Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	Α	For th	ne 2004 (alendar	year, or tax	year beginning	1 January	, 2004, a	nd ending 31 l	Decemb	er , 20 04			
	В	Check if	applicable	Please	C Name of or	-					oyer identification number			
		Address	change	use IRS label or			s Memorial Wilder			85	0472006			
		Name o	hange	print or type		,	of mail is not delivered	to street addr	ess) Room/suite	E Telep	hone number			
		nitial re	turn	See	P.O. Box 4	40712				(505	5) 856-2191			
	☐ F	inal re	turn	Specific Instruc-		n, state or country, a				F Account	ting method: Cash 🗹 Accrual			
		Amende	ed return	tions.	Albuquero	que, NM 87196	-0712		-	Other (specify)				
		Applicat	ion pending				d 4947(a)(1) nonexem		1		le to section 527 organizations			
							nedule A (Form 990 or	990-EZ).			rn for affiliates? Yes No			
	G \	Nebsit	e: ▶ htt	p://wwv	w.Wildernes	ssProject.org	· · · · · · · · · · · · · · · · · · ·		H(c) Are all a		DOI OI GIIIIIGGO P			
		Organi	zation tvo	e (check d	only one) ►	501(c) (3) ∢ (insert no) 🗌 4947(a)(1) or 🔲 527			st See instructions)			
			,	2			normally not more than		H(d) is this a	separate reti	ım filed by an			
							nization received a Form			ion covered	by a group ruling? Yes V No			
	11	n the n	nail, it shou	ıld file a re	eturn without fir	nancial data Some s	tates require a comple	te return.		xemption N				
							E 05	.0			the organization is not required			
		_				, and 10b to line 1					Form 990, 990-EZ, or 990-PF)			
	Pa	rt I						Fund Bala	ances (See p	age 18	of the instructions.)			
		1				s, and similar ar	nounts received:	اندا	£ .	20				
		а		oublic s				1a	3,4	239				
		b			support			1b		0				
띨		С			ontributions			1c	0 :	<u> </u>	5,239			
2002		d					5,239 nonca		<u> </u>	1d	3,239			
9		2					ent fees and contra		art VII, line 93)	3	0			
OLANNED FEB 16		3		•	ues and ass					. 4	1			
		4			_	mporary cash ir	ivestments .	• •		. 5	718			
1		5			interest froi	m securities		 6a	• •	. •				
:)		6a	Gross I					6b		<u>0</u>	1			
缸		b	Less: re		•	· · · · · · · · · · · · · · · · · · ·		00		6c	0			
Z		7) (subtract line 6 (describe ►	N/A) 7	0			
Z	E e					of assets other	(A) Securities		(B) Other					
	2 8	8a		ventory		or assets other) 8a		0				
Č	ก็	h		-		I sales expenses.		8b		0				
•		i			attach sche			8c		0				
		l .		, , ,	•	line 8c, columns	(A) and (B))			8d	0			
		9	•	-			If any amount is from	gaming, ch	eck here ▶ □	i l				
			•		(not includi		0 of	J						
					•	line 1a)		9a		0				
		ь			-	er than fundrais		9b		0				
		С	Net inc	ome or	(loss) from	Special avails	subtract line 9b fro	om line 9a)		9c	0			
		10a	Gross	sales of	2 Freedown	ess returns and	allowances .	10a		0	1			
		b	Less: d	pst of	oods sold	, 2005 ligh	tach schedule) (sub	10b		0	1			
		С	Gross p	or d fit dy (loss) from sa	s of inventory (a	tach schedule) (sub	ract line 10	o from line 10a)	10c	"			
		11	Other I	ev lectule	(From Part	VII, June (103)	\			. 11	0			
		12	Total r	everite)	(add lines 1	2, 3, 1, 5, 60	8d, 9c, 10c, and	11) .	•	. 12	5,958			
	G	13	Progra	m s e rvi	ces (KON)	e 44 column (E	3))			13	2,542			
	Expenses	14	Manag	emen t a	and general	(from line 44, c	olumn (C)) , .			. 14	0			
	Kpel	15				column (D))				. 15	0			
	û	16				ach schedule) s 16 and 44, col				. 16	0 2542			
		17		_					• • • •	. 17	2,542			
	Assets	18		-	-	-	ne 17 from line 12			. 18	3,416			
	Asi	19					of year (from line		ı (A)) .	19	25,899			
	Net	20 21					nces (attach expla (combine lines 18.			. 20	250			

Form 990 (2004) Part II Statement of 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 (See page 22 of the instructions) **Functional Expenses** Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising and general 6b, 8b, 9b, 10b, or 16 of Part I. Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _ Specific assistance to individuals (attach schedule) Benefits paid to or for members (attach schedule), Compensation of officers, directors, etc. Other salaries and wages Pension plan contributions Other employee benefits Payroll taxes . a Professional fundraising fees . Accounting fees Legal fees 2.044 2,044 Supplies Telephone Postage and shipping Occupancy Equipment rental and maintenance Printing and publications Travel Conferences, conventions, and meetings Depreciation, depletion, etc (attach schedule) 43a Other expenses not covered above (itemize): a PO box website/internet 43b annual state reporting fees 43c C bank fee 43d d 43e Total functional expenses (add lines 22 through 43). Organizations 2,542 2,542 completing columns (B)-(D), carry these totals to lines 13-15 Joint Costs. Check ► ☐ If you are following SOP 98-2. ✓ No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ► ☐ Yes N/A N/A; (ii) the amount allocated to Program services \$_ If "Yes." enter (i) the aggregate amount of these joint costs \$_ N/A N/A; and (iv) the amount allocated to Fundraising \$ (iii) the amount allocated to Management and general \$ Part III Statement of Program Service Accomplishments (See page 25 of the instructions.) What is the organization's primary exempt purpose?
wilderness education, stewardship, and conservation **Program Service** Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements 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) Fifth annual Make a Difference Day involved extensive trail building and restoration graffiti removal, fence removal, and trash cleanup. Hundreds of volunteer hours made this diverse community-based project a success. (Grants and allocations \$ Crew leaders and organization for National Trails Day in Albuquerque (Piedra Lisa Open Space) Worked with a team on trail restoration and erosion control and also on removing litter from canyon-bound areas and hillsides. (Grants and allocations c Exotic vegetation removal in the Sandia Mountain foothills. Removed numerous nonnative trees in riparian portions of Piedra Lisa Canyon. Treated all stumps with herbicide. Monitored area before and after treatment to assess general changes in vegetation community. (Grants and allocations d Website update, production of newsletter, and contact with the media resulted in film crew at Make a Difference Day and acknowledgment of efforts in City of Albuquerque Open Space Division newsletter. (Grants and allocations

(Grants and allocations

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

e Other program services (attach schedule)

2,542

47a Accounts receivable b Less: allowance for doubtful accounts 48a Pledges receivable b Less: allowance for doubtful accounts 48b 0 0 b Less: allowance for doubtful accounts 48b 0 0 48c 0 48c 0	1	Note:	Where required, attached schedules and amounts column should be for end-of-year amounts only	within	the description	(A) Beginning of year		(B) End of year
46 Savings and temporary cash investments 47a Accounts receivable b Less, allowance for doubtful accounts 48a Piedges receivable b Less allowance for doubtful accounts 48b 0 0 0 47c 586 48a Piedges receivable b Less allowance for doubtful accounts 48b 0 0 0 48c 67ants receivable 57a Less, allowance for doubtful accounts 51b 0 0 0 49 57a Less, allowance for doubtful accounts 57a Less, allowance		45	Cash—non-interest-bearing			0	45	C C
b Less: allowance for doubtful accounts 48a Pledges receivable b Less: allowance for doubtful accounts 48b 0 0 0 48c 0 0 48c 0 0 49 0 0 48c 0 0 48c 0 0 49 0 0 48c 0 0 48c 0 0 49 0 0 48c 0 0 48c 0 0 49 0 0 48c 0 0 0 49 0 0 48c 0 0 0 48c 0 0 48c 0 0 0 49 0 0 48c 0 0 0 0 50 0 48c 0 0 0 0 50 0 48c 0 0 0 0 50 0 48c 0 0 0 50 0 48c 0 0 0 0		46	<u> </u>			1,526	46	3,484
b Less: allowance for doubtful accounts 48a Pledges receivable b Less: allowance for doubtful accounts 48b 0 0 0 48c 0 0 48c 0 0 49 0 0 48c 0 0 48c 0 0 49 0 0 48c 0 0 48c 0 0 49 0 0 48c 0 0 48c 0 0 49 0 0 48c 0 0 0 49 0 0 48c 0 0 0 48c 0 0 48c 0 0 0 49 0 0 48c 0 0 0 0 50 0 48c 0 0 0 0 50 0 48c 0 0 0 0 50 0 48c 0 0 0 50 0 48c 0 0 0 0				1 1			1	
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48a Pledges receivable 48a 0 0 48b 0 0 48c 0 48b 0 0 48c 0 48b 0 0 48c 0 48c 0 48b 0 0 48c		b	Less. allowance for doubtful accounts	47b		0	47c	560
Description				1,70	. 1			
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Solidation So						·-	1.55	0
(attach schedule) 51a 0 50 0 50 0 50 0 50 0						0	49	0
15 15 15 15 15 15 15 15		50				n		o
September Sep			,			· · · · · · · · · · · · · · · · · · ·	30	
b Less: allowance for doubtful accounts 51b	S	51a		512	o			
53 Prepaid expenses and deferred charges 0 53 0 53 0 54 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 1 19,048 54 20,518 55 10 19,048 54 20,518 55 10 19,048 54 20,518 55 10 19,048 54 20,518 55 10 19,048 54 20,518 55 10 19,048 54 20,518 19,048 54 20,518 19,048 54 20,518 19,048 54 20,518 19,048 54 20,518 19,048 54 20,518 19,048 54 20,518 19,048 19,048 54 20,518 19,048 19,048 19,048 54 20,518 19,048 1	set	L		\vdash		0	510	o
53 Prepaid expenses and deferred charges 54 Investments—securities (attach schedule)	As			010				0
54 Investments—securities (attach schedule) □ □ □ □ □ □ □ □ □								0
55a Investments—land, buildings, and equipment: basis 55b 0 0 55c 0 0 0 55c 0 0 0 55c 0 0 0 0 55c 0 0 0 0 0 0 0 0 0							100	
b Less: accumulated depreciation (attach schedule) 56 Investments—other (attach schedule) 57a Land, buildings, and equipment: basis b Less: accumulated depreciation (attach schedule) 57b Other assets (describe ►) 0 56 57c		· ·			COSI P FIVIV	10,040	37	20,510
b Less: accumulated depreciation (attach schedule) 56 Investments—other (attach schedule) 57a Land, buildings, and equipment: basis b Less: accumulated depreciation (attach schedule) 57b 0 5,325 57c 5,725 58 Other assets (describe ▶ 0 0 588		boa		55a	o		,,,	
Schedule		h	• • • • • • • • • • • • • • • • • • • •	300			20S	
56 Investments—other (attach schedule) 57a Land, buildings, and equipment basis b Less: accumulated depreciation (attach schedule). 58 Other assets (describe ▶) 0 588		b		55b	0	0	``	0
57a Land, buildings, and equipment basis 57a 400 5,325 57c 5,725 57c 5,725 58 Other assets (describe ▶		56				0	_	0
b Less: accumulated depreciation (attach schedule). 57b 0 5,325 57c 5,725 5,			,	57a	400			
Schedule)								
58 Other assets (describe ▶) 0 58 0 59 30,285 59 Total assets (add lines 45 through 58) (must equal line 74) . 25,899 59 30,285 60 Accounts payable and accrued expenses . 0 60 722 61 Grants payable		_		57b	0	5,325	57c	5,725
60 Accounts payable and accrued expenses 0 60 720 61 Grants payable 0 61 0 62 0 62 0 62 0 62 0 62 0 62 0 62		58)	0	58	0
60 Accounts payable and accrued expenses 0 60 720 61 Grants payable 0 61 0 62 0 62 0 62 0 62 0 62 0 62 0 62								
61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees (attach schedule) 63 Loans from officers, directors, trustees, and key employees (attach schedule) 64 Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (describe ▶ 66 Total liabilities (add lines 60 through 65) 66 Total liabilities (add lines 60 through 65) 67 Unrestricted 68 Temporarily restricted 69 Permanently restricted 69 Permanently restricted 69 Permanently restricted 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 70 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) 61 Officer (attach schedule) 62 Officer (attach schedule) 63 Officer (attach schedule) 64 Officer (attach schedule) 65 Other liabilities (attach schedule) 66 Other liabilities (attach schedule) 67 Officer (attach schedule) 68 Officer (attach schedule) 69 Officer (attach schedule) 60 Officer (attach schedule) 60 Officer (attach schedule) 61 Officer (attach schedule) 62 Officer (attach schedule) 63 Officer (attach schedule) 64 Officer (attach schedule) 65 Other liabilities (attach schedule) 66 Officer (attach schedule) 67 Officer (attach schedule) 68 Officer (attach schedule) 69 Officer (attach schedule) 60 Officer (attach schedule) 60 Officer (attach schedule) 61 Officer (attach schedule) 62 Officer (attach schedule) 63 Officer (attach schedule) 64 Officer (attach schedule) 65 Other liabilities (attach schedule) 66 Officer (attach schedule) 67 Officer (attach schedule) 68 Officer (attach schedule) 69 Officer (attach schedule) 60 Officer (attach schedule) 61 Officer (attach schedule) 62 Officer (attach schedule) 63 Officer (attach schedule) 64 Officer (attach schedule) 65 Other liabilities (attach schedule) 66 Officer (attach schedule) 67 Officer (attach		59	Total assets (add lines 45 through 58) (must	equal	line 74)	25,899	59	30,285
62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees (attach schedule) 64a Tax-exempt bond liabilities (attach schedule) 65 Other liabilities (add lines 60 through 65) 66 Total liabilities (add lines 60 through 65) 67 Unrestricted 68 Temporarily restricted 69 Permanently restricted 69 Permanently restricted 60 Organizations that do not follow SFAS 117, check here ▶ and complete lines 70 through 72. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 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) 62 Deferred revenue 63 Loans from officers, trustees, and key employees (attach schedule) 64 0 63 65 Colombia (Colombia (Col		60	Accounts payable and accrued expenses			0		720
Second to the form officers, directors, trustees, and key employees (attach schedule) Schedule) 64a Tax-exempt bond liabilities (attach schedule) b Mortgages and other notes payable (attach schedule) 65 Other liabilities (add lines 60 through 65) Organizations that follow SFAS 117, check here ▶ □ and complete lines 67 through 69 and lines 73 and 74. 67 Unrestricted 68 Temporarily restricted Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 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) 9 Section 10 63 9 64a 9 64a 9 64a 9 64b 9 64b 9 64 9 64b 9 64 9 67 9 66 9 7 10 9 66 9 7 10 9 7 10 9 7		61	Grants payable					0
65 Other liabilities (describe ► ○) 0 65		62	Deferred revenue			0	62	0
65 Other liabilities (describe ► ○) 0 65	ijes	63		d key o	employees (attach	0		•
65 Other liabilities (describe ► ○) 0 65	Ē		,		I			
65 Other liabilities (describe ► ○) 0 65	Lia		•					
Organizations that follow SFAS 117, check here ▶ □ and complete lines 67 through 69 and lines 73 and 74. N/A 67 Universally restricted					· .			0
Organizations that follow SFAS 117, check here ▶ □ and complete lines 67 through 69 and lines 73 and 74. N/A 67 Unrestricted N/A 68 Temporarily restricted N/A 69 Permanently restricted N/A 69 Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 70 through 74. Capital stock, trust principal, or current funds To Capital stock, trust principal, or current funds Retained earnings, endowment, accumulated income, or other funds 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) Organizations that follow SFAS 117, check here ▶ ☑ and complete lines N/A 67 N/A 67 N/A 68 N/A 69 N/A 6		05	Other liabilities (describe			<u> </u>	05	<u></u>
Organizations that follow SFAS 117, check here ▶ □ and complete lines 67 through 69 and lines 73 and 74. N/A 67 Unrestricted N/A 68 Temporarily restricted N/A 69 Permanently restricted N/A 69 Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 70 through 74. Capital stock, trust principal, or current funds To Capital stock, trust principal, or current funds Retained earnings, endowment, accumulated income, or other funds 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) Organizations that follow SFAS 117, check here ▶ ☑ and complete lines N/A 67 N/A 67 N/A 68 N/A 69 N/A 6		66	Total liabilities (add lines 60 through 65)			0	66	720
67 through 69 and lines 73 and 74. 68 Temporarily restricted 69 Permanently restricted Corganizations that do not follow SFAS 117, check here ► ✓ and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 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) 8 N/A 68 NI/A 69			_		nd complete lunes		- 00	
67 Unrestricted 68 Temporarily restricted 69 Permanently restricted Corganizations that do not follow SFAS 117, check here ► ✓ and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 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) N/A 68 N/A 69 N/A 69 N/A 69 N/A 69 N/A 69 N/A 69 Organizations that do not follow SFAS 117, check here ► ✓ and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 70 through 72; column (A) must equal line 19; column (B) must equal line 21) 25,899 70 29,565		Orga		- Ц а	ind complete lines			
70 Capital stock, trust principal, or current funds	Ses	67	11			N/A	67	N/A
70 Capital stock, trust principal, or current funds	an			• •		N/A		N/A
70 Capital stock, trust principal, or current funds	Bai							N/A
70 Capital stock, trust principal, or current funds	Þ				^			
70 Capital stock, trust principal, or current funds	큔	- . 3 -					- 1	
71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72;	ō	70	· · · · · · · · · · · · · · · · · · ·	s.		25,899	70	29,565
column (A) must equal line 19; column (B) must equal line 21) . 25,899 73 29,565	şţ	71			uipment fund	0	71	0
column (A) must equal line 19; column (B) must equal line 21) . 25,899 73 29,565	SSE	72	· · · · · · · · · · · · · · · · · · ·	·	0	72	0	
column (A) must equal line 19; column (B) must equal line 21) . 25,899 73 29,565	Ť.	73	Total net assets or fund balances (add line	rough 69 or lines				
	Š		70 through 72;		-	***		
74 Total liabilities and net assets / fund balances (add lines 66 and 73) 25,899 74 30,285							73	29,565
		74	Total liabilities and net assets / fund balance	es (ad	d lines 66 and 73)	25,899	74	30,285

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.

Par	Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)		Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return									
а			and other support	a	N/A	а	Total exp				a	N/A
b	Amounts		n line a but not on			b		included	l on line	ts▶ a but not	0	
(1)	line 12, F Net unrea	orm 990: Ilized gains				(1)	on line 17, Donated	•				
	on investr	ments, ,	<u>\$</u>				and use of					
(2)	Donated and use of	services of facilities	\$			(2)	Prior year ac reported or	line 20),			
(3)		es of prior	\$			(3)	Form 990. Losses rep				Activity and my	
(4)	Other (sp			a street Line		`.	line 20, For	rm 990 .				
			\$			(4)	Other (spe	ecify):	_			
	Add amou	ınts on lines	s (1) through (4) >	b	N/A		A .1-1		. \$		L	N/A
С	Line a mi	nus line b		С	N/A	c	Add amour Line a min				b	N/A
d	Amounts	included or but not or	n line 12,			d	Amounts i	ncluded	on line	17,		
(1)		expenses				(1)	Investment	•				
	6b, Form 9	ed on line	\$				not include 6b, Form 99					
(2)	Other (sp	ecify):		. Prairie		(2)	Other (spe	ecify):				
			\$						\$			
			es (1) and (2)	d	N/A		Add amou	nts on I	ines (1)	and (2) >	d	N/A
е			ne 12, Form 990	e	N/A	е	Total expe				e	N/A
Par	t V Lis		ers, Directors, Tr	11.		mplo						
	u ie		e and address	· · · · · · · · · · · · · · · · · · ·			age hours per to position	(If not p	pensation aid, enter 0)	(D) Contribution employee benefit deferred compen	plans &	(E) Expense account and other allowances
		lley, Ph.D. y Ln. Ct. N	E, Albuqueque, N	IM 87122	Directo	r/Pres	. (20h/wk)		0	udiened campen	0	o o
Yih-	Ving Hsu,	ASLA	IE, Albuqueque, N		Vice-Pr	esider	nt (5h/wk)		0		0	O
Mary	H. Dudle	y, M.D.	, KS 67208		Secreta	ry (<1	h/wk)		0		0	O
Mary	D. Nicod	lemus			Board I	Membe	er (<1h/wk)		0		0	σ
Jam	es F. Satt	ler, City of	er, DE 19901 Albuquerque, Op	en Space l	Board I	Membe	er (<1h/wk)		0		0	0
			rque, NM 87103 Ibuquerque, Oper	Space Div			er (<1h/wk)		0		0	0
			rque, NM 87103		Board 1	vieilibe	= (< 111/WK)	<u> </u>			U	
	ke M. Laı a Villita T		uerque, NM 8711	2	Board I	Membe	er (<1h/wk)	ļ	0		0	C
										:		
75	organization	on and all rel	or, trustee, or key en lated organizations, o edule—see page 2	of which moi	re than \$1	0,000 v	mpensation vas provided	of more by the r	than \$100 elated org	0,000 from your anizations?	our .▶	☐ Yes ☑ No

Par	t VI Other Information (See page 28 of the instructions.)		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		✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	See Septimized	✓
	If "Yes," attach a conformed copy of the changes.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		ļ.,
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		√
80a	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	्र व्यक्तिकात्। स्टब्स्ट्रास्ट्रा	√
D	If "Yes," enter the name of the organization ► N/A		-	1,
Q1a	and check whether it is exempt or nonexempt. Enter direct and indirect political expenditures. See line 81 instructions			
	Did the organization file Form 1120-POL for this year?	81b	PUSES SERV	<i>√</i>
	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge		,	
O_Lu	or at substantially less than fair rental value?	82a	✓	
b	If "Yes," you may indicate the value of these items here. Do not include this amount	F 6.00	2-0	
	as revenue in Part I or as an expense in Part II. (See instructions in Part III.) [82b] 2,220			Fig.
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	√	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	√	L.
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	. TEGERAL	
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions			
	or gifts were not tax deductible?	84b 85a		
85 L	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85b		
D	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.			
С	Dues, assessments, and similar amounts from members			
	Section 162(e) lobbying and political expenditures			
е	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)		nels o	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
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	85h		
00	year?	0311		7.347
86 h	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12. Gross receipts, included on line 12, for public use of club facilities			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other			
_	sources against amounts due or received from them.)			
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	Mario 6	V
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under. N/A : section 4912	.		
	, 3601011 4012 - , 3601011 40000 - , 3601011 4000 - , 3601011 40000 - , 3601011 40000 - , 3601011 4000 - , 3601011 4000 - , 3601011 4000 - , 3601011 40000 - , 3		151537	2 75444
b	501(c)(3) and 501(c)(4) orgs. 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			1
	a statement explaining each transaction	89b		•
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under		L	
·	sections 4912, 4955, and 4958			0
	Enter: Amount of tax on line 89c, above, reimbursed by the organization			O
	List the states with which a copy of this return is filed ▶ New Mexico			
	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) [90b]		0	
91	The books are in care of ▶ Robert K. Dudley, Ph.D. Located at ▶ 865-1 Tramway Ln. Ct. NE, Albuquerque, NM ZIP + 4 ▶ 87	56-21	91	· • • • • •
	Located at ► 865-1 Tramway Ln. Ct. NE, Albuquerque, NM ZIP + 4 ► 87	22	·	·
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here.		. !	► L N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92			IN/A

Part	Analysis of income-Producing	activities (See pa	age 33 of the	instructions.)		
Note:	Enter gross amounts unless otherwise	Unrelated b	usiness income	Excluded by sect	ion 512, 513, or 514	(E) Related or
ındıca	ted.	(A)	(B)	(C)	(D)	exempt function
93	Program service revenue:	Business code	Amount	Exclusion code	Amount	income
а.		- 	 	+		0
Ь.			<u></u>			0
C.			 	· 		0
d.				+		0
е.		-	 	 		0
	Medicare/Medicaid payments		 	 		0
-	Fees and contracts from government agence					0
	Membership dues and assessments		ļ	 		0
	nterest on savings and temporary cash investmen	nts	 	 		710
-	Dividends and interest from securities			1/15+V		718
	Net rental income or (loss) from real estate:		in the same of	100 Mag		
	debt-financed property	1		+-+		0
	not debt-financed property	1	 	 		0
	Net rental income or (loss) from personal proper	7				0
	Other investment income			1	-	0
	Gain or (loss) from sales of assets other than invento	Jry	\	 		0
	Net income or (loss) from special events			 	-	0
	Gross profit or (loss) from sales of inventory			 		0
	Other revenue: a		 	 		0
b.				<u> </u>		0
. ٥		_		-		0
d.			 	1		0
е . 104 :	Subtotal (add columns (B), (D), and (E))			110		719
	Fotal (add line 104, columns (B), (D), and (E)))			<u> </u>	719
	ine 105 plus line 1d, Part I, should equal th		12, Part I.			
Part '				oses (See pa	ge 34 of the ins	structions.)
Line I						
▼	of the organization's exempt purposes (or				,	•
	N/A				_ <u>-</u>	
Part	X Information Regarding Taxable Sub	osidiaries and Dis	regarded Entiti	es (See page	34 of the instru	ctions.)
	(A) Name, address, and EIN of corporation,	(B) Percentage of	(C)		(D)	(E) End-of-year
	partnership, or disregarded entity	ownership interest	Nature of a	ctivities	Total income	assets
N/A		%				
		%			·- <u></u>	
		%				
		%				1
Part	X Information Regarding Transfers Ass	ociated with Perso	onal Benefit Cor	ntracts (See pa	age 34 of the ins	structions.)
(a)	Did the organization, during the year, receive any funds	, directly or indirectly, to	pay premiums on a	personal benefit	contract? .	☐ Yes ☑ No
	Did the organization, during the year, pay po			personal ber	efit contract?	☐ Yes ☑ No
Note	: If "Yes" to (b), file Form 8870 and Form			_		
	Under penalties of perjury, I declare that I have exa					
Pleas	and belief, it is true, correct, and complete Declar	ation of preparer (other	man onicer) is base	o on an mormatic	ar or which prepare	i ilas aliy knowledge
. 1003	1/mah				29 Janua	ny 2005
				D	ate	, –
		ecutive Di	rector			
			Date	Check if	Preparer's SSN o	r PTIN (See Gen Inst W

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—(See separate instructions.)

| 2004

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Employer identification number The Robert F. Nicodemus Memorial Wilderness Project 85 0472006 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.") (d) Contributions to (e) Expense (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation employee benefit plans & deferred compensation account and other than \$50,000 per week devoted to position allowances NONE Total number of other employees paid over \$50,000 N/A 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 N/A professional services

P	age 2
Yes	No
	V
	et ess

Pai	rt II	Statements About Activities (See page 2 of the instructions.)	Yes	No
1	atte or	iring the year, has the organization attempted to influence national, state, or local legislation, including any tempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities (Must equal amounts on line 38, it VI-A, or line i of Part VI-B.)		~
	org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of elobbying activities.		
2	sub wit	iring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any bstantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or the any taxable organization with which any such person is affiliated as an officer, director, trustee, majority iner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions)		
а	Sal	lle, exchange, or leasing of property?	C 42/3844	<i>✓</i>
b		nding of money or other extension of credit?		~
c		rnishing of goods, services, or facilities?		~
d		yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		~
е		ansfer of any part of its income or assets?		~
3a	Do	you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how u determine that recipients qualify to receive payments.)		•
b	•	you have a section 403(b) annuity plan for your employees?		~
		d you maintain any separate account for participating donors where donors have the right to provide advice		~
		the use or distribution of funds?		
<u>b</u>	Do	you provide credit counseling, debt management, credit repair, or debt negotiation services? 4b		<u> </u>
The 5	orga	Anization is not a private foundation because it is: (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).		
6	\vdash	A school. Section 170(b)(1)(A)(II). (Also complete Part V)		
7	\vdash	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).		
8 9		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's national section 170(b)(1)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)	ame	, 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 (Also complete the Support Schedule in Part IV-A)		
		An organization that normally receives a substantial part of its support from a governmental unit or from the general public 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)	c Se	ction
		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 331/3% of its support from contributions, membership fees, a receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	331/3	% of
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of 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	r	
			_	
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)	_	

Pa Note	rt IV-A Support Schedule (Complete only e: You may use the worksheet in the instructions	y if you checked for converting from	a box on line 10,	11, or 12.) Use the cash metho	cash method o	of accounting.
Cale	endar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	16,280	2.557	6.993	20	0 26,030
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)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	497	225	210		5 937
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		1			
22	Other income Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	16,777	2.782	7,203	20	5 26,967
24	Line 23 minus line 17	16,777	2,782	7,203	20	
25	Enter 1% of line 23	168	28	72		2 🔉 🗽 🛬
26	Organizations described on lines 10 or 11:				▶ 26	
b	Prepare a list for your records to show the name governmental unit or publicly supported organizamount shown in line 26a. Do not file this list wi	ne of and amount ation) whose tota	contributed by e	ach person (other	er than a eded the	
С	Total support for section 509(a)(1) test: Enter in	-			▶ 26	
d	Add Amounts from column (e) for lines. 18	937			▶ 26	d 14,257
е	Public support (line 26c minus line 26d total)				26	
f	Public support percentage (line 26e (numera				. ▶ 26	
27	Organizations described on line 12: a For person," prepare a list for your records to show Do not file this list with your return. Enter the (2003)	the name of, and e sum of such an	total amounts rec nounts for each ye	eived in each yea ear:	vere received fr ar from, each "d	rom a "disqualified isqualified person."
b	For any amount included in line 17 that was received show the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year (2003)	ved from each per year, that was mo 5 through 11, as w the larger amount	son (other than "di re than the larger (rell as individuals) described in (1)	squalified persons of (1) the amount Do not file this li or (2), enter the s	s"), prepare a lis on line 25 for th st with your retu um of these diff	t for your records to e year or (2) \$5,000. urn. After computing erences (the excess
С	Add Amounts from column (e) for lines: 15 17 20				▶ 27	c
d						
u	Public support (line 27c total minus line 27d to				270	
f	Total support for section 509(a)(2) test: Enter a			▶ 27f	4.1	
g	Public support percentage (line 27e (numera				▶ 27	
h	Investment income percentage (line 18, colu		•	,,	• • • • • • • • • • • • • • • • • • • •	
28	Unusual Grants: For an organization describe			·		
	prepare a list for your records to show, for ear description of the nature of the grant Do not if	ch year, the name	e of the contribut	or, the date and	amount of the	grant, and a brief

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
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?	30	Sarahr,	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain (If you need more space, attach a separate statement.)	13.7		
32	Does the organization maintain the following:			100 A
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c 32d		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	320		22.0
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	7.28		
33	Does the organization discriminate by race in any way with respect to:		, ij	a se
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		#	
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b	~ 8.~ ~ ~	- 44. - 3724
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05	nine.	. i	
	of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		L

Schedule	A (Form	990 or	990-F71	2004

Page 5

Pa	rt VI-A Lobbying Expenditures by E (To be completed ONLY by ar	lecting Public (n eligible organi:	Charities (See zation that filed	page 9 o	f the '68)	ınstructio	ns.)	-
Che	ck ▶ a ☐ if the organization belongs to an affili					nd "limited co	ntrol"	provisions apply
	Limits on Lobbyi (The term "expenditures" mea					(a) Affiliated gr totals	oup	(b) To be completed for ALL electing organizations
26					36			Organizations
36 37	Total lobbying expenditures to influence public	, ,,,	, ,,	• •	37		+	
38	Total lobbying expenditures to influence a legitable Total lobbying expenditures (add lines 36 and				38		- 	
39	Other exempt purpose expenditures				39	<u> </u>		
40	Total exempt purpose expenditures (add lines			• • •	40			
41	Lobbying nontaxable amount. Enter the amount	•	na table—	` ' '	~~~	**************************************	, e - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	s i Sulphi i n
71		obbying nontaxa	•				#Î	
		of the amount on		١ ١	~	*	7.00	
		000 plus 15% of th		00.000	ì,		1	
		000 plus 10% of the		1 1	41	*	1	The second
		000 plus 5% of the					7.	
						Á	Ý: 🐧	
42	Grassroots nontaxable amount (enter 25% of	ine 41)			42			
43	Subtract line 42 from line 36. Enter -0- if line 4	l2 is more than lin	e 36,		43			
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than lin	e 38		44			
	Caution: If there is an amount on either line 45	3 or line 44, you m	ust file Form 472	20.				
	4-Year Av	eraging Period	Under Section	on 501(h)				
	(Some organizations that made a section See the instructions f	n 501(h) election	do not have to co	omplete all			ns bel	ow
		Lobi	oying Expenditu	res During	4-Ye	ar Averagin	g Per	iod
	Calendar year (or	(a)	(b)	(c)		(d)		(e)
	fiscal year beginning in) ▶	2004	2003	2002		2001		Total
45	Lobbying nontaxable amount							
46	Lobbying ceiling amount (150% of line 45(e))	~	*****				,,,	
47	Total lobbying expenditures							
48	Grassroots nontaxable amount		***					
49	Grassroots ceiling amount (150% of line 48(e))	***				- 4		
50	Grassroots lobbying expenditures							
	rt VI-B Lobbying Activity by Nonelec	ting Public Ch	arities				i	· · · · · · · · · · · · · · · · · · ·
	(For reporting only by organiza			art VI-A) (See	page 11 o	f the	instructions.)
Duri	ng the year, did the organization attempt to infli							
	mpt to influence public opinion on a legislative r				iiig c	Yes Yes	No	Amount
	Volunteers		_				V	
	Paid staff or management (Include compensat			through h.			V	
b	raid stail of management (include compensati						~	***
C								
					• •		v	
С	Media advertisements				 		V V	
d	Media advertisements	ents .		· · · · · · · · · · · · · · · · · · ·			V V	
c d e	Media advertisements	ents poses ernment officials,					V V V	
c d e f	Media advertisements Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp Direct contact with legislators, their staffs, gov Rallies, demonstrations, seminars, conventions	nents poses ernment officials, s, speeches, lectur					V V	
c d e f	Media advertisements	nents poses ernment officials, s, speeches, lectur gh h.)	es, or any other	means			V V V	0

Sche	dule A	(Form 990 or 990-EZ) 2004			F	age (
Pa	rt VI			ansfers To and Transaction 11 of the instructions.)	ns and Relationships With Noncharitab	le Exe	mp		
51				Indirectly engage in any of the following with any other organization described in section 01(c)(3) organizations) or in section 527, relating to political organizations?					
а	Tra	nsfers from the rep	orting organization	to a noncharitable exempt orga	anization of:	Yes	No		
	(i)	Cash			<u>51a(</u> i)	~		
	(ii)	Other assets			<u>a(ii)</u>		~		
b		er transactions:	ies of assets with a	noncharitable exempt organiza	ution b(i)		~		
		(i) Sales or exchanges of assets with a noncharitable exempt organization							
			s, equipment, or otl	b(iii)		~			
		Reimbursement a	• •	b(iv)		~			
	1	Loans or loan gua	•		b(v)		~		
		Performance of s	b(vi)		1				
С				sts, other assets, or paid emplo	· · · · · · · · · · · · · · · · · · ·		1		
d	goo	ds, other assets, o	or services given by	y the reporting organization. If t	e Column (b) should always show the fair market the organization received less than fair market ds, other assets, or services received.	t value value i	of the		
(a Line	a) e no	(b) Amount involved	Name of none	(c) charitable exempt organization	(d) Description of transfers, transactions, and sharing a	rrangeme	ents		
		1		=					
				<u></u>					
	des	cribed in section 5	•	other than section 501(c)(3)) or	le or more tax-exempt organizations in section 527?	s 🗹	No		
(a) Name of organization			zation	(b) Type of organization	(c) Description of relationship				
			<u></u>						
		····							

FORM 990	Non-Government Securities								
Security Description									
Short-Term Investment-Grade Fund	Corporate Bonds	Other	<u>Total</u>						
TO 990, Ln 54, Col B	<u>12,746</u>	<u>0</u>	<u>12,746</u>						
Long-Term Investment-Grade Fund	Corporate Bonds	Other	<u>Total</u>						
TO 990, Ln 54, Col B	<u>4,184</u>	<u>0</u>	<u>4,184</u>						
500 Index Fund	Corporate Stocks	<u>Other</u>	<u>Total</u>						
TO 990, Ln 54, Col B	<u>3,586</u>	<u>0</u>	<u>3,586</u>						