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CLIENT'S COPY

ELDREDGE, FOX & PORRETTI, LLP
25 NORTH STREET
CANANDAIGUA, NEW YORK 14424

CLIENT: 81037-101
SEPTEMBER 28, 2004

REACH THE CHILDREN, INC.
14 CHESHAM WAY
FAIRPORT, NY 14450

S T A T E M E N T

PREPARATION OF 2003 EXEMPT ORGANIZATION TAX RETURN(S)

ELDREDGE, FOX & PORRETTI, LLP
25 NORTH STREET
CANANDAIGUA, NEW YORK 14424

(585)427-8900

REACH THE CHILDREN, INC.
14 CHESHAM WAY
FAIRPORT, NY 14450
ATTENTION: KEVIN CLAWSON

DEAR KEVIN;

ENCLOSED IS THE ORGANIZATION'S 2003 EXEMPT ORGANIZATION
RETURN. THE RETURN SHOULD BE SIGNED, DATED, AND MAILED.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

FORM 990 RETURN:

PLEASE SIGN AND MAIL ON OR BEFORE NOVEMBER 15, 2004.

MAIL TO - INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0027

WE HAVE ENCLOSED MAILING ENVELOPES FOR YOUR CONVENIENCE IN
FILING THE RETURN.

PLEASE REVIEW THE RETURN FOR COMPLETENESS AND ACCURACY.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE
CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX
RETURN.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST
THAT YOU RETAIN THIS COPY INDEFINITELY.

SINCERELY,

KEVIN HILL, CPA

ELDREDGE, FOX & PORRETTI, LLP
25 NORTH STREET
CANANDAIGUA, NEW YORK 14424

(585)427-8900

REACH THE CHILDREN, INC.
14 CHESHAM WAY
FAIRPORT, NY 14450
ATTENTION: KEVIN CLAWSON

DEAR KEVIN;

ENCLOSED IS THE ORGANIZATION'S 2003 NEW YORK FORM CHAR497,
ANNUAL FINANCIAL REPORT. THE REPORT SHOULD BE SIGNED, DATED,
AND MAILED AS INDICATED.

NEW YORK ANNUAL FINANCIAL REPORT:

PLEASE SIGN AND MAIL FORM CHAR497 AS SOON AS POSSIBLE.

MAIL TO - STATE OF NEW YORK
DEPARTMENT OF LAW
CHARITIES BUREAU - REGISTRATION SECTION
120 BROADWAY, NEW YORK, NY 10271

ENCLOSE A CHECK FOR \$50 MADE PAYABLE TO NEW YORK STATE
DEPARTMENT OF LAW. INCLUDE THE ORGANIZATION'S STATE
REGISTRATION NUMBER(S) ON THE REMITTANCE.

PLEASE BE SURE THE ATTACHED NEW YORK CERTIFICATION FORM
CHAR010 HAS BEEN PROPERLY SIGNED AND DATED.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE
CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX
RETURN.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST
THAT YOU RETAIN THIS COPY INDEFINITELY.

SINCERELY,

KEVIN HILL, CPA

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 \$ 662,282. noncash \$	22 662,282.	662,282.	STATEMENT 5	
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 0.	0.	0.	0.
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 3,948.		3,948.	
32	Legal fees	32 2,000.		2,000.	
33	Supplies	33 951.	951.		
34	Telephone	34			
35	Postage and shipping	35 1,273.		1,273.	
36	Occupancy	36			
37	Equipment rental and maintenance	37 27,566.	27,566.		
38	Printing and publications	38			
39	Travel	39 18,175.	18,175.		
40	Conferences, conventions, and meetings	40			
41	Interest	41 2,200.		2,200.	
42	Depreciation, depletion, etc. (attach schedule) ...	42 995.		995.	
43	Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e	SEE STATEMENT 2	43e 364,914.	346,776.	18,138.	
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 1,084,304.	1,055,750.	28,554.	0.

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 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.)

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

a	SEE STATEMENT 4				
		(Grants and allocations \$	662,282.)		1,055,750.
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)				1,055,750.

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	49,495.	11,676.
	46 Savings and temporary cash investments	12,946.	1,841.
	47 a Accounts receivable	64.	
	b Less: allowance for doubtful accounts		64.
	48 a Pledges receivable		
	b Less: allowance for doubtful accounts		
	49 Grants receivable		
	50 Receivables from officers, directors, trustees, and key employees		
	51 a Other notes and loans receivable		
	b Less: allowance for doubtful accounts		
	52 Inventories for sale or use		
	53 Prepaid expenses and deferred charges		
	54 Investments - securities		
	55 a Investments - land, buildings, and equipment: basis		
	b Less: accumulated depreciation		
56 Investments - other			
57 a Land, buildings, and equipment: basis	4,975.		
b Less: accumulated depreciation STMT 6	1,410.		
58 Other assets (describe SEE STATEMENT 7)	46,723.	7,947.	
59 Total assets (add lines 45 through 58) (must equal line 74)	374,824.	25,093.	
Liabilities	60 Accounts payable and accrued expenses	46.	
	61 Grants payable		
	62 Deferred revenue		
	63 Loans from officers, directors, trustees, and key employees STMT 8	261,100.	183,200.
	64 a Tax-exempt bond liabilities		
	b Mortgages and other notes payable		
	65 Other liabilities (describe CREDIT CARDS PAYABLE)	233.	1,726.
66 Total liabilities (add lines 60 through 65)	261,379.	184,926.	
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	113,445.	-159,833.
	68 Temporarily restricted		
	69 Permanently restricted		
	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		
	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)	113,445.	-159,833.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	374,824.	25,093.	

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 on Form 990-T for this year? N/A	78b	
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 N/A		
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? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
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 on the amount on line 85f? N/A	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 year? N/A	85h	
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 0.; section 4912 0.; section 4955 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 NEW YORK		
b	Number of employees employed in the pay period that includes March 12, 2003 90b 0		
91	The books are in care of KEVIN CLAWSON Telephone no. (585) 223-7973		
	Located at 14 CHESHAM WAY, FAIRPORT, NY ZIP + 4 14450		
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 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
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					
96 Dividends and interest from securities			14		143.
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					522.
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
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.		0.	665.
105 Total (add line 104, columns (B), (D), and (E))					665.

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).
96-9	SUPPORT THE DEVELOPMENT, ORGANIZATION AND CONTINUATION OF PROGRAMS THAT FOCUS ON PROVIDING EDUCATION AND HEALTH CARE FOR CHILDREN, VOCATIONAL TRAINING FOR ADULTS, AND TEACHING SELF-RELIANCE AND PRINCIPLE-BASED VALUES.

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).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here: Signature of officer: _____ Date: _____ KEVIN CLAWSON, PRESIDENT
Type or print name and title.

Paid Preparer's Use Only: Preparer's signature: _____ Date: 9/28/07 Check if self-employed: Preparer's SSN or PTIN: 528-11-2049
Firm's name (or yours if self-employed), address, and ZIP + 4: ELDREDGE, FOX & PORRETTI, LLP
180 CANAL VIEW BLVD, #100
ROCHESTER, NY 14623-2833
EIN: _____ Phone no.: (585) 427-8900

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2003

Name of the organization

REACH THE CHILDREN, INC.

Employer identification number

16 1569622

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 employee 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 i 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)?		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.)		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.)	497,856.	536,062.	414,767.	73,659.	1,522,344.
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	237.	134.	54.	135.	560.
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					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	498,093.	536,196.	414,821.	73,794.	1,522,904.
24 Line 23 minus line 17	498,093.	536,196.	414,821.	73,794.	1,522,904.
25 Enter 1% of line 23	4,981.	5,362.	4,148.	738.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 30,458.
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 834,833.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 1,522,904.
d Add: Amounts from column (e) for lines: 18 560. 19 22 26b 834,833.					26d 835,393.
e Public support (line 26c minus line 26d total)					26e 687,511.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 45.1447%
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 5 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 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
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.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		Yes	No
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?		
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?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
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?	33a	
b	Admissions policies?	33b	
c	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.)			

34 a	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	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

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 -			
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	41	
Over \$1,500,000 but not over \$17,000,000	\$225,000 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
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
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 on a legislative matter or referendum, through the use of:	Yes	No	Amount
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 .)			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

REACH THE CHILDREN, INC.

Employer identification number

16-1569622

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 REACH THE CHILDREN, INC.	Employer identification number 16-1569622
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Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BOUNTIFUL RESOURCES FOUNDATION 14 CHESHAM WAY FAIRPORT, NY 14450	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	BREWER FAMILY FOUNDATION	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	ROBERT & SUSAN ROYLANCE 9489 S. 3400 W. SOUTH JORDAN, UT 84095	\$ 16,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	DAVID ANDERSON	\$ 9,711.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	RAY H. & HELEN G. BARTON, JR.	\$ 9,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	MARILYN M. & KENNETH CLARK	\$ 11,000.	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 REACH THE CHILDREN, INC.	Employer identification number 16-1569622
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Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	DEL SOL <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	W. BLAIR & SUZANNE J. GARFF <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	PEERY FOUNDATION <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	POPE FOUNDATION <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	UNITED FAMILIES INTERNATIONAL <hr/> <hr/>	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	MANAGEMENT AND GENERAL											
1	NOTEBOOK COMPUTER	080802	SL	5.00	16	2,384.			2,384.	199.		477.
2	PROJECTOR	080802	SL	5.00	16	2,591.			2,591.	216.		518.
	* 990 PAGE 2 TOTAL											
	MANAGEMENT AND GENERAL					4,975.		0.	4,975.	415.	0.	995.
	* GRAND TOTAL 990 PAGE											
	2 DEPR					4,975.		0.	4,975.	415.	0.	995.

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	1
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DESCRIPTION	AMOUNT
IN-KIND DONATIONS	336,785.
TOTAL TO FORM 990, PART I, LINE 20	336,785.

FORM 990	OTHER EXPENSES	STATEMENT	2
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
VOLUNTEER EXPENSES	254,620.	254,620.		
BANK FEES	2,761.		2,761.	
LICENSES EXPENSES	274.		274.	
WEB HOSTING SERVICES	695.		695.	
EQUIPMENT	1,287.		1,287.	
ADVERTISING	9,134.	8,528.	606.	
CREDIT CARD FEES	643.		643.	
TELEPHONE	5,929.		5,929.	
MISCELLANEOUS	3,324.		3,324.	
CONSULTING SERVICES	76,300.	76,300.		
TRAINING	114.	114.		
INSURANCE	0.			
OFFICE SUPPLIES	1,768.		1,768.	
PRINTING AND COPYING	851.		851.	
PROFESSIONAL FEES	7,214.	7,214.		
TOTAL TO FM 990, LN 43	364,914.	346,776.	18,138.	

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

DEDICATED TO STRENGTHENING FAMILIES BY PROVIDING EDUCATION AND HEALTH CARE FOR CHILDREN, VOCATIONAL TRAINING FOR ADULTS, AND TEACHING SELF-RELIANCE AND PRINCIPLE-BASED VALUES. THESE TOOLS AND SKILLS WILL ENABLE PEOPLE TO OVER-COME THE SHACKLES OF EXTREME POVERTY AND PROMOTE COMMUNITY LEADERSHIP AS THEY REACH FOR A BRIGHTER TOMORROW.

DESCRIPTION OF PROGRAM SERVICE ONE

EDUCATION - RTC ASSISTS OR DIRECTLY OPERATES SCHOOLS IN SEVERAL AFRICAN COUNTRIES, INCLUDING KENYA, UGANDA, GHANA, & SIERRA LEONE. RTC PROVIDES USEFUL RESOURCES TO ASSIST IN RAISING THE QUALITY OF EDUCATION FOR CHILDREN AND THE NUMBER OF CHILDREN REACHED.

ORPHAN CARE - RTC ASSISTS FAMILIES IN CARING FOR THE GROWING NUMBER OF ORPHANS IN SEVERAL COUNTRIES, INCLUDING AIDS ORPHANS.

AIDS PREVENTION EDUCATION - RTC AIMS TO LOWER AIDS INCIDENCE BY TEACHING COMMUNITIES AIDS PREVENTION EDUCATION PROGRAMS TO COUNTY OFFICIALS, TEACHERS, PARENTS/GUARDIANS & CHILDREN IN COUNTRIES INCLUDING GHANA, KENYA, UGANDA & TANZANIA.

MICRO-ENTERPRISE - RTC HELPS PEOPLE ENGAGE IN SUSTAINABLE LIVELIHOODS FOR THEIR FAMILIES BY PROVIDING TRAINING AND SMALL LOANS TO PEOPLE. RTC ACQUIRES THE FUNDS, FINDS MENTORS & ADMINISTRATORS AND LOAN APPLICANTS FOR PARTICIPANTS IN UGANDA, GHANA, KENYA, NIGERIA, MADAGASCAR & TANZANIA.

AGRICULTURE & WATER - RTC COLLABORATES WITH COMMUNITIES TO MAKE WATER AVAILABLE FOR IRRIGATION, AGRICULTURAL PURPOSES & DAILY SURVIVAL.

COMMUNITY DEVELOPMENT CENTERS - RTC HELPS LOCAL COMMUNITIES ESTABLISH COMMUNITY DEVELOPMENT CENTERS FROM WHENCE EACH OF THE FOCUS PROGRAMS CAN BE LAUNCHED, MENTORED AND MONITORED FOR LONG-TERM EFFECT, IN ANY GIVEN COMMUNITY. THESE CENTERS PROVIDE A GATHERING PLACE FOR THE COMMUNITY TO MEET, A TEACHING/TRAINING FACILITY, STORAGE AREAS FOR SHIPPING COMMODITIES PRODUCED BY THE COMMUNITIES, DISTRIBUTION OF INCOMING DONATIONS AND REVENUE AND A CENTER FOR ALL PRODUCTIVE COMMUNITY ACTIVITY.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	662,282.	1,055,750.

FORM 990		CASH GRANTS AND ALLOCATIONS		STATEMENT	5
CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT	
KENYA PROJECTS CONTINUED	VARIOUS	KENDU BAY & CHUYULU, KENYA	NONE	382,300.	
GHANA	VARIOUS	ADENTA, ESSAM & ACCRA, GHANA	NONE	101,678.	
STARFISH DIVISION PROJECTS	VARIOUS	AFRICA	NONE	80,258.	
TANZANIA PROJECTS	VARIOUS	DAR ES SALAAM & TARIME, TANZANIA	NONE	9,450.	
MADAGASCAR PROJECT	MADAID	MADAGASCAR	NONE	7,096.	
UGANDA PROJECTS	VARIOUS	JINJA, KAMPALA, MUKONO & RAKAI, UGANDA	NONE	11,500.	
SIERRA LEONE	VARIOUS	SIERRA LEONE	NONE	70,000.	
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				662,282.	

FORM 990		DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT		STATEMENT	6
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE		
NOTEBOOK COMPUTER	2,384.	676.	1,708.		
PROJECTOR	2,591.	734.	1,857.		
TOTAL TO FORM 990, PART IV, LN 57	4,975.	1,410.	3,565.		

FORM 990	OTHER ASSETS	STATEMENT	7
DESCRIPTION		AMOUNT	
DUE FROM RELATED PARTIES		7,723.	
PASSTHROUGH		224.	
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B		7,947.	

FORM 990 LOANS PAYABLE TO OFFICER'S, DIRECTOR'S, ETC. STATEMENT 8

LENDER'S NAME AND TITLE	ORIGINAL LOAN AMOUNT
KEVIN CLAWSON, PRESIDENT	0.

DATE OF NOTE	MATURITY DATE	TERMS OF REPAYMENT	INTEREST RATE
			.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
	GENEREAL OPERATIONS

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	183,200.
TOTAL TO FORM 990, PART IV, LINE 63, COLUMN B		183,200.

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 9

DESCRIPTION	AMOUNT
IN-KIND CONTRIBUTIONS	336,785.
TOTAL TO FORM 990, PART IV-A	336,785.

Depreciation and Amortization 990
 (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return: **REACH THE CHILDREN, INC.** Business or activity to which this form relates: **FORM 990 PAGE 2** Identifying number: **16-1569622**

Part I Election To Expense Certain Tangible Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See instructions for a higher limit for certain businesses	1	100,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	400,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2002 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2004. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election (see instructions)	15	
16	Other depreciation (including ACRS) (see instructions)	16	995.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2003	17	
18	If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2003 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2003 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	995.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25

26 Property used more than 50% in a qualified business use: Table with 9 columns for property details.

27 Property used 50% or less in a qualified business use: Table with 9 columns for property details.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with 6 main columns: (a) Vehicle, (b) Vehicle, (c) Vehicle, (d) Vehicle, (e) Vehicle, (f) Vehicle. Includes rows 30-36 for mileage and availability questions.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

Table for Section C with 2 columns: Yes, No. Includes rows 37-41 for policy and use questions.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2003 tax year: Table with 6 columns for amortization details.

43 Amortization of costs that began before your 2003 tax year 43

44 Total. Add amounts in column (f). See instructions for where to report 44

If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box

Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.		
Type or print. File by the extended due date for filing the return. See instructions.	Name of Exempt Organization REACH THE CHILDREN, INC.	Employer identification number 16-1569622
	Number, street, and room or suite no. If a P.O. box, see instructions. 14 CHESHAM WAY	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. FAIRPORT, NY 14450	

Check type of return to be filed (File a separate application for each return):

- Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870
- Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720 Form 6069

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the **whole** group, check this box . If it is for **part** of the group, check this box and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until NOVEMBER 15, 2004.
- 5 For calendar year 2003, or other tax year beginning _____ and ending _____.
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO OBTAIN NECESSARY INFORMATION TO FILE TAX RETURN AND AVOID THE NEED TO FILE AN AMENDED TAX RETURN.

- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____
- b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____
- c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **N/A**

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature _____ Title **PRESIDENT** Date _____

Notice to Applicant - To Be Completed by the IRS

- We **have** approved this application. Please attach this form to the organization's return.
- We **have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We **have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
- We **cannot consider** this application because it was filed after the due date of the return for which an extension was requested.
- Other _____

Director _____ By: _____ Date _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name ELDREDGE, FOX & PORRETTI, LLP
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 180 CANAL VIEW BLVD, #100
	City or town, province or state, and country (including postal or ZIP code) ROCHESTER, NY 14623-2833

323832 05-01-03

CHAR010

Certification to Accompany Reports Submitted on Forms Other than Official Department of Law (Attorney General) Forms

STATE OF NEW YORK DEPARTMENT OF LAW CHARITIES BUREAU - REGISTRATION SECTION 120 BROADWAY NEW YORK, NY 10271 www.oag.state.ny.us/charities/charities.html

Attorney General's registration number: 06-78-61/71613

Name of Registrant: REACH THE CHILDREN, INC.

Mailing Address: 14 CHESHAM WAY FAIRPORT, NY 14450

Tel. No.: (585)223-7973 Fax No.:

Email Address

I (We) certify, under penalty for perjury, that the following documents (list submitted documents) attached hereto:

FORM 990, SCH A, SCH B AND FORM CHAR003, SECURITIES SCHEDULE

all of which comprise the 2003 (insert year of report) periodic report of REACH THE CHILDREN, INC. (insert legal name of organization)

have been examined by me (us) and to the best of my (our) knowledge and belief the contents thereof are true, correct and complete.

NAME and TITLE (printed) Signature

Tel. No.: Fax No.:

Email Address

Dated the day of , 20

NAME and TITLE (printed) Signature

Tel. No.: Fax No.:

Email Address

Dated the day of , 20

CHAR010 (Rev. 10/02)

CHAR 497	2003	STATE OF NEW YORK DEPARTMENT OF LAW CHARITIES BUREAU - REGISTRATION SECTION 120 BROADWAY New York, NY 10271 www.oag.state.ny.us/charities/charities.html
ANNUAL FINANCIAL REPORT <i>(Charitable Organizations)</i> FOR THE YEAR ENDED <u>12/31/2003</u>		

FULL OFFICIAL NAME AND ADDRESS OF ORGANIZATION Official Name: <u>REACH THE CHILDREN, INC.</u> Street Address: _____ City: <u>FAIRPORT</u> State: <u>NY</u> ZIP: <u>14450</u>	ORGANIZATION'S MAIL ADDRESS, TELEPHONE NUMBER & EMAIL Street Address: _____ City: _____ State: _____ ZIP: _____ Phone Number: (<u>585</u>) <u>223</u> Ext: <u>7973</u> Email: _____
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STATE REG. NO. 06-78-61/71613	FEDERAL I.D. NO. 16-1569622	Except for information treated as confidential by the United States Internal Revenue Service (for example, Schedule B to IRS Form 990), this form, including any attachments, is a public record and a copy will be provided upon request to any interested persons.
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Executive Law Annual Filing Exemption: "X" box if your total contributions did not exceed \$25,000 and you did not engage the services of a professional fund raiser or fund raising counsel during this fiscal year. (See page 7)

EPTL Annual Filing Exemption: "X" box if your total gross receipts for this fiscal year did not exceed \$25,000 and the assets (market value) of the organization did not exceed \$25,000 at any time during this fiscal year. (For dual registrants only - see page 7)

Is this a combined report for multiple organizations? (Use CHAR497-C. Do not use this form.)

FINANCIAL SUMMARY	TOTAL
Support and Revenue	
1. Direct public support (line 14, Schedule 1, page 2)	473,576.
2. Indirect public support (line 18, Schedule 1, page 2)	
3. Government grants (line 20, Schedule 1, page 2)	
4. Program service revenue	
5. Other revenue	665.
6. Total support and revenue (add lines 1 through 5)	474,241.
Expenses	
Program services (list individually):	
7. SEE STATEMENT 1	1,055,750.
8.	
9.	
10.	
11. Public information combined with fund raising	
12. Payments to affiliates/services to affiliates	
13. Total program services (add lines 7 through 12)	1,055,750.
14. Management and general expenses	28,554.
15. Fund raising expenses	
16. Total expenses (add lines 13 through 15)	1,084,304.
17. Excess (deficit) of support and revenue over expenses (line 6 minus line 16)	-610,063.
18. Net assets at beginning of year	113,445.
19. Other changes in net assets (attach explanation) SEE STATEMENT 2	336,785.
20. Net assets at end of year (add lines 17 through 19)	-159,833.
Summary of Balance Sheet (as of <u>12/31/2003</u>)	
21. Assets	25,093.
22. Liabilities	184,926.
23. Net assets (line 21 minus line 22)	-159,833.
Explanation of income and expense items, if required:	

REACH THE CHILDREN, INC.

SCHEDULE 1: CONTRIBUTIONS	Total Amount	Portion Other Than Cash
NOTE: Do not report donated services or facilities in this schedule.		
Direct Public Support		
1. Direct mail		
2. Telephone solicitation campaigns		
3. Commercial co-ventures (complete Schedule 4)		
4. Door-to-Door		
5. Special events (contribution portion only)		
6. Telethon		
7. Other (specify): GENERAL DONATIONS	473,576.	0.
8. Other (specify):		
9. Other (specify):		
10. Total general public support (add lines 1 through 9)	473,576.	0.
11. Foundation and trust grants		
12. Corporate and other business grants		
13. Legacies and bequests		
14. Total direct public support (add lines 10 through 13) (Transfer total line 14 to page 1, line 1)	473,576.	0.
Indirect Public Support		
15. From federated fund raising agencies (e.g., United Way)		
16. From affiliates		
17. From other fund raising agencies		
18. Total indirect public support (add lines 15 through 17) (Transfer total line 18 to page 1, line 2)		
Government Grants		
19. Specify Agency:		
(a)		
(b)		
(c)		
(d)		
(e) All other government grants		
20. Total government grants (add lines 19(a) through 19(e)) (Transfer total line 20 to page 1, line 3)		
21. Total contributions (sum of lines 14, 18 and 20)	473,576.	0.

REACH THE CHILDREN, INC.
SCHEDULE 2: PROFESSIONAL FUND RAISERS (PFR)

Schedule 2, page 1 of 1

Did the organization contract with or use the services of any professional fund raisers for fund raising activity in New York State? YES NO

- If YES, fill out the following schedule for each such arrangement. Use one sheet per arrangement.

1. PFR Contact Information	Name: _____ Address: _____ Phone: _____
2. Contract period	Start Date: _____ End Date: _____
3. Was the contract reviewed and approved by the organization's governing body?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. How many bids, if any, were reviewed by the organization's governing body prior to engaging the PFR?	
5. Describe the campaign, sale, event and/or services conducted by the PFR	
6. Describe whether the contract provides for solicitations of new contributors or those who have previously contributed to the organization	
7. Total gross revenue (DO NOT exclude amounts paid to the PFR - i.e., amounts reported on line 8)	\$
8. Amount paid to the PFR	\$
9. Total expenses, other than payments to the PFR reported on line 8	\$
10. Total expenses (line 8 + line 9)	\$
11. Net proceeds retained by the organization (line 7 - line 10)	\$
12. Total uncollected pledges	\$
13. Accounting method used in preparing this report	<input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other
14. Did the services result in solicitation in New York State?	<input type="checkbox"/> YES <input type="checkbox"/> NO

REACH THE CHILDREN, INC.
SCHEDULE 3: FUND RAISING COUNSEL (FRC)

Schedule 3, page 1 of 1

Did the organization contract with or use the services of any fund raising counsel for fund raising activity in New York State? YES NO

- If YES, fill out the following schedule for each such arrangement. Use one sheet per arrangement.

1. FRC Contact Information	Name: _____ Address: _____ Phone: _____
2. Contract period	Start Date: _____ End Date: _____
3. Was the contract reviewed and approved by the organization's governing body?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Describe the campaign, sale, event and/or services conducted by the FRC	
5. Amount paid to the FRC	\$ _____
6. Did the services result in solicitation in New York State?	<input type="checkbox"/> YES <input type="checkbox"/> NO

REACH THE CHILDREN, INC.
SCHEDULE 4: COMMERCIAL CO-VENTURERS (CCV)

Schedule 4, page 1 of 1

Did the organization contract with or use the services of any commercial co-venturer for fund raising activity in New York State? YES NO

- If YES, fill out the following schedule for each such arrangement. Use one sheet per arrangement.

<p>1. CCV Contact Information</p>	<p>Name: _____</p> <p>Address: _____</p> <p>Phone: _____</p>
<p>2. Contract period</p>	<p>Start Date: _____ End Date: _____</p>
<p>3. Was the contract reviewed and approved by the organization's governing body?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>4. Describe the campaign, sale, event and/or services conducted by the CCV</p>	
<p>5. Describe briefly the financial terms and conditions of the written contract</p>	
<p>6. Did the organization receive an accounting from the CCV as required by § 173-a(3) of Article 7-A of the Executive Law?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>

REACH THE CHILDREN, INC.
SCHEDULE 5: ACTIVITY STATEMENTS

1. Have your books/records been audited by or for any government agency/funding source this fiscal year? YES* NO

*If YES, specify:

Agency/Funding Source: _____

Period audited: _____

2. Does your organization allocate costs of multipurpose activities among program services, management and general, and fund raising; i.e., Direct Mail, Telethon? YES* NO

*If YES, See IRS Instructions - Reporting Joint Costs of Multi-Purpose Activities.

3. Did your organization receive donated services or the use of materials, equipment or facilities at no charge or at substantially less than fair rental value? YES* NO

*If YES, indicate the value: \$ _____ . (Do not include this amount as support or as an expense.)

REACH THE CHILDREN, INC.

FILING FEES AND ATTACHMENTS REQUIRED TO ACCOMPANY CHAR497:

CHAR497 must be submitted by charitable organizations registered pursuant to Article 7-A of the Executive Law ("Article 7-A"), including those organizations known as dual registrants that are also registered pursuant to the Estates, Powers and Trusts Law (the "EPTL"). Article 7-A governs the solicitation of contributions from New Yorkers, whereas the EPTL governs the administration of charitable assets in New York State. Organizations and entities that are registered pursuant to the EPTL only, should not use CHAR497. For detail instructions, see CHAR023 (Summary of Registration and Filing Requirements for Charitable Entities).

ARTICLE 7-A:

Where Total Support and Revenue Is:

- \$100,000 or less:
 - \$10.00 Article 7-A filing fee
 - Certification by Charitable Organization
 - No Public Accountant's Report is needed

- \$100,001 to \$250,000:
 - \$10.00 Article 7-A filing fee
 - Certification by Charitable Organization
 - Independent Public Accountant's Review

- More than \$250,000:
 - \$25.00 Article 7-A filing fee
 - Certification by Charitable Organization
 - Independent Public Accountant's Audit

Note: If your total contributions did not exceed \$25,000 and you did not engage the services of a professional fund raiser ("PFR") or a fund raising counsel ("FRC") during this fiscal year, check the applicable box on page 1 of the CHAR497 (Annual Financial Report) or complete the Article 7-A section of CHAR006 (Notice of Annual Filing Exemption). No Article 7-A filing fee is required.

EPTL:

If the registrant is also required to register with the Attorney General pursuant to the EPTL, another filing fee and additional documents, such as CHAR003 (Securities Schedule), may be due pursuant to that statute.

EPTL fees, which are based on the registrant's net worth at the end of the reporting period, are as follows:

<u>Net Worth</u>	<u>EPTL Filing Fee</u>
Less than \$50,000	\$25.00
\$50,000 or more, but less than \$250,000	\$50.00
\$250,000 or more, but less than \$1,000,000	\$100.00
\$1,000,000 or more, but less than \$10,000,000	\$250.00
\$10,000,000 or more, but less than \$50,000,000	\$750.00
\$50,000,000 or more	\$1500.00

Note: If your total gross receipts during the fiscal year did not exceed \$25,000 and the assets (market value) of the organization did not exceed \$25,000 at any time during the fiscal year, check the applicable box on page 1 of the CHAR497 (Annual Financial Report) or complete the EPTL section of CHAR006 (Notice of Annual Filing Exemption). No EPTL filing fee is required.

REQUIREMENT TO UPDATE REGISTRATION INFORMATION:

Pursuant to Section 172.6 of Article 7-A, an organization must notify the Charities Bureau in writing within thirty days of any material change in the information provided by the organization in the Charities Registration Statement if filed with the Charities Bureau. Such changes should be reported to the Charities Bureau on an Amended Charities Registration Statement (CHAR410-A).

REACH THE CHILDREN, INC.
DOCUMENT ATTACHMENT CHECK-OFF:

Check the boxes for the documents you are attaching:

Article 7-A Filing Fee (Submit only 1 check or money order for the total fee, including any applicable EPTL fee, payable to "NYS Department of Law")

- \$25.00 fee (total support & revenue more than \$250,000)
- \$10.00 fee (total support & revenue \$250,000 or less)
- No Article 7-A fee (total contributions less than \$25,000 and did not engage PFR or FRC) -

Check Article 7-A Exemption Box on page 1 of CHAR497 or submit CHAR006 (Notice of Annual Filing Exemption)

Independent Accountant's Report

- Audit Report (total support & revenue more than \$250,000)
- Review Report (total support & revenue \$100,001 to \$250,000)
- No Accountant's Report Required (total support & revenue not more than \$100,000 or contributions received not more than \$25,000 with no PFR/FRC)

Completed Internal Revenue Service Forms

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> IRS Form 990 | <input type="checkbox"/> IRS Form 990-EZ | <input type="checkbox"/> IRS Form 990-PF |
| <input checked="" type="checkbox"/> Schedule A to IRS Form 990 | <input type="checkbox"/> Schedule A to IRS Form 990-EZ | <input type="checkbox"/> Schedule B to IRS Form 990-PF |
| <input checked="" type="checkbox"/> Schedule B to IRS Form 990 | <input type="checkbox"/> Schedule B to IRS Form 990-EZ | <input type="checkbox"/> IRS Form 990-T |
| <input type="checkbox"/> IRS Form 990-T | <input type="checkbox"/> IRS Form 990-T | |

Additional Documents for Dual Registrants

- EPTL Filing Fee: \$25.00 (net worth of less than \$50,000)
- \$50.00 (net worth of \$50,000 or more, but less than \$250,000)
 - \$100.00 (net worth of \$250,000 or more, but less than \$1,000,000)
 - \$250.00 (net worth of \$1,000,000 or more, but less than \$10,000,000)
 - \$750.00 (net worth of \$10,000,000 or more, but less than \$50,000,000)
 - \$1500.00 (net worth of \$50,000,000 or more)
 - No EPTL fee (total gross receipts less than \$25,000 and assets did not exceed \$25,000 at any time during year) -
- Check EPTL Exemption Box on page 1 of CHAR497 or submit CHAR006 (Notice of Annual Filing Exemption)

- CHAR003 (Securities Schedule) - required if securities are held at any time during the year

Other Attachments (if any)

List: _____

CERTIFICATION BY CHARITABLE ORGANIZATION

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

KEVIN CLAWSON

PRESIDENT

Signature of President or Authorized Officer

Printed Name

Title

Date Signed

Signature of Chief Financial Officer

Printed Name

Title

Date Signed

After this report has been executed by two distinct officials, please send it with the appropriate **attachments** and **fee** to:

**State of New York Department of Law
Charities Bureau - Registration Section
120 Broadway
New York, NY 10271-0332**

Forms and instructions for registration and annual financial filing are available on the Charities Bureau website at www.oag.state.ny.us/charities/charities.html

CHAR 497 PROGRAM SERVICES STATEMENT 1

DESCRIPTION OF PROGRAM SERVICE ONE EXPENSE AMOUNT

EDUCATION - RTC ASSISTS OR DIRECTLY OPERATES SCHOOLS IN SEVERAL AFRICAN COUNTRIES, INCLUDING KENYA, UGANDA, GHANA, & SIERRA LEONE. RTC PROVIDES USEFUL RESOURCES TO ASSIST IN RAISING THE QUALITY OF EDUCATION FOR CHILDREN AND THE NUMBER OF CHILDREN REACHED. 1,055,750.

ORPHAN CARE - RTC ASSISTS FAMILIES IN CARING FOR THE GROWING NUMBER OF ORPHANS IN SEVERAL COUNTRIES, INCLUDING AIDS ORPHANS.

AIDS PREVENTION EDUCATION - RTC AIMS TO LOWER AIDS INCIDENCE BY TEACHING COMMUNITIES AIDS PREVENTION EDUCATION PROGRAMS TO COUNTY OFFICIALS, TEACHERS, PARENTS/GUARDIANS & CHILDREN IN COUNTRIES INCLUDING GHANA, KENYA, UGANDA & TANZANIA.

MICRO-ENTERPRISE - RTC HELPS PEOPLE ENGAGE IN SUSTAINABLE LIVELIHOODS FOR THEIR FAMILIES BY PROVIDING TRAINING AND SMALL LOANS TO PEOPLE. RTC ACQUIRES THE FUNDS, FINDS MENTORS & ADMINISTRATORS AND LOAN APPLICANTS FOR PARTICIPANTS IN UGANDA, GHANA, KENYA, NIGERIA, MADAGASCAR & TANZANIA.

AGRICULTURE & WATER - RTC COLLABORATES WITH COMMUNITIES TO MAKE WATER AVAILABLE FOR IRRIGATION, AGRICULTURAL PURPOSES & DAILY SURVIVAL.

COMMUNITY DEVELOPMENT CENTERS - RTC HELPS LOCAL COMMUNITIES ESTABLISH COMMUNITY DEVELOPMENT CENTERS FROM WHENCE EACH OF THE FOCUS PROGRAMS CAN BE LAUNCHED, MENTORED AND MONITORED FOR LONG-TERM EFFECT, IN ANY GIVEN COMMUNITY. THESE CENTERS PROVIDE A GATHERING PLACE FOR THE COMMUNITY TO MEET, A TEACHING/TRAINING FACILITY, STORAGE AREAS FOR SHIPPING COMMODITIES PRODUCED BY THE COMMUNITIES, DISTRIBUTION OF INCOMING DONATIONS AND REVENUE AND A CENTER FOR ALL PRODUCTIVE COMMUNITY ACTIVITY.

TOTAL TO FORM CHAR 497, PAGE 1, LINE 7 1,055,750.

CHAR 497 OTHER CHANGES IN FUND BALANCES OR NET WORTH STATEMENT 2

DESCRIPTION AMOUNT

IN-KIND DONATIONS 336,785.

TOTAL TO FORM CHAR 497, PAGE 1, LINE 19 336,785.

SECURITIES SCHEDULE

STATE OF NEW YORK, DEPARTMENT OF LAW

CHARITIES BUREAU - REGISTRATION SECTION

120 BROADWAY, NEW YORK, NY 10271

<http://www.oag.state.ny.us/charities/charities.html>

CHAR003

06-78-61/7161

REACH THE CHILDREN, INC.

Charities Bureau Registration Number: 3

Name of Organization

For Fiscal Year Ended: DEC 31, 2003

Item	Date Acquired	Type and Name of Securities	Beginning Inventory	
			Number of Shares or Principal	Cost or Acquisition Value
a		SEE ATTACHED		
b				
c				
d				
e				
f				
g				
h				
i				
j				
TOTALS				

Item	Purchases or Other Acquisitions			Sales or Other Dispositions		
	Number of Shares	Cost Per Share	Gross Cost	Number of Shares	Price per Share	Gross Selling Price
a						
b						
c						
d						
e						
f						
g						
h						
i						
j						
TOTALS						

Item	Sales and Other Dispositions		Ending Inventory			Income Received
	Date Sold	Amount of Gain or Loss	Number of Shares or Principal	Cost or Acquisition Value	Market Value	
a						
b						
c						
d						
e						
f						
g						
h						
i						
j						
TOTALS						