

September 1, 2004

The Golden Rule Foundation, Inc.
225 South Swoope Avenue No. 107
Maitland, FL 32751
Attention: Henry Vales

Dear Henry:

Enclosed are the original and one copy of the 2003 Exempt Organization return, as follows...

2003 FORM 990

Also enclosed is Form 8734, Support Schedule for Advance Ruling Period.

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

We have prepared the returns from information you furnished us without verification. Upon examination of the returns by tax authorities, request may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

Please review the returns for completeness and accuracy.

We recommend that you use certified mail with post marked receipt for proof of timely filing.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

Very truly yours,

Jennifer Dickson

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2004

Prepared for	The Golden Rule Foundation, Inc. 225 South Swoope Avenue No. 107 Maitland, FL 32751
Prepared by	Tedder, James, Worden & Associates, P.A. 11 S. Bumby Avenue, Suite 200 Orlando, FL 32803
Amount due or refund	Not applicable
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Internal Revenue Service Center Ogden, UT 84201-0027
Return must be mailed on or before	November 15, 2004
Special Instructions	The return should be signed and dated.

Return of Organization Exempt From Income Tax

2003

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

Open to Public Inspection

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

A For the 2003 calendar year, or tax year beginning **JUL 1, 2003** and ending **JUN 30, 2004**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE GOLDEN RULE FOUNDATION, INC.	D Employer identification number 59-3611339
	Please use RS label or print or type 500 Specific instructions	E Telephone number 407-647-4047
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 225 SOUTH SWOOPE AVENUE 107	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)
	City or town, state or country, and ZIP + 4 MAITLAND, FL 32751	H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) If "Yes," enter number of affiliates: _____ H(c) Are all affiliates included? N/A <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list.) H(d) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No I Group Exemption Number: _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: **WWW.DOUNTOOTHERS.NET**

J Organization type: 501(c)(3) () 4947(a)(1) or () 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **242,136.**

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	180,826.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ 180,826. noncash \$ _____)	1d	180,826.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	51.	
	5	Dividends and interest from securities	5		
	6a	Gross rents	6a		
	6b	Less: rental expenses	6b		
	6c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		
7	Other investment income (describe _____)	7			
Revenue	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	b	Less: cost or other basis and sales expenses	8a	8b	
	c	Gain or (loss) (attach schedule)	8c		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		
Revenue	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
	a	Gross revenue (not including \$ 60,632. of contributions reported on line 1a)	9a	61,259.	
	b	Less: direct expenses other than fundraising expenses	9b	36,034.	
9c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	SEE STATEMENT 1	25,225.	
Revenue	10a	Gross sales of inventory, less returns and allowances	10a		
	b	Less: cost of goods sold	10b		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8c, 9c, 10c, and 11)	12	206,102.		
Expenses	13	Program services (from line 44, column (B))	13	142,421.	
	14	Management and general (from line 44, column (C))	14	28,439.	
	15	Fundraising (from line 44, column (D))	15	5,871.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses (add lines 13 and 14, column (A))	17	176,731.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	29,371.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	14,781.	
	20	Other changes in net assets or fund balances (attach explanation)	20	0.	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	44,152.	

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

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 \$ <u>43,028</u> , noncash \$	22 43,028.	43,028.	STATEMENT 4	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25 79,558.	72,455.	1,421.	5,682.
26 Other salaries and wages	26			
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31 6,250.		6,250.	
32 Legal fees	32			
33 Supplies	33 11,421.	9,944.	1,477.	
34 Telephone	34 3,018.		3,018.	
35 Postage and shipping	35 2,846.	1,371.	1,475.	
36 Occupancy	36 5,850.		5,850.	
37 Equipment rental and maintenance	37			
38 Printing and publications	38			
39 Travel	39 2,310.	2,270.	40.	
40 Conferences, conventions, and meetings	40 467.	467.		
41 Interest	41			
42 Depreciation, depletion, etc. (attach schedule)	42 2,771.		2,771.	
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e SEE STATEMENT 2	43e 19,212.	12,886.	6,137.	189.
44 Total functional expenses (add lines 22 through 43; organizations completing column (B): DO carry these totals to lines 15-18)	44 176,731.	142,421.	28,439.	5,871.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? **SEE STATEMENT 3**

All organizations must describe their exempt purpose accomplishments in a clear and concise manner. State the number of clients served, publications issued, etc. Disclose accomplishments that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others.)

a PROVIDING HANDS-ON SERVICE-LEARNING PROGRAMS TO CHILDREN IN GRADES K THROUGH 5 IN CENTRAL FLORIDA ELEMENTARY SCHOOLS.	(Grants and allocations \$	43,028.	142,421.
b	(Grants and allocations \$		
c	(Grants and allocations \$		
d	(Grants and allocations \$		
e Other program services (attach schedule)	(Grants and allocations \$		
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		142,421.	

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing		45
	46 Savings and temporary cash investments	7,919.	46 32,561.
	47 a Accounts receivable	47a	47c
	b Less: allowance for doubtful accounts	47b	
	48 a Pledges receivable	48a	48c
	b Less: allowance for doubtful accounts	48b	
	49 Grants receivable		49 7,500.
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a	51c
	b Less: allowance for doubtful accounts	51b	
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	1,585.	53 585.
	54 Investments - securities	Cost FMV	54
	55 a Investments - land, buildings, and equipment: basis	55a	55c
	b Less: accumulated depreciation	55b	
56 Investments - other		56	
57 a Land, buildings, and equipment: basis	57a 8,532.	57c	
b Less: accumulated depreciation STMT 5	57b 6,026.		
58 Other assets (describe ► SECURITY DEPOSIT)		58 1,000.	
59 Total assets (add lines 45 through 58) (must equal line 74)	14,781.	59 44,152.	
Liabilities	60 Accounts payable and accrued expenses		60
	61 Grants payable		61
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe ►)		65
66 Total liabilities (add lines 60 through 65)	0.	66 0.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	14,781.	67 36,652.
	68 Temporarily restricted		68 7,500.
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid in or capital surplus, or land, building, and equipment: fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	14,781.	73 44,152.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	14,781.	74 44,152.	

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.

Part VI Other Information

		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? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return or Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
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	X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions	81a	0.
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	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	20,410.
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations: a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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.	85b	N/A
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A); dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax or the amount on line 85f?	85g	N/A
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 allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	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
b	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, 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	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> 0.; section 4912 <input type="checkbox"/> 0.; section 4955 <input type="checkbox"/> 0.		
b	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	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.
d	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	90a	N/A
b	Number of employees employed in the pay period that includes March 12, 2003	90b	2
91	The books are in care of HENRY VALES Telephone no. 407-647-4047		
	located at 225 SWOOPE AVENUE, STE. 107, MAITLAND, FL ZIP +4 32751		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

	Unrelated business income		Excluded by section 513, 515, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	51.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			01	25,225.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		25,276.	0.
105 Total (add line 104, columns (B), (D), and (E))					25,276.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A				

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here: I declare under penalty of perjury that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief its true and correct. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: _____ Date: _____ Type or print name and title: _____

Paid Preparer's Use Only: Preparer's signature: _____ Date: _____ Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed) address and city, state, and ZIP code: **TEDDER, JAMES, WORDEN & ASSOCIATES, P.A.**
11 S. BUMBAY AVENUE, SUITE 200
ORLANDO, FL 32803

Phone no.: **407-898-2727**

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No. 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2003

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

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

Name of the organization

THE GOLDEN RULE FOUNDATION, INC.

Employer identification number

59 3611339

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(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 employer benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
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 lobbying activities: \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line j of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	X	
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) SEE STATEMENT 9	X	
b Do you have a section 403(b) annuity plan for your employees?		X
4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The 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.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, 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 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 number from above
- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	310,301.	304,122.	184,753.	33,890.	833,066.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(3)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	82.	3,749.	2,181.	503.	6,515.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge				6,300.	6,300.
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	310,383.	307,871.	186,934.	40,693.	845,881.
24 Line 23 minus line 17	310,383.	307,871.	186,934.	40,693.	845,881.
25 Enter 1% of line 23	3,104.	3,079.	1,869.	407.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ 26a 16,918.
 b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶ 26b 241,444.
 c Total support for section 505(a)(1) test: Enter line 24, column (e) ▶ 26c 845,881.
 d Add: Amounts from column (e) for lines: 18 6,515. 19 ▶ 26d 247,959.
 22 241,444. ▶ 26e 597,922.
 e Public support (line 26c minus line 26d total) ▶ 26f 70.6863%
 f Public support percentage (line 26e (numerator) divided by line 26c (denominator))

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: **N/A**
 (2002) (2001) (2000) (1999)
 b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 3 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: **N/A**
 (2002) (2001) (2000) (1999)
 c Add: Amounts from column (e) for lines: 15 16 ▶ 27c N/A
 17 20 21 ▶ 27d N/A
 d Add: Line 27a total and line 27b total ▶ 27e N/A
 e Public support (line 27c total minus line 27d total)
 f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f N/A
 g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ 27g N/A %
 h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ 27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, 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

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

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, by laws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32	Does the organization maintain the following:		
a	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?		
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? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? 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, '75-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

(a) Affiliated group totals (b) To be completed for All electing organizations

N/A

36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -	41	
	If the amount on line 40 is -		The lobbying nontaxable amount is -
	Not over \$500,000		20% of the amount on line 40
	Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000
	Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000
	Over \$1,500,000 but not over \$17,000,000		\$275,000 plus 5% of the excess over \$1,500,000
	Over \$17,000,000		\$1,000,000
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	
45	Lobbying nontaxable amount				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 12 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion or a legislative matter or referendum, through the use of:

- a. Volunteers
- b. Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c. Media advertisements
- d. Mailings to members, legislators, or the public
- e. Publications, or published or broadcast statements
- f. Grants to other organizations for lobbying purposes
- g. Direct contact with legislators, their staffs, government officials, or a legislative body
- h. Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i. Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
		0.

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

Schedule B
(Form 990, 990-EZ, or
990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2003

Name of organization

THE GOLDEN RULE FOUNDATION, INC.

Employer identification number

59-3611339

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the **General Rule** and a **Special Rule**-see instructions.)

General Rule-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$

Caution: Organizations that are not covered by the **General Rule** and/or the **Special Rules** do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2003)

Name of organization THE GOLDEN RULE FOUNDATION, INC.	Employer identification number 59-3611339
---	---

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DARDEN RESTAURANTS FOUNDATION P.O. BOX 593330 ORLANDO, FL 32859	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	TERRY HUNT ONE MEDLINE PLACE MUNDELEIN, IL 60060	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	MIKE & JAN MILLER 2021 DYAN WAY MAITLAND, FL 32751	\$ 11,854.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	RICHARD & SHARON SIMMONS 6206 DARTMOOR CT. ORLANDO, FL 32819	\$ 6,633.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	TOM & ALICE GAWRONSKI 2161 SHARON RD. WINTER PARK, FL 32789	\$ 16,314.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	VERITAS SOFTWARE FOUNDATION 350 ELLIS ST., P.O. BOX 7011 MOUNTAIN VIEW, CA 94043	\$ 15,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE GOLDEN RULE FOUNDATION, INC.

59-3611339

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	RAY COUDRIET BUILDER, INC. 7635 ASHLEY PARK CT., STE. 505 ORLANDO, FL 32835	\$ 7,416.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Asset Number	Description of property				Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	Date placed in service	Method/IRC sec.	Life or rate	Line No.				
MANAGEMENT AND GENERAL								
1	OFFICE FURNITURE AND EQUIPMENT							
	122999SL		5.00	16	544.		436.	108.
2	COMPUTER							
	102201SL		3.00	16	954.		530.	319.
3	OFFICE FURNITURE AND EQUIPMENT							
	120202SL		3.00	16	250.		28.	83.
4	GIFTMAKER SOFTWARE							
	070102SL		3.00	16	6,784.		2,261.	2,261.
* 990 PAGE 2 TOTAL MANAGEMENT AND GENERAL					8,532.	0.	3,255.	2,771.
* GRAND TOTAL 990 PAGE 2 DEPR					8,532.	0.	3,255.	2,771.

FORM 990	SPECIAL EVENTS AND ACTIVITIES				STATEMENT	1
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME	
GOLDEN EVENING AT THE ESTATE GALA	99,152.	52,909.	46,243.	30,103.	16,140.	
CHARITY GOLF TOURNAMENT	22,739.	7,723.	15,016.	5,931.	9,085.	
TOTAL	121,891.	60,632.	61,259.	36,034.	25,225.	

FORM 990	OTHER EXPENSES			STATEMENT	2
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
CONTRACT LABOR	1,500.	1,500.			
MISCELLANEOUS	8,698.	8,261.	248.	189.	
EDUCATION	3,125.	3,125.			
BANK CHARGES	2,979.		2,979.		
DUES & SUBSCRIPTIONS	1,059.		1,059.		
INSURANCE	1,851.		1,851.		
TOTAL TO FM 990, LN 43	19,212.	12,886.	6,137.	189.	

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE	STATEMENT	3
PART III			

EXPLANATION

TO PROVIDE EDUCATIONAL AND SOCIAL PROGRAMS, AS WELL AS TO RAISE MONEY TO BENEFIT CHILDREN IN VARIOUS COMMUNITIES AND CITIES. DURING THE PAST YEAR, THE GOLDEN RULE FOUNDATION EXPANDED ITS HANDS-ON, COMMUNITY SERVICE PROGRAM TO THREE ADDITIONAL COUNTIES BESIDES ORANGE COUNTY. THE GOLDEN RULE FOUNDATION'S SERVICE-LEARNING PROGRAM RAN IN 42 ELEMENTARY SCHOOLS IN LAKE, ORANGE, OSCEOLA, AND SEMINOLE COUNTIES. THE PROGRAM REACHED OVER 3,000 CHILDREN AND HELPED THEM TO LEARN AND INTERNALIZE THE ROLE THEY PLAY IN THE COMMUNITY AND THE POWERFUL CHOICE THEY HAVE TO HELP OTHERS. THE GOLDEN RULE FUNDED AND FACILITATED 92 PROJECTS, WHICH HELPED A MYRIAD OF NON-PROFIT AGENCIES IN CENTRAL FLORIDA. THESE CHILDREN-RUN SERVICE PROJECTS GENERATED OVER 30,000 SERVICE HOURS FOR THE COMMUNITY. THE TYPES OF PROJECTS FUNDED INCLUDED ASSISTING THE ELDERLY, HELPING THE NEEDY, HELPING OTHER CHILDREN, ASSISTING THE SICK, BEAUTIFICATION/ENVIRONMENT, AND ANIMAL WELFARE. THE GOLDEN RULE WAS AWARDED THE DAILY POINT OF LIGHT AWARD, WHICH HONORS INDIVIDUALS AND VOLUNTEER GROUPS THAT HAVE A COMMITMENT TO CONNECT AMERICANS THROUGH SERVICE TO HELP MEET CRITICAL NEEDS IN THEIR COMMUNITIES.

FORM 990

CASH GRANTS AND ALLOCATIONS

STATEMENT 4

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
COMMUNITY SERVICE PROJECTS	ASTATULA ELEMENTARY	13925 FLORIDA AVE., ASTATULA, FL 34705	N/A	500.
COMMUNITY SERVICE PROJECTS	AUDUBON PARK ELEMENTARY	1500 FALCON DR., ORLANDO, FL 32803	N/A	500.
COMMUNITY SERVICE PROJECTS	BROOKSHIRE ELEMENTARY	400 GREENE DR., WINTER PARK, FL 32792	N/A	1,500.
COMMUNITY SERVICE PROJECTS	CENTRAL AVENUE ELEMENTARY	500 W. COLUMBIA AVE., KISSIMMEE, FL 34741	N/A	656.
COMMUNITY SERVICE PROJECTS	CHEROKEE ELEMENTARY	550 S. EOLA DR., ORLANDO, FL 32801	N/A	746.
COMMUNITY SERVICE PROJECTS	CHICKASAW ELEMENTARY	6900 AUTUMNVALE DR., ORLANDO, FL 32822	N/A	500.
COMMUNITY SERVICE PROJECTS	CITRUS ELEMENTARY	87 N. CLARKE RD., OCOEE, FL 34761	N/A	500.
COMMUNITY SERVICE PROJECTS	DABNEY ELEMENTARY	910 E. DIXIE AVE., LEESBURG, FL 34748	N/A	2,000.
COMMUNITY SERVICE PROJECTS	DOVER SHORES ELEMENTARY	1200 GASTON FOSTER RD., ORLANDO, FL 32812	N/A	500.
COMMUNITY SERVICE PROJECTS	HAMILTON ELEMENTARY	1501 E. 8TH ST., SANFORD, FL 32771	N/A	2,227.
COMMUNITY SERVICE PROJECTS	HUNGERFORD ELEMENTARY	230 COLLEGE ST., EATONVILLE, FL 32751	N/A	1,025.
COMMUNITY SERVICE PROJECTS	VILLAGES ELEMENTARY	695 ROLLING ACRES RD., LADY LAKE, FL 32159	N/A	500.

COMMUNITY SERVICE PROJECTS	LANCASTER ELEMENTARY	6700 SHERYL ANN DR., ORLANDO, FL 32809	N/A	1,098.
COMMUNITY SERVICE PROJECTS	LOST LAKE ELEMENTARY	1901 JOHNS LAKE RD., CLERMONT, FL 34711	N/A	2,000.
COMMUNITY SERVICE PROJECTS	LOVELL ELEMENTARY	815 ROGER WILLIAMS RD., APOPKA, FL 32703	N/A	500.
COMMUNITY SERVICE PROJECTS	MCCOY ELEMENTARY	5225 S. SEMORAN BLVD., ORLANDO, FL 32822	N/A	734.
COMMUNITY SERVICE PROJECTS	MICHIGAN AVENUE ELEMENTARY	2015 S. MICHIGAN AVE., ST. CLOUD, FL 34769	N/A	500.
COMMUNITY SERVICE PROJECTS	MOLLIE RAY ELEMENTARY	2000 BEECHER ST., ORLANDO, FL 32808	N/A	742.
COMMUNITY SERVICE PROJECTS	ORANGE CENTER ELEMENTARY	621 S. TEXAS AVE., ORLANDO, FL 32805	N/A	2,237.
COMMUNITY SERVICE PROJECTS	PARTIN SETTLEMENT ELEMENTARY	2434 REMINGTON BLVD., KISSIMEE, FL 34744	N/A	500.
COMMUNITY SERVICE PROJECTS	PINAR ELEMENTARY	3701 ANTHONY LANE, ORLANDO, FL 32822	N/A	500.
COMMUNITY SERVICE PROJECTS	PINE HILLS ELEMENTARY	1006 FERNDLELL RD., ORLANDO, FL 32808	N/A	2,138.
COMMUNITY SERVICE PROJECTS	REEDY CREEK ELEMENTARY	5100 EAGLES TRAIL, KISSIMEE, FL 34758	N/A	1,500.
COMMUNITY SERVICE PROJECTS	ROLLING HILLS ELEMENTARY	4903 DONOVAN ST., ORLANDO, FL 32808	N/A	500.
COMMUNITY SERVICE PROJECTS	ROSEMONT ELEMENTARY	4650 POINT LOOKOUT RD., ORLANDO, FL 32808	N/A	4,635.
COMMUNITY SERVICE PROJECTS	SEMINOLE SPRINGS ELEMENTARY	26200 W. HUFF RD., EUSTIS, FL 32726	N/A	500.

COMMUNITY SERVICE PROJECTS	SUNRISE ELEMENTARY	101 LONE PALM RD., ORLANDO, FL 32828	N/A	500.
COMMUNITY SERVICE PROJECTS	TAVARES ELEMENTARY	720 E. CLIFFORD ST., TAVARES, FL 32778	N/A	1,000.
COMMUNITY SERVICE PROJECTS	TILDENVILLE ELEMENTARY	1221 BRICK RD., WINTER GARDEN, FL 34787	N/A	1,978.
COMMUNITY SERVICE PROJECTS	TREADWAY ELEMENTARY	10619 TREADWAY SCHOOL RD., LEESBURG, FL 34788	N/A	500.
COMMUNITY SERVICE PROJECTS	VENTURA ELEMENTARY	4400 WOODGATE BLVD., ORLANDO, FL 32822	N/A	641.
COMMUNITY SERVICE PROJECTS	WATERFORD ELEMENTARY	12950 LAKE UNDERHILL RD., ORLANDO, FL 32828	N/A	500.
COMMUNITY SERVICE PROJECTS	WINEGARD ELEMENTARY	7055 WINEGARD RD., ORLANDO, FL 32809	N/A	1,500.
COMMUNITY SERVICE PROJECTS	ZELLWOOD ELEMENTARY	3551 WASHINGTON AVE., ZELLWOOD, FL 32798	N/A	750.
COMMUNITY SERVICE PROJECTS	RICHMOND HEIGHTS ELEMENTARY	2500 BRUTON BLVD., ORLANDO, FL 32811	N/A	500.
COMMUNITY SERVICE PROJECTS	PINELOCH ELEMENTARY	3101 WOODS AVE., ORLANDO, FL 32805	N/A	921.
SCHOLARSHIP	MICHAEL CHANDLER	1543 SKYLINE DRIVE, KISSIMMEE, FL 34744	N/A	500.
SCHOLARSHIP	CHRISTOPHER FAHMIE	958 FLORIDA PARKWAY, KISSIMMEE, FL	N/A	500.
SCHOLARSHIP	JONATHON FLORES	10467 GLASSBOROUGH DR., ORLANDO, FL 32825	N/A	500.
SCHOLARSHIP	JEREMIAH PEREZ	P.O. BOX 203, WINDERMERE, FL 34786	N/A	500.

SCHOLARSHIP	ROBERT PONSI	11115 FOUNTAIN LAKE BLVD., LEESBURG, FL 34788	N/A	500.
SCHOLARSHIP	COURTNEY SAMUEL	10332 ARBOR RIDGE TRAIL, ORLANDO, FL 32817	N/A	500.
SCHOLARSHIP	AIDYBERT SILVA-ORTIZ	409 N. MAGNOLIA AVE., ORLANDO, FL 32801	N/A	500.
SCHOLARSHIP	NATALIE SPALDING	701 N. HAWLEY ST., EUSTIS, FL 32726	N/A	500.
SCHOLARSHIP	CHOWDHURY TAHREEN	2613 MILTON AVENUE, KISSIMMEE, FL 34741	N/A	500.
SCHOLARSHIP	KATHERINE TRACY	3315 GREENS AVENUE, ORLANDO, FL 32804	N/A	500.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				43,028.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	5
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
OFFICE FURNITURE AND EQUIPMENT	544.	544.	0.
COMPUTER	954.	849.	105.
OFFICE FURNITURE AND EQUIPMENT	250.	111.	139.
GIFTMAKER SOFTWARE	6,784.	4,522.	2,262.
TOTAL TO FORM 990, PART IV, LN 57	8,532.	6,026.	2,506.

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	6
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DESCRIPTION	AMOUNT
SPECIAL EVENTS EXPENSES NETTED WITH REVENUE	36,034.
TOTAL TO FORM 990, PART IV-A	36,034.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	7
DESCRIPTION		AMOUNT	
SPECIAL EVENTS EXPENSES NETTED WITH REVENUE		36,034.	
TOTAL TO FORM 990, PART IV-B		36,034.	

FORM 990	PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT	8
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
BRAD HAMMAN 225 SOUTH SWOOPE, STE. 107 MAITLAND, FL 32751	DIRECTOR 1	0.	0.	0.
RACHEL HAMMAN 225 SOUTH SWOOPE, STE. 107 MAITLAND, FL 32751	EXECUTIVE DIRECTOR 40	47,353.	0.	0.
ROBERT HENDRY 20 NORTH ORANGE AVE., STE. 407 ORLANDO, FL 32801	DIRECTOR 1	0.	0.	0.
JAMES TYSON 5850 T.G. LEE BLVD. ORLANDO, FL 32822	DIRECTOR 1	0.	0.	0.
MICHAEL WRIGHT 112 ESSEX AVENUE, APT. 11B ALTAMONTE SPRINGS, FL 32701	SECRETARY 2	0.	0.	0.
ROBYN UEHLING 2823 PARKLAND CIRCLE ORLANDO, FL 32789	PRESIDENT 2	0.	0.	0.
SCOTT SUITS 450 SOUTH ORANGE AVE. ORLANDO, FL 32802	TREASURER 2	0.	0.	0.
KEN WHEELER 1155 LOUISIANA AVE., STE. 100 WINTER PARK, FL 32789	DIRECTOR 1	0.	0.	0.

RAY COUDRIET 7635 ASHLEY PARK COURT, STE. 505 ORLANDO, FL 32835	DIRECTOR 1	0.	0.	0.
SANGITA PATEL 200 SOUTH ORANGE AVE., STE. 2300 ORLANDO, FL 32802	SECRETARY 2	0.	0.	0.
MICHELLE BOWIE 1665 BRIDGEWATER LAKE MARY, FL 32746	DIRECTOR 1	0.	0.	0.
JOE CONTE 800 CONCOURSE PARKWAY SOUTH, STE. 200 MAITLAND, FL 32751	DIRECTOR 1	0.	0.	0.
KIMBROUGH JENNINGS 225 SOUTH SWOOPE, STE. 107 MAITLAND, FL 32751	PROGRAM MANAGER 40	32,205.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>79,558.</u>	<u>0.</u>	<u>0.</u>

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 9
PART III, LINE 3

GRANTS ARE GIVEN TO ELEMENTARY SCHOOL TEACHERS TO FUND SERVICE LEARNING PROJECTS SELECTED FOR THEIR RESPECTIVE CLASSROOMS. THE RECIPIENTS ARE CHOSEN ON A COMPETITIVE BASIS BY THE BOARD MEMBERS AND PROGRAM STAFF, AND ARE RATED ON COMPREHENSIVENESS, REPLICATION ISSUES AND SPECIFIC OBJECTIVES. EACH TEACHER WHO PARTICIPATES IN THE SERVICE-LEARNING PROGRAM IS AWARDED A SCHOLARSHIP TO UNIVERSITY OF CENTRAL FLORIDA'S SUMMER SYMPOSIUM ON CHARACTER EDUCATION AND SOCIAL RESPONSIBILITY. COLLEGE SCHOLARSHIPS ARE AWARDED TO GRADUATING HIGH SCHOOL SENIORS WHO SUBMIT AN ESSAY, HAVE A LETTER OF RECOMMENDATION, ACHIEVE ACADEMIC EXCELLENCE, HAVE PROPER ATTENDANCE AND SHOW FINANCIAL NEED BUT PRIMARILY ON COMMUNITY INVOLVEMENT IN VOLUNTEERISM. THE APPLICATIONS ARE REVIEWED BY A PANEL OF SIX JUDGES FROM THE BOARD OF DIRECTORS AND COMMUNITY LEADERS FROM THE TRI-COUNTY AREA.