

Return of Organization Exempt from Income Tax

2004

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2004 calendar year, or tax year beginning 7/01, 2004, and ending 6/30, 2005

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

BET-NAHRAIN, INC
P O BOX 4116
MODESTO, CA 95352

D Employer identification number: 94-2398084
E Telephone number: 209-538-9801
F Accounting method: [X] Cash [ ] Accrual

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

- H (a) Is this a group return for affiliates? [ ] Yes [X] No
H (b) If 'Yes,' enter number of affiliates
H (c) Are all affiliates included? [ ] Yes [ ] No
H (d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

G Web site: N/A

J Organization type (check only): [X] 501(c) 3 (insert no) [ ] 4947(a)(1) or [ ] 527

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

I Group Exemption Number

M Check [X] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: 1,712,930

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, and Total. Includes items like Contributions, Program service revenue, Rental income, and Total revenue.

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**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 (att sch) (cash \$ _____ non-cash \$ _____)				
23	Specific assistance to individuals (att sch) . . .				
24	Benefits paid to or for members (att sch) . . . .				
25	Compensation of officers, directors, etc . . . . .	24,000.	12,000.	12,000.	
26	Other salaries and wages . . . . .	2,242.	1,121.	1,121.	
27	Pension plan contributions . . . . .				
28	Other employee benefits . . . . .				
29	Payroll taxes . . . . .	2,354.	1,177.	1,177.	
30	Professional fundraising fees . . . . .				
31	Accounting fees . . . . .	3,180.	1,590.	1,590.	
32	Legal fees . . . . .				
33	Supplies . . . . .				
34	Telephone . . . . .	30,184.	10,061.	10,061.	10,062.
35	Postage and shipping . . . . .				
36	Occupancy . . . . .				
37	Equipment rental and maintenance . . . . .	750.	750.		
38	Printing and publications . . . . .				
39	Travel . . . . .				
40	Conferences, conventions, and meetings . . . . .				
41	Interest . . . . .	2,748.		2,748.	
42	Depreciation, depletion, etc (attach schedule)	75,359.	60,287.	13,564.	1,508.
43	Other expenses not covered above (itemize): a <u>See Statement 3</u>	394,543.	335,717.	28,387.	30,439.
	b -----				
	c -----				
	d -----				
	e -----				
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	535,360.	422,703.	70,648.	42,009.

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? <u>See Statement 4</u>	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a <u>EDUCATIONAL TELEVISION &amp; RADIO STATION SERVICES PROMOTE THE ASSYRIAN CULTURE BY ENTERTAINING THE COMMUNITY WITH ASSYRIAN MUSIC, PROGRAMS AND FEATURES ABOUT ASSYRIAN EVENTS.</u> (Grants and allocations \$ _____)	422,703.
b ----- (Grants and allocations \$ _____)	
c ----- (Grants and allocations \$ _____)	
d ----- (Grants and allocations \$ _____)	
e Other program services (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	422,703.

**Part IV Balance Sheets** (See Instructions)

**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
<b>ASSETS</b>	<b>45</b> Cash – non-interest-bearing . . . . .	48,781.	<b>45</b>	48,971.
	<b>46</b> Savings and temporary cash investments . . . . .	259,270.	<b>46</b>	209,310.
	<b>47a</b> Accounts receivable . . . . .	<b>47a</b>		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>47b</b>		<b>47c</b>
	<b>48a</b> Pledges receivable . . . . .	<b>48a</b>		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>48b</b>		<b>48c</b>
	<b>49</b> Grants receivable . . . . .		<b>49</b>	
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>50</b>	
	<b>51a</b> Other notes & loans receivable (attach sch) . . . . .	<b>51a</b>		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>51b</b>		<b>51c</b>
	<b>52</b> Inventories for sale or use . . . . .		<b>52</b>	
	<b>53</b> Prepaid expenses and deferred charges . . . . .	229.	<b>53</b>	388.
	<b>54</b> Investments – securities (attach schedule) . . . . .		<b>54</b>	
	<b>55a</b> Investments – land, buildings, & equipment: basis . . . . .	<b>55a</b> <input type="checkbox"/> Cost <input type="checkbox"/> FMV 141,523.		
<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>55b</b> Statement 5 53,284.	92,367.	<b>55c</b> 88,239.	
<b>56</b> Investments – other (attach schedule) . . . . .			<b>56</b>	
<b>57a</b> Land, buildings, and equipment: basis . . . . .	<b>57a</b> 2,011,879.			
<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>57b</b> Statement 6 863,929.	1,054,268.	<b>57c</b> 1,147,950.	
<b>58</b> Other assets (describe <input type="checkbox"/> ) . . . . .			<b>58</b>	
<b>59 Total assets</b> (add lines 45 through 58) (must equal line 74) . . . . .		1,454,915.	<b>59</b> 1,494,858.	
<b>LIABILITIES</b>	<b>60</b> Accounts payable and accrued expenses . . . . .		<b>60</b>	
	<b>61</b> Grants payable . . . . .		<b>61</b>	
	<b>62</b> Deferred revenue . . . . .		<b>62</b>	
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>63</b>	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .		<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .		<b>64b</b>	
	<b>65</b> Other liabilities (describe <input type="checkbox"/> See Statement 7 ) . . . . .			<b>65</b> 130,635.
<b>66 Total liabilities</b> (add lines 60 through 65) . . . . .		0.	<b>66</b> 130,635.	
<b>NET ASSETS OR FUND BALANCES</b>	<b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74</b>			
	<b>67</b> Unrestricted . . . . .		<b>67</b>	
	<b>68</b> Temporarily restricted . . . . .		<b>68</b>	
	<b>69</b> Permanently restricted . . . . .		<b>69</b>	
	<b>Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74</b>			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .	1,454,915.	<b>72</b>	1,364,223.
	<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21) . . . . .	1,454,915.	<b>73</b>	1,364,223.
	<b>74 Total liabilities and net assets/fund balances</b> (add lines 66 and 73) . . . . .	1,454,915.	<b>74</b>	1,494,858.

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.

BAA

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)**

a	Total revenue, gains, and other support per audited financial statements.	a	N/A
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Not unrealized gains on investments .. \$ _____		
(2)	Donated services and use of facilities .. \$ _____		
(3)	Recoveries of prior year grants .. \$ _____		
(4)	Other (specify): ----- \$ _____		
	Add amounts on lines (1) through (4).	b	
c	Line a minus line b	c	
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$ _____		
(2)	Other (specify): ----- \$ _____		
	Add amounts on lines (1) and (2).	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

a	Total expenses and losses per audited financial statements ..	a	N/A
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities .. \$ _____		
(2)	Prior year adjustments reported on line 20, Form 990 .. \$ _____		
(3)	Losses reported on line 20, Form 990 .. \$ _____		
(4)	Other (specify): ----- \$ _____		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 .. \$ _____		
(2)	Other (specify): ----- \$ _____		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	

**Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see instructions)**

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
SARGON DADESHO 3704 N VENEMAN MODESTO, CA 95356	President A/R	24,000.	0.	0.
WILLIAM DADESHO P O BOX 4116 MODESTO, CA 95352	Treasurer A/R	0.	0.	0.
LINA LAZAR 3867 PAULA COURT TURLOCK, CA 95380	Secretary A/R	0.	0.	0.
JOE YOUSIP 3700 NORTH VENEMAN MODESTO, CA 95356	Trustee A/R	0.	0.	0.
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-----				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?  
If 'Yes,' attach schedule — see instructions

Yes  No

<b>Part VI Other Information</b> (See instructions)		Yes	No
<b>76</b>	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity.		X
<b>77</b>	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.		X
<b>78a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>78b</b>	If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	N/A	
<b>79</b>	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement.		X
<b>80a</b>	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?		X
<b>81a</b>	Enter direct and indirect political expenditures. See line 81 instructions	81a	0.
<b>81b</b>	Did the organization file <b>Form 1120-POL</b> for this year?		X
<b>82a</b>	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?		X
<b>82b</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
<b>83a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
<b>83b</b>	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
<b>84a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?		X
<b>84b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
<b>85a</b>	<b>501(c)(4), (5), or (6) organizations.</b> Were substantially all dues nondeductible by members?		N/A
<b>85b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		N/A
<b>85c</b>	Dues, assessments, and similar amounts from members	85c	N/A
<b>85d</b>	Section 162(e) lobbying and political expenditures.	85d	N/A
<b>85e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
<b>85f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
<b>85g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A
<b>85h</b>	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
<b>86a</b>	<b>501(c)(7) organizations</b> Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
<b>86b</b>	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
<b>87a</b>	<b>501(c)(12) organizations</b> Enter: a Gross income from members or shareholders	87a	N/A
<b>87b</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
<b>88</b>	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		X
<b>89a</b>	<b>501(c)(3) organizations</b> Enter: Amount of tax imposed on the organization during the year under section 4911	0.	
	section 4912	0.	
	section 4955	0.	
<b>89b</b>	<b>501(c)(3) and 501(c)(4) organizations</b> 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		X
	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
<b>90a</b>	List the states with which a copy of this return is filed	CALIFORNIA	
<b>90b</b>	Number of employees employed in the pay period that includes March 12, 2004 (See instructions)		1
<b>91</b>	The books are in care of	BET-NAHRAIN, INC Telephone number	
	Located at	3119 CENTRAL AVE, CERES, CA Telephone number	
	ZIP + 4	95307	
<b>92</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here	N/A	<input type="checkbox"/>
	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 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) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments.....					
g Fees & contracts from government agencies...					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			14	3,005.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property.....					
b not debt-financed property.....			16	7,346.	
98 Net rental income or (loss) from pers prop....					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			2	298,683.	
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))				309,034.	
105 Total (add line 104, columns (B), (D), and (E))					309,034.

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 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)
N/A	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See 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 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  Date 10-23-01

Date	Check if	Preparer's SSN or PTIN (See General Instruction W)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Organization Exempt Under**  
**Section 501(c)(3)**

OMB No. 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust  
Supplementary Information — (See separate instructions.)

**2004**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

BET-NAHRAIN, INC

Employer identification number

94-2398084

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See 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 and 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 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 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. ▶ \$ <u>                    N/A                    </u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	X
Organizations that made an election under section 501(l) 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, 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?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3a 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)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	X

**Part IV** Reason for Non-Private Foundation Status (See 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 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 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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) . . . . .	118,542.	89,124.	81,333.	90,163.	379,162.
<b>16</b> Membership fees received . . . . .					
<b>17</b> 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. . . . .	1,256,226.	1,375,696.	1,446,497.	1,287,854.	5,366,273.
<b>18</b> 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. . . . .	9,442.	13,984.	12,320.	15,997.	51,743.
<b>19</b> Net income from unrelated business activities not included in line 18 . . . . .					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf . . . . .					
<b>21</b> 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. . . . .					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. See Stmt. 8 . . . . .					
<b>23</b> Total of lines 15 through 22 . . . . .	1,384,210.	1,478,804.	1,517,788.	1,394,014.	5,774,816.
<b>24</b> Line 23 minus line 17. . . . .	127,984.	103,108.	71,291.	106,160.	408,543.
<b>25</b> Enter 1% of line 23. . . . .	13,842.	14,788.	15,178.	13,940.	
<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24 <b>N/A</b> ▶ <b>26a</b>					
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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. . . . . ▶ <b>26b</b>					
c Total support for section 509(a)(1) test: Enter line 24, column (e) . . . . . ▶ <b>26c</b>					
d Add Amounts from column (e) for lines. <b>18</b> _____ <b>19</b> _____ <b>22</b> _____ <b>26b</b> _____ ▶ <b>26d</b>					
e Public support (line 26c minus line 26d total) . . . . . ▶ <b>26e</b>					
f <b>Public support percentage (line 26e (numerator) divided by line 26c (denominator))</b> ▶ <b>26f</b> %					
<b>27 Organizations described on line 12:</b>					
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: (2003) _____ 0. (2002) _____ 0. (2001) _____ 0. (2000) _____ 0. . . . .					
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. (2003) _____ 0. (2002) _____ 0. (2001) _____ 0. (2000) _____ 0. . . . .					
c Add Amounts from column (e) for lines <b>15</b> _____ <b>16</b> _____ <b>17</b> _____ <b>20</b> _____ <b>21</b> _____ ▶ <b>27c</b> 5,745,435.					
d Add Line 27a total _____ 0. and line 27b total _____ 0. ▶ <b>27d</b> 0.					
e Public support (line 27c total minus line 27d total) ▶ <b>27e</b> 5,745,435.					
f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ <b>27f</b> 5,774,816.					
g <b>Public support percentage (line 27e (numerator) divided by line 27f (denominator))</b> ▶ <b>27g</b> 99.49 %					
h <b>Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))</b> ▶ <b>27h</b> 0.90 %					

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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

**Part V Private School Questionnaire** (See 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 )			
-----			
-----			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
	b Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement	34b	
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 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.

<b>Limits on Lobbying Expenditures</b> (The term 'expenditures' means amounts paid or incurred )		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>		
<b>38</b> Total lobbying expenditures (add lines 36 and 37)	<b>38</b>		
<b>39</b> Other exempt purpose expenditures	<b>39</b>		
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>		
<b>41</b> Lobbying nontaxable amount. Enter the amount from the following table -			
<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>		
Not over \$500,000	20% of the amount on line 40	<b>41</b>	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>		
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	<b>43</b>		
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	<b>44</b>		

**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)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots non-taxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See 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.)

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

- (i) Cash
(ii) Other assets
b Other transactions:
(i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

Table with 3 columns: Question label, Yes, No. Rows include 51 a (i), a (ii), b (i) through b (vi), and c.

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. First row contains N/A.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (X)

b If 'Yes,' complete the following schedule.

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. First row contains N/A.

Client 1003

BET-NAHRAN, INC

94-2398084

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**Statement 1**  
**Form 990, Part I, Line 9**  
**Net Income (Loss) from Special Events**

Special Events	Gross Receipts	Less Contri- butions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
BINGO	1,466,295.	0.	1,466,295.	1,225,944.	240,351.
PARTIES & FUNCTIONS	91,110.	0.	91,110.	32,778.	58,332.
Total	<u>\$ 1557405.</u>	<u>\$ 0.</u>	<u>\$ 1557405.</u>	<u>\$ 1258722.</u>	<u>\$ 298,683.</u>

**Statement 2**  
**Form 990, Part I, Line 20**  
**Other Changes in Net Assets or Fund Balances**

TIMING ADJUSTMENT. . . . .	\$ -5,412.
Total	<u>\$ -5,412.</u>

**Statement 3**  
**Form 990, Part II, Line 43**  
**Other Expenses**

	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
DONATIONS	27,614.	27,614.		
INSURANCE	16,448.		16,448.	
KITCHEN UTENSILS/SUPPLIES	429.	429.		
LICENSES & PERMITS	700.		700.	
MEETING EXPENSE	1,344.		1,344.	
OFFICE EXPENSES	8,776.		4,388.	4,388.
REPAIRS/TV	27,533.	22,026.	5,507.	
SECURITY	14,056.	7,028.		7,028.
TAXES, OTHER	35.	35.		
TAXES, PROPERTY	11,861.	11,861.		
TELEVISION/RADIO	247,701.	247,701.		
UTILITIES	38,046.	19,023.		19,023.
Total	<u>\$ 394,543.</u>	<u>\$ 335,717.</u>	<u>\$ 28,387.</u>	<u>\$ 30,439.</u>

**Statement 4**  
**Form 990, Part III**  
**Organization's Primary Exempt Purpose**

AN EDUCATIONAL AND CULTURAL ORGANIZATION WHOSE PRIMARY PURPOSE IS TO PRESENT EDUCATIONAL PROGRAMS WHICH RELATE TO THE LANGUAGE, CULTURE, HISTORY, MUSIC, ATHLETIC AND MASS MEDIA OF THE ASSYRIAN PEOPLE, IN ORDER TO PRESERVE AND PERPETUATE THE RICH HERITAGE OF THE ASSYRIANS.

Client 1003

BET-NAHRAN, INC

94-2398084

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**Statement 5**  
**Form 990, Part IV, Line 55b**  
**Investments - Land, Buildings, and Equipment**

Category	Basis	Accum. Deprec.	Book Value
Buildings	\$ 113,523.	\$ 53,284.	\$ 60,239.
Land	28,000.		28,000.
Total	<u>\$ 141,523.</u>	<u>\$ 53,284.</u>	<u>\$ 88,239.</u>

**Statement 6**  
**Form 990, Part IV, Line 57**  
**Land, Buildings, and Equipment**

Category	Basis	Accum. Deprec.	Book Value
Buildings	\$ 2,006,879.	\$ 863,929.	\$ 1,142,950.
Land	5,000.		5,000.
Total	<u>\$ 2,011,879.</u>	<u>\$ 863,929.</u>	<u>\$ 1,147,950.</u>

**Statement 7**  
**Form 990, Part IV, Line 65**  
**Other Liabilities**

LINE OF CREDIT...		\$ 130,635.
Total		<u>\$ 130,635.</u>

**Statement 8**  
**Schedule A, Part IV-A, Line 22**  
**Other Income**

Description	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
LOSS, SCRAPING ASSETS	\$ 0.	\$ 0.	\$ -22,362.	\$ 0.	\$ -22,362.
Total	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ -22,362.</u>	<u>\$ 0.</u>	<u>\$ -22,362.</u>

Client 1003

BET-NAHRAIN, INC

94-2398084

9/27/05

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductio.	Depr Basis	Prior Depr.	Method	Life	Rate	Current Depr.
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Rental Activity - 3029 S CENTRAL AVE, CERES, CA 95307

<b>Buildings</b>																
1	HOUSE	7/01/92		112,000							112,000	49,156	S/L	27.5		4,073
50	ROOF	5/13/99		1,523							1,523	284	S/L	27.5		55
Total Buildings																
				113,523		0	0	0	0	0	113,523	49,440				4,128
<b>Land</b>																
2	LAND	7/01/92		28,000							28,000	0				0
Total Land																
				28,000		0	0	0	0	0	28,000	0				0
Total Depreciation																
				141,523		0	0	0	0	0	141,523	49,440				4,128

Depr. Schedule Only

<b>Buildings</b>																
3	BUILDING & IMPROVEMENTS	7/01/92		966,930							966,930	365,210	S/L	31.5		30,696
4	KITCHEN ADDITION	6/01/93		216,806							216,806	56,164	S/L	39		5,559
5	KITCHEN ADDITION	6/01/93		2,476							2,476	636	S/L	39		63
6	KITCHEN IMPROVEMENTS	3/01/96		26,000							26,000	25,000	S/L	5		0
7	BUILDING REMODEL	12/31/98		60,267							60,267	8,562	S/L	39		1,545
8	BUILDING REMODEL	3/29/99		49,902							49,902	6,773	S/L	39		1,280
9	DRAPES	4/27/99		3,987							3,987	3,135	S/L	7		570
10	KITCHEN CABINETS	5/13/99		3,600							3,600	472	S/L	39		92

# 2004 Federal Book Depreciation Schedule

6/30/05

Client 1003

BET-NAHRAN, INC

94-2398084

05:07PM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179 Bonus/Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reduction	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
11	CONSTRUCTION WORK	7/07/99		4,233							4,233	540	S/L	39		109
12	DRAPES	9/09/99		2,905							2,905	2,023	S/L	7		415
46	BUILD IMP-62 STALL LOT	10/01/01		52,254							52,254	9,581	S/L	15		3,484
51	AIR CONDITIONER	11/05/01		3,300							3,300	320	S/L	27.5		120
56	2 A/C ROOF UNITS	8/27/03		7,600							7,600	422	S/L	15		507
Total Buildings				1,400,260		0	0	0	0	0	1,400,260	480,432				44,440
Furniture and Fixtures																
19	FURNITURE & FIXTURES	9/01/92		74,271							74,271	74,261	S/L	7		0
20	OFFICE EQUIPMENT	9/01/92		7,636							7,636	7,635	S/L	7		0
21	CHAIR & DESKS	3/01/96		2,514							2,514	2,514	S/L	7		0
22	CHAIRS	3/13/99		17,881							17,881	14,047	S/L	7		2,554
40	PIANO	8/02/00		5,095							5,095	2,851	S/L	7		728
49	STAGE	8/03/01		3,037							3,037	1,771	S/L	5		607
54	FURNITURE	12/15/02		4,723							4,723	1,066	S/L	7		675
Total Furniture and Fixtures				115,157		0	0	0	0	0	115,157	102,142				4,564
Improvements																
13	GATE	2/15/00		16,200							16,200	4,725	S/L	15		1,080
14	GATE ADDITION	4/27/00		1,200							1,200	330	S/L	15		80
15	PARKING LOT IMPROVEMENTS	5/11/00		20,859							20,859	5,736	S/L	15		1,391
16	FENCE IMPROVEMENTS	5/17/00		5,000							5,000	1,374	S/L	15		333
17	LANDSCAPING	6/01/00		43,000							43,000	11,825	S/L	15		2,867
18	ADDITIONAL FENCE IMPROVEM	6/01/00		2,922							2,922	864	S/L	15		195
41	IMPROVEMENTS	9/15/00		19,185							19,185	1,886	S/L	39		492



2004 Federal Book Depreciation Schedule

Client 1003

BET-NAHRAN, INC

94-2398084

9/27/05

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179 Bonus/Sp. Depr.	Prior Dep. Bal.	Salvage /Basis Reduction	Depr. Basis	Prior Depr.	Months	Life	Rate	Current Depr.
42	IMPROVEMENTS	3/31/01		7,927							7,927	660	S/L	39		203
	Total Improvements			116,293	0	0	0	0	0	0	116,293	27,343				6,641
	Land															
39	LAND	7/01/92		5,000							5,000	0				0
	Total Land			5,000	0	0	0	0	0	0	5,000	0				0
	Machinery and Equipment															
23	BINGO EQUIPMENT	7/01/92		12,600							12,600	12,596	S/L	7		0
24	TV STUDIO EQUIPMENT	7/01/92		64,009							64,009	64,009	S/L	7		0
25	RADIO STATION EQUIPMENT	7/01/92		20,000							20,000	19,998	S/L	7		0
26	KITCHEN EQUIPMENT	12/27/97		18,417							18,417	18,417	S/L	5		0
27	TV-VARIOUS AND RADIO EQ	12/31/98		11,257							11,257	11,257	S/L	5		0
28	KITCHEN-WALK IN COOLER	12/31/98		19,498							19,498	15,312	S/L	7		2,785
29	RADIO SOUND SYSTEM	4/19/99		1,100							1,100	1,100	S/L	5		0
30	RADIO-STOOL	6/12/99		503							503	396	S/L	7		72
31	TV-WATER SOFTENER	11/21/99		5,680							5,680	3,751	S/L	7		811
32	RADIO ROUTING SYSTEM	10/13/99		22,121							22,121	14,615	S/L	7		3,160
33	TV STUDIO SET	2/15/00		1,550							1,550	967	S/L	7		221
34	TV COMPAQ ARAMDA E500	1/27/00		2,496							2,496	2,183	S/L	5		291
35	TV EPSON 660C PRINTER	1/27/00		160							160	146	S/L	5		20
36	TV HP LASERJET PRINTER	4/12/00		616							616	507	S/L	5		92
37	TV OMNI COMPUTER	6/01/00		1,151							1,151	945	S/L	5		202
38	TV TIGER DIRECT COMPUTER	6/01/00		911							911	751	S/L	5		160
43	BINGO EQUIPMENT	6/30/01		1,361							1,361	816	S/L	5		272

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2004 Federal Book Depreciation Schedule

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Client 1003

BET-NAHRAN, INC

94-2398084

9/27/05

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depri. Allow.	Prior 179/ Bonus/ Sp. Depri.	Prior Dec Bal. Depri.	Salvage /Basis Reduction	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
44	TV STUDIO EQUIPMENT	4/30/01		972							972	614	S/L	5		194
45	BINGO-CASH REGISTER	10/05/01		379							379	209	S/L	5		76
47	TV STAT-COMPUTER	9/26/01		4,999							4,999	2,728	S/L	5		992
48	TV STAT-COMPUTER	4/15/02		2,446							2,446	1,100	S/L	5		489
52	TV EQUIPMT-STATION KBSV	6/30/02		1,214							1,214	486	S/L	5		243
53	TV EQUIPMT-STATION KBSV	10/15/02		9,405							9,405	3,292	S/L	5		1,881
55	TV SYNECTIC TECH PHONES	11/05/03		3,309							3,309	441	S/L	5		662
58	TV EQUIPMENT	10/02/04		32,727							32,727		S/L	15		1,636
59	TV EQUIPMENT-ANTENNA	12/03/04		21,158							21,158		S/L	15		823
60	TV EQUIPMENT	12/03/04		43,368							43,368		S/L	15		1,687
61	KITCHEN-ICE MAKER	1/07/05		2,874							2,874		S/L	5		287
62	TV KEYWEST COLOR MESSAGIN	1/10/05		1,653							1,653		S/L	5		165
63	TV ANTENNA	2/09/05		1,880							1,880		S/L	5		157
64	TV EQUIPMENT	4/08/05		65,392							65,392		S/L	7		2,335
Total Machinery and Equipment											375,166	176,542				19,713
Total Depreciation											2,011,876	788,571				75,358
Grand Total Depreciation											2,153,399	838,011				79,486