### Form 990-EZ

Department of the Treasury

Internal Revenue Service

# **Short Form** 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) For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year. The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150 2002

Open to Public Inspection

A F	or the 2002	calend	ar vear. o	r tax voa	r beginning	se a copy of th	ns return t					nts.	inspection
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art	Rever	nue, Ex	xpenses,	and Ch	anges in I	Net Asset	me Form 99	0 instead of	Form 990	D-EZ	<b>&gt;</b>		76,1 instructions.)
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1 3													
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be	o Calli O	(1088) 11	om sale of	assets other	er than inventor	ov (line 5a less	line 5h)	Hook	4.4.4		-		
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	c Gross p	rofit or (	loss) from s	ales of invo	nton//line 7a l		7 b						
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10		and simil	lar amounts	, 2, 3, 4, 5	c, 6c, 7c, and 8	3)	***		10000	· · Þ	9		76,15
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15	Occupa	ncy, rent	t, utilities, ar	nd maintena	ance					The Chornes of the	14		
(232)	(1)	, , , , , , , ,	tions, posta	ge, and sin	pping						15		
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21	Net ass	ets or fur	nd balances	at end of	year (combine	lines 18 through	th 20) · ·				21		2,11
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#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

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

Internal Revenue Service Name of the organization

CONSEJO DE LATINOS UNIDOS

C/O K.B. FORBES

Employer identification number

95-4892705 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 1 of the instructions. List each one, If there are none, enter "None.") (b) Title and average (a) Name and address of each employee paid more (d) Contributions to (e) Expense account and other hours per week than \$50,000 (c) Compensation nployee benefit plans & devoted to position deferred compensation allowances Total number of other employees paid over NONE Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II (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 BRADLEY J. HOFFMAN 1695 OAK GROVE AVENUE CONSULTANT 18,689. Total number of others receiving over \$50,000 for

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

Schedule A (Form 990 or 990-EZ) 2002

professional services

NONE

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 hier or 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.  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, trustees, majority owner, or principal beneficiary? Off the answer to any question is "Yes," attach a detailed statement explaining the transactions.)  a Sale, exchange, or leasing of property?.  2 b Lending of money or other extension of credit?  5 Furnishing of goods, services, or facilities?  4 Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?  5 Transfer of any part of its income or assets?  5 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)  5 Oyou have a section 403(b) annuity plan for your employees?  6 Core: Attach a statement to explain how the organization determines that individuals or organizations receiving grants  7 Forans from it in furtherance of its charable programs "qualify for ceivice payments"  8 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  9 A A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  A chord, convention of payment or governmental unit. Section 170(b)(1)(A)(i).  A hospital or a cooperative hospital service organization section 170(b)(1)(A)(i).  A nedical research organization perfect of the benefit of a college or	-	Statements About Activities (See page 2 of the instructions.)	IV.	Page
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(a) Name(s) of supported organization(s) (b) Line number		section 509(a)(3).)		
		(a) Name(s) of supported organization(s) (b) Line nu		
			2011	
An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)		An organization organized and operated to test for public safety. Section 509(a)(4), (See page 5 of the instructions)		

	te:You may use the worksheet in the instructions endar year (or fiscal year beginning in)	(a) 2001	(ь) 2000	(c) 1999	(d) 1998		(e) Tota
	Gifts, grants, and contributions received. (Do		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	107.1000	(4) 1550		(e) Tota
	not include unusual grants. See line 28.)				12.		
6	Membership fees received						
7	Gross receipts from admissions, merchandise				3		
	sold or services performed, or furnishing of					- 1	
	facilities in any activity that is related to the			1	1		
_	organization's charitable, etc., purpose						
8	Gross income from interest, dividends,				3		
	amounts received from payments on securities					- 1	
	loans (section 512(a)(5)), rents, royalties, and					1	
	unrelated business taxable income (less		1		1		
	section 511 taxes) from businesses acquired					1	
_	by the organization after June 30, 1975						
9	Net income from unrelated business			1			
^	activities not included in line 18						
0	Tax revenues levied for the organization's						
	benefit and either paid to it or expended on its behalf				1		
1	The value of services or facilities furnished to						
Ž.	the organization by a governmental unit				1		
	without charge. Do not include the value of						
	services or facilities generally furnished to the				1		
	public without charge						
2	Other income. Attach a schedule. Do not						_
	include gain or (loss) from sale of capital assets						
3	Total of lines 15 through 22						
4	Line 23 minus line 17			Company of the second			
5	Enter 1% of line 23				V resultant		
6	Organizations described on lines 10 or 11: a En	ter 2% of amount	in column (e), line 2	NOT APPLICA	BLE 2	26a	
b	Prepare a list for your records to show the name						
	governmental unit or publicly supported organizat						
	amount shown in line 26a. Do not file this list					66	3.5
	Total support for section 509(a)(1) test: Enter line 24, co	olumn (e)			▶ 2	6c	
C		19		III REE	***************************************		
d			26		2	90.0	
d	22	26	81771 0				
d e	Public support (line 26c minus line 26d total)	26					
d e f	22 Public support (line 26c minus line 26d total) Public support percentage (line 26e (numerator) divid	26 ded by line 26c (d	enominator))		▶ 2	61	
d e f	Public support (line 26c minus line 26d total)	26 ded by line 26c (di	enominator))		▶ 2 were received	from a	"disqual
e f	Public support (line 26c minus line 26d total)	26 ded by line 26c (demounts included the name of, a	enominator))		▶ 2 were received	from a	"disqual
e f	Public support (line 26c minus line 26d total)	ded by line 26c (di mounts included the name of, a such amounts for	enominator))	16, and 17 that received in each	were received year from, each	from a h "disqualifi	ied pers
e f 7	Public support (line 26c minus line 26d total)	ded by line 26c (demounts included the name of, such amounts for	enominator))	16, and 17 that received in each	were received year from, each (1998)	from a h "disqualifi	ied pers
d e f 7	Public support (line 26c minus line 26d total)  Public support percentage (line 26e (numerator) divided on line 12: a For a person," prepare a list for your records to show Do not file this list with your return. Enter the sum of (2001) (2000)	ded by line 26c (demounts included the name of, such amounts for	enominator))	16, and 17 that received in each	were received year from, each	from a h "disqualifi	ied pers
d e f 7	Public support (line 26c minus line 26d total)	ded by line 26c (dimounts included the name of, a such amounts for lived from each ear, that was most through 11, as	enominator))	f6, and 17 that received in each "disqualified perso of (1) the amount s.) Do not file this	were received year from, each year from, each (1998) ns"), prepare a on line 25 for thist with your factors.	from a h "disqualifi	r records
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d е f 7	Public support (line 26c minus line 26d total)  Public support percentage (line 26e (numerator) dividors of the control of the cont	ded by line 26c (demounts included the name of, a such amounts for such amounts for such amounts for the sar, that was most through 11, as the larger amounts for the sar, that was most through 11, as the larger amounts for the sarger amounts for the sa	enominator))	"disqualified perso of (1) the amount s.) Do not file this ) or (2), enter the	were received year from, each (1998) ns"), prepare a on line 25 for this with your resum of these	from a h "disqualifi list for your the year or return. After differences	r records (2) \$5.0 r compu
d e f 7	Public support (line 26c minus line 26d total)  Public support percentage (line 26e (numerator) divisor organizations described on line 12: a For a person," prepare a list for your records to show Do not file this list with your return. Enter the sum of (2001)	ded by line 26c (di mounts included the name of, a such amounts for ived from each ear, that was mo 5 through 11, as the larger amounts	enominator))	"disqualified perso of (1) the amount s.) Do not file this or (2), enter the	were received year from, each year from, each (1998) ns"), prepare a on line 25 for the list with your resum of these (1998)	from a h "disqualifi  list for your the year or return. After differences	r records (2) \$5,0 r compu (the exc
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d e f 7 b	Public support (line 26c minus line 26d total)	ded by line 26c (ded by line 26c (ded by line 26c (ded the name of, as such amounts for such amounts for such amounts for such amounts for through 11, as the larger amounts for such amounts for	enominator))	"disqualified perso of (1) the amount s.) Do not file this or (2), enter the	were received year from, each year from, each year from, each year from, each year from year and interest year of these year of these year of these years years of these years	from a h "disqualifi  list for your the year or return. After differences	r records (2) \$5.0 r compu
d e f 7 b c d e	Public support (line 26c minus line 26d total)	ded by line 26c (dimounts included the name of, a such amounts for ived from each ear, that was most through 11, as the larger amounts for items of the larger	enominator))	"disqualified perso of (1) the amount s.) Do not file this ) or (2), enter the	were received year from, each year from, each year from, each year from, each year from year and interest year of these year of these year of these years years of these years	from a h "disqualifi  list for your the year or return. After differences	r records (2) \$5.0 r compu
de f	Public support (line 26c minus line 26d total)	ded by fine 26c (dimounts included the name of, a such amounts for ived from each ear, that was most through 11, as the larger amounts for its line 27b total	enominator))	"disqualified perso of (1) the amount s.) Do not file this ) or (2), enter the	were received year from, each year from, each year from, each year from, each year from year a on line 25 for the year of these year of these year of these year of these years of these years years of these years year	from a h "disqualifi list for your the year or return. After differences	r records (2) \$5,(r compute the exception of the exceptio
def 7	Public support (line 26c minus line 26d total)	ded by line 26c (dimounts included the name of, a such amounts for ived from each ear, that was most through 11, as the larger amounts for its line 27b total complete by line 27f (denumerator) divide	enominator))	"disqualified perso of (1) the amount s.) Do not file this ) or (2), enter the	were received year from, each year from, each year from, each year from, each year from year a on line 25 for the list with your resum of these year (1998)	from a h "disqualifi list for your the year or return. After differences	r records (2) \$5,0 r computation (the exception)

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,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29		
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,			
	- 경향사 하게 되면 되었는데 보고 있는데 보고 있는데 보다 보다는데 보고 있는데 보고 있	30		100
31	programs, and scholarships?  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.)	31		
2.0	Bar M. Anna J. M. Anna			
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		0,000	
	basis?	32b	J	
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?		- 11	
	Students' rights or privileges?	33a	-	
-	Admissions policies?			
· D	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		
922	17 20 N M M M M M M M M M M M M M M M M M M			
d	Scholarships or other financial assistance?	33d		
	Wolffer Was No work of the	4		
e	Educational policies?	33e		
	52.0 559 929 523			
f	Use of facilities?	33f		
	***************************************			
g	Athletic programs?	330		
350		559		
h	Other extracurricular activities?			
335	Other extracurricular activities?	33h		
	If you previous division to any of the above places and in the			
	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	- 1	
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.	- /-		
	THE PROPERTY OF THE PROPERTY O			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05			
5455/A	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation			
JSA	error 1990, 1970-2 O.b. 301, covering racial nondiscrimination? If No, attach an explanation	35		

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

Sched

Sched

Schedule A (Form 990 or 990-EZ) 2002

x

x

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.)

Part VII			95-4892705	P	age
The second secon	Exempt Organization	ng Transfers To and Transactions an s (See page 12 of the instructions.)		N.	
1 Did the	reporting organization dire	ectly or indirectly engage in any of the foll ction 501(c)(3) organizations) or in section	lowing with any other organization describ	ed in sect	ion
		nization to a noncharitable exempt organi		Yes	No
				a(i)	X
(ii) Ot	her assets		a	(ii)	x
D Outer u	alisacuolis.		:1		
(i) Sa	les or exchanges of asset	s with a noncharitable exempt organization	n	(i)	x
(II) Pu	irchases of assets from a	noncharitable exempt organization	l b	(ii)	x
(III) Re	ental of facilities, equipmen	it, or other assets	b	(iii)	x
(11)	minute sement arrangement			(iv)	x
(V) LO	ans or roan guarantees		L. L. C.	(v)	X
c Sharing	of facilities, equipment, m	nembership or fundraising solicitations ailing lists, other assets, or paid employee	· · · · · · · · · · · · · · · · · · ·	(vi)	X
d If the ans	swer to any of the above is "Y	es " complete the following schedule. Column	(b) should always show the fair market value of t	C	X
goods, of	ther assets, or services given	by the reporting organization. If the organization	on received less than fair market value in any	ne	
transaction	on or sharing arrangement, s	how in column (d) the value of the goods, other	assets, or services received:		
(a)	(b)	(c)	(d)		
Line no.	Amount involved	Name of noncharitable exempt organization	Description of transfers, transactions, and sharin	g arrangemen	its
N/A				au	
					_
					_
					_
22100 000					
2a Is the o	rganization directly or indir ed in section 501(c) of the	ectly affiliated with, or related to, one or Code (other than section 501(c)(3)) or in	more tax-exempt organizations	Yes x	e Lesso
describ b If "Yes,"	" complete the following so	hedule:			No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	" complete the following so	chedule:	Delye)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		J No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		] No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		] No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		J No
b If "Yes,"	complete the following so (a)	chedule: (b)	(c)		J No

#### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service Schedule of Contributors

Supplementary Information for

OMB No. 1545-0047

2002

Name of organization

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

	SINTROC	
CONSEJO DE LATINO Organization type (check	one):	95-4892705
Filers of:	0	
	Section:	
Form 990 or 990-EZ	x 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 priv	rate foundation
	501(c)(3) taxable private foundation	
General Rule -	(es) for both the General Rule and a Special Rule - see instructions.) filing Form 990, 990-EZ, or 990-PF that received, during the year, s	\$5,000 or more (in money or
General Rule -	filing Form 990, 990-EZ, or 990-PF that received, during the year,	\$5,000 or more (in money or
For organizations property) from an	filing Form 990, 990-EZ, or 990-PF that received, during the year, s y one contributor. (Complete Parts I and II.)	
For a section 501 under sections 50	filing Form 990, 990-EZ, or 990-PF that received, during the year,	3 1/3% support test of the regulations ng the year, a contribution of the
For a section 501 during the year, a	filing Form 990, 990-EZ, or 990-PF that received, during the year, so one contributor. (Complete Parts I and II.)  (c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 (9(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during	3 1/3% support test of the regulations ng the year, a contribution of the II.) at received from any one contributor, fusively for religious, charitable,
Special Rule -  X For organizations property) from an Special Rules -  For a section 501 under sections 50 greater of \$5,000  For a section 501 during the year, a scientific, literary,  For a section 501 during the year, s not aggregate to the year for an excapplies to this org	filing Form 990, 990-EZ, or 990-PF that received, during the year, so one contributor. (Complete Parts I and II.)  (c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 (9(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during or 2% of the amount on line 1 of these forms. (Complete Parts I and (c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, the ggregate contributions or bequests of more than \$1,000 for use exclusive or educational purposes, or the prevention of cruelty to children or a (c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, the ome contributions for use exclusively for religious, charitable, etc., purpose than \$1,000. (If this box is checked, enter here the total contributions of the prevention of complete any of translation because it received nonexclusively religious, charitable, etc.	3 1/3% support test of the regulations ing the year, a contribution of the II.)  at received from any one contributor, fusively for religious, charitable, animals. (Complete Parts I, II, and III.)  at received from any one contributor, purposes, but these contributions did butions that were received during the Parts unless the General Rule to., contributions of \$5,000 or more
For a section 501 during the year, a scientific, literary,  For a seguent 501 during the year, a scientific the year for a section 501 during the year, a scientific the year for an exception applies to this org	filing Form 990, 990-EZ, or 990-PF that received, during the year, so one contributor. (Complete Parts I and II.)  (c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 (9(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during or 2% of the amount on line 1 of these forms. (Complete Parts I and (c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that garegate contributions or bequests of more than \$1,000 for use exclusive or educational purposes, or the prevention of cruelty to children or a (c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that ome contributions for use exclusively for religious, charitable, etc., purpose than \$1,000. (If this box is checked, enter here the total contributions of charitable, etc., purpose. Do not complete any of the prevention of complete any of the contributions, charitable, etc., purpose.	3 1/3% support test of the regulations ing the year, a contribution of the II.)  at received from any one contributor, fusively for religious, charitable, animals. (Complete Parts I, II, and III.)  at received from any one contributor, purposes, but these contributions did butions that were received during the Parts unless the General Rule to., contributions of \$5,000 or more
For a section 501 during the year, s not aggregate to the year.)  For an exception 501 during the year, and aggregate to the year.	filing Form 990, 990-EZ, or 990-PF that received, during the year, so yone contributor. (Complete Parts I and II.)  (c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 (9(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during or 2% of the amount on line 1 of these forms. (Complete Parts I and (c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that ggregate contributions or bequests of more than \$1,000 for use exclusive or educational purposes, or the prevention of cruelty to children or a contributions for use exclusively for religious, charitable, etc., purpose than \$1,000. (If this box is checked, enter here the total contributions of the prevention of cruelty to children or a contribution of the sexual contributions for use exclusively for religious, charitable, etc., purpose. Do not complete any of the prevention because it received nonexclusively religious, charitable, etc., purpose. Do not complete any of the prevention because it received nonexclusively religious, charitable, etc.	3 1/3% support test of the regulations ing the year, a contribution of the II.)  at received from any one contributor, fusively for religious, charitable, animals. (Complete Parts I, II, and III.)  at received from any one contributor, surposes, but these contributions did butions that were received during the Parts unless the General Rule to., contributions of \$5,000 or more
For a section 501 during the year, a scientific, literary,  For a section 501 during the year, a scientific by a section 501 during the year, a scientific, literary,  Caution: Organizations that 1990-EZ, or 990-PF), but the	filing Form 990, 990-EZ, or 990-PF that received, during the year, so yone contributor. (Complete Parts I and II.)  (c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 (9(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during or 2% of the amount on line 1 of these forms. (Complete Parts I and (c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that ggregate contributions or bequests of more than \$1,000 for use exclusive or educational purposes, or the prevention of cruelty to children or a (c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that ome contributions for use exclusively for religious, charitable, etc., purpose than \$1,000. (If this box is checked, enter here the total contributions because it received nonexclusively religious, charitable, etc.	3 1/3% support test of the regulations ing the year, a contribution of the II.)  at received from any one contributor, fusively for religious, charitable, animals. (Complete Parts I, II, and III.)  at received from any one contributor, surposes, but these contributions did butions that were received during the Parts unless the General Rule ic., contributions of \$5,000 or more ic

JSA 2E1251 1.000 If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)) -

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

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

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

#### Specific Instructions

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

Part I. In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc.

Number consecutively. Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

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

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

Part II		have already been granted an automatic 3-m c 3-Month Extension, complete only Part I		
Same of the	Name of Exempt Organ	tomatic) 3-Month Extension of Time	e - Must File Orig	inal and One Copy.
Type or print	C/O K.B. FOR	CONSEJO DE LATINOS UNIDO	S	Employer identification number
File by the	Number, street, and roo	om or suite no. If a P.O. box, see instructions.		95-4892705
extended due date	010			For IRS use only
filing the return. Ser	City, town or post office	s, state, and ZIP code. For a foreign address, see in	etructions	
instruction	LOS ANGELES,	CA 90023		
Check	type of return to be file	ed (File a separate application for each r	eturn):	
HIC	x Form 99	0-EZ Form 990-T (sec. 401(a) or 408(a	trust) Form 104	1-A Form 5227 Form 8
The second	orm 990-BL Form 990	0-PF Form 990-T (trust other than above	e) Form 472	0 Form 6069
STOP:	Do not complete Part II	if you were not already granted an autom	atic 3-month extension	on on a previously filed Face on
• If the	organization does not have	an office or place of his in the same		on a previously filed Form 880
• If this	is for a Group Return, ente	an office or place of business in the United or the organization's four digit Group Exemp	States, check this box	×
for the v	whole group, check this bo	x ►	The state of the s	
names a	and EINs of all members th	ne extension is for	CK this box	and attach a list with the
4 Ire	equest an additional 3-mor	nth extension of time until 11/15	2003	
5 Fo	r calendar year, o	r other tax year beginning 01/01/200	2 and and in	12/31/2002
6 111	his tax year is for less than	1 12 months, check reason: v Initial return	D   Final satura	
7 51	ate in detail why you need	the extension THIRD PARTY INFORM	ATTON NEGROES	
300000	TOTAL THE MOT E	SEEN RECEIVED RESULTING IN THE	S REQUEST FOR	AN
21171	DITTORAL EXTENSION	OF TIME TO FILE THE DETRIENT		
nor	nrefundable credits. See in	990-BL, 990-PF, 990-T, 4720, or 6069,	enter the tentative ta	x, less any
b If t	his application is for Form	estructions		\$
tay	navments made leabile	990-PF, 990-T, 4720, or 6069, enter any r	efundable credits and	d estimated
no.	payments made, include	any prior year overpayment allowed as	a credit and any ar	nount naid
			and dirty di	nount paid
pre	Modely Will Colli 0000			Welling to Colored State
c Bal	lance Due. Subtract line 8	b from line 8a. Include your payment with	this form or if require	<u>\$</u>
c Bal	lance Due. Subtract line 81 h FTD coupon or, if rec	b from line 8a. Include your payment with quired, by using EFTPS (Electronic Feder	this form, or, if require	ed, deposit
c Bal	lance Due. Subtract line 81 h FTD coupon or, if rec	b from line 8a. Include your payment with quired, by using EFTPS (Electronic Feder	this form, or, if require al Tax Payment Sys	ed, deposit
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FORM 990EZ, PART I - LIST OF CONTRIBUTORS (NOT OPEN TO PUBLIC INSPECTION)

NAME AND ADDRESS -------------

SUPPORT DIRECT 06/30/2002 DATE ---

.000,69

5,000.

06/03/2002

OTHER 501 (C) (3) CONTRIBUTORS

2,156.

TOTAL CONTRIBUTION AMOUNTS

76,156.

4755

STATEMENT 1

## FORM 990EZ, PART I - OTHER EXPENSES

TRAVEL	6,329.
MGT & GENERAL-STATE TAXES	200.
MGT & GENERAL-LEGAL FEES	4,526.
MGT & GENERAL-OFFICE EXPENSES	281.
MGT & GENERAL-BANK FEES	150.
MGT & GENERAL-CONSULTING	2,261.
MGT & GENERAL-MILEAGE	214.
MGT & GENERAL-OTHER	254.
PROGRAM SERVICES-CONSULTING	18,689.
PROGRAM SERVICES-MEDICAL & EDUCATIONAL	41,139.
TOTAL	74,043.

FORM 990EZ, PART II - CASH, SAVINGS AND INVESTMENTS \_\_\_\_\_\_

DESCRIPTION -----

CASH

TOTALS

END OF YEAR

2,113.

2,113. --------- FORM 990EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO FOSTER, ENCOURAGE AND DEVELOP EDUCATIONAL OPPORTUNITIES AND PROGRAMS IN LATINO COMMUNITIES ON A BROAD RANGE OF ISSUES, INCLUDING HEALTH CARE, EDUCATION, POLICE PROTECTION, IMMIGRATION AND EMPLOYMENT. CURRENT YEAR PROGRAM BENEFITS INCLUDED 7 PARTICIPANTS.

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FORM 990EZ, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS 

DESCRIPTION

EXPENSES

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59,828

LATINOS MEDICAL SERVICES AND EDUCATIONAL PROGRAMS

59,828

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TOTAL

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- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES FORM 990EZ, PART IV

5-10270

NAME AND ADDRESS	TIME DEVOTED	MOTERADINGNOO	CONTRIBUTIONS TO EMPLOYEE	EXPENSE
	NOTITION OF	CONTENSALION	DENETT FLANS	ACCOONT
HORTENSIA MAGANA	PRESIDENT	NONE	E NONE	NONE
	VICE PRESIDENT	NONE	IE NONE	NONE
K.B. FORBES	EXEC/DIR-SECRETARY	ARY NONE	IE NONE	NONE
JOHN MCALLISTER DDS	BOARD	NONE	E NONE	NONE
MANUEL E. FIGUEROA	BOARD	NONE	E NONE	NONE
LOURDES GALVAN	BOARD	NONE	E NONE	NONE
JAIME BARRAGAN	BOARD	NONE	E NONE	NONE

NONE

NONE

NONE

GRAND TOTALS

9

STATEMENT