## Form 990-EZ

## **Short Form**

2002

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

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 yeturn to satisfy state reporting requirements

Open to Public Inspection

A	For th	2002 calendar year, or tax year beginning // 0/ /2002, and	ending		12/3//2002		
B	Check If	applicable: Please C Name of organization		D Employ	er identification number		
	Address	change liabel or Korean War Educator Founda	Crais	27:	1408726		
	Name c	print or Number and street for D.O. hour if you is not be					
	Initial re	um true.	s) Room/suite		Telephone number		
	Final ret	m See III E. Houghton St.		12/7	1253-4620		
-	Amende	I PRINCE		E Enter A	-digit (GEN) ▶		
П	Applicat	on pending tions. TUSCO/an IL 61953		r cines 4	-digit (GEN)		
	• Sec	tion 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).		unting meth (specify)	nod: Cash C Accrual		
	Mah .	ite: > www-Koreanwar-ducator-ora			f the organization		
			- is not	required to			
7	Organi	zation type (check only one)— 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527	Sched	dule B (Fon	m 990, 990-EZ, or 990-PF).		
K	Check I	If the organization's gross receipts are normally not more than \$25,000. The organization received a Form 990 Package in the mail, it should file a return without financial displayed in the mail.	sization need	not file a re	eturn with the IRS; but if the		
L	Add line	s 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 ins	had of Form C	00 F7	- Complete retails		
	art I						
la cons	-	Revenue, Expenses, and Changes in Net Assets or Fund Balance					
500	1	Contributions, gifts, grants, and similar amounts received			1 1525.00		
933	2	Program service revenue including government fees and contracts		L	2   -		
20.5	3	Membership dues and assessments			3 -		
	4	Investment income .			4 -		
3-11	5a	Gross amount from sale of assets other than inventory					
	100						
	b		THE ACCULATION	- //	OWA .		
	C	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (al	tach schedu	ıle) . L	5c -		
2	6	Special events and activities (attach schedule):					
Revenu		Gross revenue (not including \$ of contributions					
2							
-							
23	D	Less: direct expenses other than fundraising expenses		- //			
	c	Net income or (loss) from special events and activities (line 6a less line 6b) .			6c		
33	7a	Gross sales of inventory, less returns and allowances		9			
00	b	Less: cost of goods sold					
30		Gross profit or (loss) from sales of inventory (line 7a less line 7b)	(A) (A) (A) (A) (A)		7c —		
	8	Other revenue (describe >			8 3.22		
	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)					
-					9 1528-22		
	10	Grants and similar amounts paid (attach schedule)			10 -		
	11	Benefits paid to er for members			11 -		
8	12	Salaries, other compensation, and employee benefits			12 —		
Expenses	13	Professional fees and other payments to independent contractors			13 -		
8	200			–	14 -		
3	14	Occupancy, rent, utilities, and maintenance					
- 1	15	Printing, publications, postage, and shipping			15 239-27		
	16	Other expenses (describe ▶			16 2102.26		
	17	Total expenses (add lines 10 through 16)		. 1	17 2341.53		
90	18	Excess or (deficit) for the year (line 9 less line 17)			18 (-813.31)		
Net Assets	19						
3	10	Net assets or fund balances at beginning of year (from line 27, column (A))	(must agree	with	19 857-20		
21	-	end-of-year figure reported on prior year's return)		The second secon			
٤ ا	20	Other changes in net assets or fund balances (attach explanation)			20 -		
	21	Net assets or fund balances at end of year (combine lines 18 through 20) .			1 43.89		
Pa	rt II	Balance Sheets—If Total assets on line 25, column (B) are \$250,000 or mo					
		(See page 39 of the Instructions.)	inning of year	(B) End of year			
22	Carl		7.20				
U.S. Hot					23 -		
23		l and buildings					
24		r assets (describe >)		24 -			
25	Tota	lassets	7-20				
26	Tota	l liabilities (describe ►)	•	26 -			
27	Net	assets or fund balances (line 27 of column (B) must agree with line 21)	7.20	27 43-89			

Part III	Statement of Program Service Accom	plishments (See page 3	9 of the instruction	ons.)		Expenses
What is th	ne organization's primary exempt purpose? _					quired for 501(c)(3)
Describe v	what was achieved in carrying out the organiz he services provided, the number of persons be	ation's exempt purposes. In nefited, or other relevant info	n a clear and con- ormation for each p	cise manner, program title.	and and opti	(4) organizations 4947(a)(1) trusts; onal for others.)
28 To	establish + maintain a	website w	ith williel	70	360	
	cets the public abou	+ + LE Warren	Mar + te			20.4
disse	minate information int	erview bets (	Grants \$		28a	2341.53
29		•••••	•••••			
	•		Grants \$	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	29a	
30						
					30a	
31 Other	program services (attach schedule)		Grants \$ Grants \$	1	31a	
	program service expenses (add lines 28a th			>	32	
Part IV	List of Officers, Directors, Trustees, and Key	Employees (List each one eve	n if not compensate	ed. See page 4	0 of th	e instructions.)
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contribution employee benefit deferred compe	ns to plans & essation	(E) Expense account and other allowances
Lypnin	ta Jean Brawn	CEO .		-		
INE.	Houghton St., Trescob,	L25 hours pla	0	0		0
Torma.	Jean Aldridge	Trustee -0	0	0		0
Denna	rdar Kay Herbert	- 1 -	0	0		0
210 W	oregon Uybana, IL	10215tec-0			- 20	
Part V	Other Information (Note the attachme					Yes No
	e organization engage in any activity not previously re					
	any changes made to the organizing or governing docum					
	organization had income from business activities					not
	ted on Form 990-T, attach a statement explaini					annount.
	e organization have unrelated business gross incom		notice, reporting, an	d proxy tax req	ureme	ints?
	es," has it filed a tax return on Form 990-T for					
	there a liquidation, dissolution, termination, or s				ateme	nt.)
	amount of political expenditures, direct or inc				-	
	he organization file Form 1120-POL for this					· · · · · · · · · · · · · · · · · · · ·
	he organization borrow from, or make any lo				were	any mining
	loans made in a prior year and still unpaid a					· · vumbdim
	s," attach the schedule specified in the line 38 i		-	38b	_	
	c)(7) organizations. Enter: a Initiation fees and	: :::::::::::::::::::::::::::::::::::	000 011 III 0 0 F	39a		
	s receipts, included on line 9, for public use			39b		
	(3) organizations. Enter: Amount of tax imposed of					
	on 4911 \(\rightarrow\); section 49 (3) and (4) organizations. Did the organization engineers		; section 4955		par or	did it
	ne aware of an excess benefit transaction from a p					
	nt of tax imposed on organization managers or disc					
	: Amount of tax on line 40c, above, reimburs					
41 List th	he states with which a copy of this return is file	d. ▶				
42 The b	books are in care of Lanaita_Jsc	in Brown	Telep	hone no. >	212	1253-460
	ted at >			ZIP+4 >		
43 Section	ion 4947(a)(1) nonexempt charitable trusts fili	ng Form 990-EZ in lieu of	Form 1041—Che	ck here	υ,	220
and e	I lively possibles of periors, I declare that I have examin				_	est of my knowledge
	Under penalties of perjury, I declare that I have examin and belief, it is true, correct, and complete. Declaration	of preparer (other than officer) is	based on all informati	on of which prep	arer ha	s any knowledge.
Please	E Lynnite & Brown 14/09					.3
Sign						
Here	Lunnita J. Broz	UN CEO				
	Type or print name and title.		120			
Paid	Preparer's signature	Date	Check if self-	-	's SSN	or PTIN (See Gan. Inst. W)
Preparer's	Firm's name (or yours )		employed	IN P	1	
Use Only	if self-employed), address, and ZIP + 4		F	Phone no. ► (	1	
		<b>A</b>			F	orm 990-EZ (2002)

## ATTACHED SCHEDULE Page 1 - Part I - Expenses Line 16

## Other Expenses:

Advertising	\$	42.00		
Website		\$1,406.70		
Office Products	\$	244.36		
Books	\$	63.10		
Filing fees	\$	23.00		
Furnishings	\$	72.00		
Memberships	\$	30.00		
Computer Fees & Maintenance	\$	221.10		
TOTAL =	\$2	,102.26		