Computation										
35	Organ	izations Taxable as Corpo	orations (see instruc	ctions f	or tax con	nputation)						
	Controlled group members (sections 1561 and 1563)—check here □ and:											
а	a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):											
_	(1) \$ (2) \$ (3) \$											
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)											
		35c										
36	Trusts on line	36										
37		37										
		tax (see instructions)										
		tax credit (corporations attach	Form 1118: trusts at	tach Fo	rm 1116)	38a						
	-	credits. (see instructions).										
		al business credit—Check i				'						
Ū		m 3800 or				38c						
d		for prior year minimum tax										
39		add lines 38a through 38d)						39				
40		ct line 39 from the total of						40				
41	Recapt	ture taxes. Check if from:	☐ Form 4255 ☐] Form	8611 .			41				
42a	Alterna	ative minimum tax \$	b	Envir	onmental t	ax \$		42c		\longrightarrow		
43	Total t	ax (add lines 40, 41, 42c)						43				
44	•	ents: a 1993 overpayment										
		stimated tax payments .						_				
С		posited with Form 7004 or				1 1						
d												
		credits and payments (see	•					45				
45		ayments (add lines 44a thr	-					45				
46		ted tax penalty (see the ins						46 47				
47 40		le—If line 45 is less than th						48		\rightarrow		
48 49		ayment—If line 45 is larger the amount of line 48 you want				amount over	Refunded >	49				
Par		Statements Regarding				nformation			age 11.)			
1		time during the 1994 calend								Yes	No	
•		financial account in a foreign										
		" the organization may have	•									
2		ne organization the grantor										
		er or not the organization ha										
_		" the organization may hav										
3		he amount of tax-exempt in					> \$					
		E A—COST OF GOODS	•	ctions	on page 1	1.)						
		nventory valuation (specify)										
1		ory at beginning of year	1		6 Invento	ory at end o	f year	6				
2		ses	2			Cost of goods sold. Subtract line 6						
3	Cost of labor											
4a		onal section 263A costs		 ection 263A (wi		a a t t a	Yes	No				
h		schedule)	4a 4b				ection 263A (wi I or acquired for			163	INO	
5		—Add lines 1 through 4b	5				19 acquired for					
		re in care of ►	3			one number		· ·				
		Under penalties of perjury, I declare belief, it is true, correct, and complete	that I have examined this	return, in				nd to the	pest of my k	nowled	lge and	
Plea		belief, it is true, correct, and comple	ete. Declaration of preparer	(other th	an taxpayer) is	based on all inf	formation of which pre	oarer has	any knowled	lge.		
Sigr					ì							
Her	е	Signature of officer or fiduciar	у	Date		Title						
Paid	ı	Preparer's	Date		Check if self-	Prepar	er's social se	ecurity r	number			
	Proparer's employed ▶ □											
036	Jilly	if self-employed)					7ID codo N					

SCHEDULE C—RENT (See in		ME (FROM tions on pag			RTY AND PERSONAL I	PRO	PERTY LEAS	ED WI	TH REAL PROP	PERTY)	
1 Description of property											
(1)											
(-)											
(4)		2 Rent rec	eived i	or accrued							
(a) From personal property for personal property is more than	nore tha	ercentage of rei in 10% but not	l p	ercentage of r	al and personal property (if the ent for personal property exce rent is based on profit or inco	eeds			connected with the ind d 2(b) (attach schedu		
(1)											
(2)											
(3)											
(4)											
Total			То	tal							
Total Income (Add totals here and on line 6, colum	of col	umns 2(a) and	d 2(b)	. Enter			Total dedu here and on (B), Part I, p	line 6,	column		
					NCOME (See instruction	ns o		age 1.			
SCHEDOLL L—GIVI	\LLA	ILD DEBI	-1 IIV.	AINCED II	COME (See Instruction			ectly con	nected with or alloca	ble to	
1 Description	n of deb	ot-financed prop	erty		2 Gross income from or		de Straight line depre (attach schedul	bt-finance	(b) Other deductions (attach schedule)		
(1)							(======================================	-,	(2112011 2011	,	
(-)											
(2)											
(4)											
4 Amount of average		5 Average a	diuste	nd hasis of	6						
acquisition debt on or or allocable to debt-financed debt-finance			ocable to nced property schedule)		Column 4 divided by column 5	by (co		Gross income reportable (column 2 × column 6)		8 Allocable deductions (column 6 × total of columns 3(a) and 3(b))	
(1)	1)			%							
(2)					%						
(3)					%						
(4)					%						
Totals						colu	er here and on mn (A), Part I,	page 1.	Enter here and or column (B), Part		
					CC AND DENTE ED					10	
		ot, ANNO LL actions on pa			ES, AND RENTS FR	OIVI	CONTROL	LED O	RGANIZATION	N 2	
(366	IIISIIL	ictions on pa	age i	3.)			4 F				
			2 G	ross income	3 Deductions of controlling	, -	4 Exe	Exempt controlled organizations			
1 Name and address of cor	ntrolled	organization(s)	fror	n controlled ganization(s)	organization directly connected with column 2 income (attach schedule)		(a) Unrelated business taxable income	(b) Taxable income compute as though not exempt unde sec. 501(a), or the amount i col. (a), whichever is larger		(c) column (a) divided by column (b)	
(1)						\dashv				9	
(2)						+				9	
(3)										9	
										9	
(4)	nt contr	ollad arganizati								7	
(a) Excess taxable income (b) Taxable income, amount in column (a whichever is larger			(c) Column (a) divided by		6 Gross income reportable (column 2 × column 4(c) o column 5(c))				Allowable deductions mn 3 × column 4(c) or column 5(c))		
(1)		<u> </u>		%							
(2)				%							
(3)				%							
(4)				%							
5.7	1				Eptor bors and	line C	,	Enta-	horo and an line (
Totalo					Enter here and on column (A), Part I,				here and on line 8 nn (B), Part I, page		

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·	ons on page 13.)			Deductions	4 Set-aside	.s	5 Total deductions		
1 Description of income	2 Amount of income		directly connected (attach schedule)		(attach sched		and set-asides (col. 3 plus col. 4)		
(1)									
(2)									
(3)									
(4)									
	Enter here and on column (A), Part I,							re and on line 9, (B), Part I, page 1.	
Totals									
SCHEDULE I—EXPLOITED (See instructio	ns on page 14.)	VITY IN	ICOME	, OTHER THA	N ADVERTISI	NG IN	COME		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	dire connec produ unre	penses ectly sted with ction of elated s income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	is not uprolated attri		penses utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)									
(2)									
(3)									
(4)									
Column totals	Enter here and on line 10, col. (A), Part I, page 1.	line 10,	re and on , col. (B), page 1.					Enter here and on line 26, Part II, page 1.	
SCHEDULE J—ADVERTISIN		e instru	ctions o	n page 14.)					
Part I Income From Pe	riodicals Repor	ted on	a Cons	solidated Basi	S				
1 Name of periodical	2 Gross advertising income		3 Direct ertising costs 4 Advertising gain or (loss) (2 minus col. 3 a gain, compicols. 5 through				adership osts	7 Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1)									
(2)									
(3)									
(4) Column totals (carry to Part I line (5))									
Part II Income From Pe		ted on	a Sepa	⊥ arate Basis (Fo	r each period	ical list	ted in Pa	⊥ art II. be sure	
to fill in columns 2					or odori poriod	ioui iio		art ii, 20 3 a ro	
(1)									
(2)									
(3)									
(4)									
(5) Totals from Part I									
Column totals, Part II	Enter here and on line 11, col. (A), Part I, page 1.	line 11,	ere and on , col. (B), page 1.					Enter here and on line 27, Part II, page 1.	
SCHEDULE K—COMPENSA		CERS.	DIREC	TORS, AND T	RUSTEES (See	e instru	ctions or	n page 14.)	
1 Name				2 Title	3 Percent of time devoted business	4.0	Compensation attributable to unrelated business		
						%			
						%			
					-	%			
					C	%			
Total—Enter here and on line 14 Pa	art II. pago 1					.			