

# Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

## 2002

Open to Public Inspection

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

**A** For the 2002 calendar year, or tax year period beginning **and ending**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C</b> Name of organization <b>THE ARK TRUST, INC.</b> <b>C/O HUMANE SOCIETY OF THE UNITED STATES</b> Number and street (or P O box if mail is not delivered to street address) Room/suite <b>2100 L STREET, N.W.,</b> City or town, state or country, and ZIP + 4 <b>WASHINGTON, DC 20037</b>	<b>D</b> Employer identification number <b>95-4327927</b>
		<b>E</b> Telephone number <b>301-258-3018</b>	<b>F</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)		

**G** Web site ▶ **WWW.ARKTRUST.ORG**

**J** Organization type (check only one) ▶  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.

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **881,702.**

### Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received					
	a	Direct public support	1a	298,238.			
	b	Indirect public support	1b				
	c	Government contributions (grants)	1c				
	d	Total (add lines 1a through 1c) (cash \$ 298,238. noncash \$ )	1d	298,238.			
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	395,514.			
	3	Membership dues and assessments	3				
	4	Interest on savings and temporary cash investments	4	6,061.			
	5	Dividends and interest from securities	5	901.			
	6a	Gross rents	6a				
	b	Less rental expenses	6b				
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c				
7	Other investment income (describe ▶ )	7					
Revenue	8a	Gross amount from sale of assets other than inventory	(A) Securities	180,988.	8a		
	b	Less cost or other basis and sales expenses		171,022.	8b		
	c	Gain or (loss) (attach schedule)		9,966.	8c		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))		STMT 2	8d	9,966.	
Revenue	9b1	Special events and activities (attach schedule)					
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a				
	b	Less direct expenses other than fundraising expenses	9b				
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
	a	Gross sales of inventory, less returns and allowances	10a				
	b	Less cost of goods sold	10b				
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				
		Other revenue (from Part VII, line 103)	11				
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	710,680.			
	Expenses	13	Program services (from line 44, column (B))	13	663,176.		
14		Management and general (from line 44, column (C))	14	69,222.			
15		Fundraising (from line 44, column (D))	15	83,514.			
16		Payments to affiliates (attach schedule)	16				
17		Total expenses (add lines 16 and 44, column (A))	17	815,912.			
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<105,232.>			
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	319,810.			
	20	Other changes in net assets or fund balances (attach explanation)	20	<214,578.>			
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	0.			

SEE STATEMENT 3

SCANNED DEC 17 2003

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**Part IV Balance Sheets**

**Note** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing	29,582.	45	
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable		47a	
	b Less allowance for doubtful accounts		47b	47c
	48 a Pledges receivable		48a	
	b Less allowance for doubtful accounts		48b	48c
	49 Grants receivable			49
	50 Receivables from officers, directors, trustees, and key employees			50
	51 a Other notes and loans receivable		51a	
	b Less allowance for doubtful accounts		51b	51c
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges	31,375.	53	
	54 Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV	305,411.	54	0.
	55 a Investments - land, buildings, and equipment basis		55a	
	b Less accumulated depreciation		55b	55c
56 Investments - other	2,702.	56	0.	
57 a Land, buildings, and equipment basis		57a		
b Less accumulated depreciation <b>STMT 9</b>	768.	57b	57c	
58 Other assets (describe <input type="checkbox"/> )			58	
<b>59 Total assets (add lines 45 through 58) (must equal line 74)</b>	<b>369,838.</b>	<b>59</b>	<b>0.</b>	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	50,028.	60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/> )			65
<b>66 Total liabilities (add lines 60 through 65)</b>	<b>50,028.</b>	<b>66</b>	<b>0.</b>	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	225,469.	67	0.
	68 Temporarily restricted	94,341.	68	0.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
<b>73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)</b>	<b>319,810.</b>	<b>73</b>	<b>0.</b>	
<b>74 Total liabilities and net assets / fund balances (add lines 66 and 73)</b>	<b>369,838.</b>	<b>74</b>	<b>0.</b>	

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.



THE ARK TRUST, INC.

C/O HUMANE SOCIETY OF THE UNITED STATES

95-4327927

Form 990 (2002)

Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	X	
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	X	
b	If "Yes," enter the name of the organization <u>SEE STATEMENT 11</u> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures See line 81 instructions	81a	0.
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	N/A
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed <u>CALIFORNIA</u>	90b	7
b	Number of employees employed in the pay period that includes March 12, 2002		
91	The books are in care of <u>BEVERLY KASKEY</u> Telephone no <u>(818) 501-2275</u>		
	Located at <u>5551 BALBOA BLVD, ENCINO, CA</u> ZIP + 4 <u>91316</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <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 page 31 of the instructions)

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>Note</b> Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a <b>GENESIS EVENT INCOME</b>					270,504.
b <b>GENESIS 16 TV INCOME</b>					125,010.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	6,061.	
96 Dividends and interest from securities			14	901.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	9,966.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		16,928.	395,514.
105 Total (add line 104, columns (B), (D), and (E))					412,442.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 32 of the instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	SEE STATEMENT 13

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 33 of the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

18/22  
 I am preparing this return and accompanying schedules and statements, and to the best of my knowledge and belief it is true and correct.  
 Signature of preparer: G. Thomas Waite, III CFO/Treasurer  
 Type or print name and title

**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

**2002**

**Supplementary Information-(See separate instructions.)**

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

Department of the Treasury  
Internal Revenue Service

Name of the organization **THE ARK TRUST, INC.**  
**C/O HUMANE SOCIETY OF THE UNITED STATES**

Employer identification number  
**95 4327927**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<b>NONE</b> -----				
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-----				
Total number of other employees paid over \$50,000 ▶	<b>0</b>			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<b>NONE</b> -----		
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-----		
Total number of others receiving over \$50,000 for professional services ▶	<b>0</b>	

THE ARK TRUST, INC.

Part III Statements About Activities (See page 2 of the instructions)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities $\blacktriangleright$ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	X	
e	Transfer of any part of its income or assets?		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)		X
4	Do you have a section 403(b) annuity plan for your employees?		X
<b>Note</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments			

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6  A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)

9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state  $\blacktriangleright$  \_\_\_\_\_

10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)

11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

12  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A.)

13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)



THE ARK TRUST, INC.

**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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	457,857.	638,622.	206,707.	359,232.	1,662,418.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	437,871.	489,573.	410,291.	409,700.	1,747,435.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	20,486.	31,980.	41,132.	47,828.	141,426.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	916,214.	1,160,175.	658,130.	816,760.	3,551,279.
24 Line 23 minus line 17	478,343.	670,602.	247,839.	407,060.	1,803,844.
25 Enter 1% of line 23	9,162.	11,602.	6,581.	8,168.	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 36,077.
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 1998 through 2001 exceeded the amount shown in line 26a Do not file this list with your return Enter the sum of all these excess amounts					26b 395,358.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 1,803,844.
d Add Amounts from column (e) for lines 18 141,426. 19 22 395,358.					26d 536,784.
e Public support (line 26c minus line 26d total)					26e 1,267,060.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 70.2422%
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year				N/A
(2001)	(2000)	(1999)	(1998)		
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					N/A
(2001)	(2000)	(1999)	(1998)		
c Add Amounts from column (e) for lines 15 16 17 20 21					27c N/A
d Add Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	27f N/A				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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

THE ARK TRUST, INC.

**Part V Private School Questionnaire** (See page 7 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		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? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)	32d	
_____			
_____			
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? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)	33h	
_____			
_____			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? 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	

**THE ARK TRUST, INC.**

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check  a if the organization belongs to an affiliated group Check  b if you checked "a" and "limited control" provisions apply

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

**Caution** If there is an amount on either line 43 or line 44, you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

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

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- 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)

Yes	No	Amount
		0.

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



Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	<b>MANAGEMENT AND GENERAL</b>											
1	EQUIPMENT	0611192SL		5.00	16	16,088.			16,088.	16,088.		0.
2	COMPUTER	0331193SL		5.00	16	3,760.			3,760.	3,760.		0.
3	EQUIPMENT	062794SL		5.00	16	861.			861.	861.		0.
4	EQUIPMENT	083194SL		5.00	16	1,905.			1,905.	1,905.		0.
5	EQUIPMENT	0311197SL		5.00	16	1,038.			1,038.	1,038.		0.
6	EQUIPMENT	100497SL		5.00	16	2,600.			2,600.	2,600.		0.
7	EQUIPMENT	120197SL		5.00	16	1,624.			1,624.	1,624.		0.
8	EQUIPMENT	063098SL		5.00	16	3,840.			3,840.	3,072.		768.
	* 990 PAGE 2 TOTAL											
	<b>MANAGEMENT AND GENERAL</b>											
	* GRAND TOTAL 990 PAGE					31,716.		0.	31,716.	30,948.	0.	768.
	2 DEPR					31,716.		0.	31,716.	30,948.	0.	768.

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FOOTNOTES

STATEMENT 1

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MERGER

ON AUGUST 21, 2002, THE ARK TRUST INC. MERGED INTO THE HUMANE SOCIETY OF THE UNITED STATES (HSUS). ALL ASSETS AND RELATED LIABILITIES WERE TRANSFERRED TO HSUS AT SUCH TIME.

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**FORM 990**                      **GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES**                      **STATEMENT 2**


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DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
MELLON	180,988.	171,022.	0.	9,966.
TO FORM 990, PART I, LINE 8	180,988.	171,022.	0.	9,966.

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**FORM 990**                      **OTHER CHANGES IN NET ASSETS OR FUND BALANCES**                      **STATEMENT 3**


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DESCRIPTION	AMOUNT
NET ASSETS TRANSFERED UPON MERGER-SEE FOOTNOTE	<181,156.>
CHANGE IN UNREALIZED GAINS-CURRENT YEAR	<33,422.>
TOTAL TO FORM 990, PART I, LINE 20	<214,578.>

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**FORM 990**                      **OTHER EXPENSES**                      **STATEMENT 4**


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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
OFFICE EXPENSE	15,953.	13,710.	1,437.	806.
PROFESSIONAL FEES	18,014.		18,014.	
INVESTMENT EXPENSE	827.		827.	
INSURANCE	14,753.	10,917.	3,541.	295.
COMPUTER EXPENSE	9,338.	8,025.	841.	472.
SELECT PROGRAM PROJECTS	16,594.	16,594.		
GENESIS 16 EXPENSE	247,057.	247,057.		
GENESIS 16 TV EXPENSE	175,616.	175,616.		
NEWSLETTER	3,186.	2,708.		478.
REPAIRS AND MAINTENANCE	3,008.		3,008.	
OTHER	7,041.	6,248.	508.	285.
TOTAL TO FM 990, LN 43	511,387.	480,875.	28,176.	2,336.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 5  
PART III

EXPLANATION

THE ARK TRUST INC., IS THE ONLY ANIMAL PROTECTION ORGANIZATION WHOSE PRIMARY FOCUS IS TO FACILITATE EXTENSIVE AND POSITIVE COVERAGE OF ANIMAL ISSUES BY THE MAJOR MEDIA. ITS ACTIVITIES CULMINATE IN THE GENESIS AWARDS CEREMONY WHICH ACKNOWLEDGES INDIVIDUALS IN THE MEDIA WHO HAVE RAISED PUBLIC AWARENESS OF ANIMAL ISSUES.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 6

DESCRIPTION OF PROGRAM SERVICE ONE

ON AN ANNUAL BASIS, A CEREMONY ATTENDED BY OVER 1,000 PEOPLE IS PRODUCED HONORING THE MAJOR MEDIA WHO HAVE SPOTLIGHTED ANIMAL ISSUES WITH COURAGE, CREATIVITY AND INTEGRITY, IN ORDER TO GENERATE PUBLICITY TO HELP ANIMALS WHILE ALSO INFLUENCING PUBLIC OPINION AND CREATING CHANGE.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	_____	_____
	_____	265,271.



FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 7

DESCRIPTION OF PROGRAM SERVICE TWO

THE SUBSEQUENT TELEVISION AIRINGS OF THE CEREMONY REACH APPROXIMATELY TWO MILLION PEOPLE, GENERATING PUBLICITY WORLDWIDE AND EXPOSING MANY TO ISSUES, SOME FOR THE FIRST TIME, ENCOURAGING COMPASSION FOR ANIMALS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE B	_____	232,111.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 8

DESCRIPTION OF PROGRAM SERVICE THREE

WE HAVE SUCCESSFULLY INITIATED AND PROPELLED EXPOSURE OF NUMEROUS ANIMAL PROTECTION ISSUES INTO THE MEDIA SPOTLIGHT. OUR VARIOUS OPERATIONS INCLUDE ISSUE ADVOCACY SUCH AS EXPOSING CRUELTY IN THE GREYHOUND RACING INDUSTRY TO MILLIONS OF PEOPLE, EXPOSING CRUEL TREATMENT OF CAPTIVE ELEPHANTS AND EXPOSING CRUELTY TO HORSES IN THE PRODUCTION OF HORMONE REPLACEMENT DRUGS; STREAMLINING SHELTER ADOPTION PROCEDURES (RED ALERT PROGRAM); PUBLISHING OP-ED PIECES AND LETTERS TO THE EDITOR AND INFLUENCING PUBLIC OPINION ON ANIMAL ISSUES.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE C	_____	165,794.

FORM 990

DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT

STATEMENT 9

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
EQUIPMENT	16,088.	16,088.	0.
COMPUTER	3,760.	3,760.	0.
EQUIPMENT	861.	861.	0.
EQUIPMENT	1,905.	1,905.	0.
EQUIPMENT	1,038.	1,038.	0.
EQUIPMENT	2,600.	2,600.	0.

EQUIPMENT	1,624.	1,624.	0.
EQUIPMENT	3,840.	3,840.	0.
TOTAL TO FORM 990, PART IV, LN 57	31,716.	31,716.	0.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GRETCHEN WYLER 5551 BALBOA BLVD ENCINO, CA 91316	PRESIDENT 50	72,000.	0.	0.
ELAINE LIVESEY-FASSEL 5551 BALBOA BLVD ENCINO, CA 91316	VP (UP TO 8-21-02) 1	0.	0.	0.
RICHARD L. SEGAL 5551 BALBOA BLVD ENCINO, CA 91316	DIRECTOR 1	0.	0.	0.
GEORGE W. TOWNSON 5551 BALBOA BLVD ENCINO, CA 91316	TREASURER (UP TO 8-21-02) 1	0.	0.	0.
DAVID BALE 5551 BALBOA BLVD ENCINO, CA 91316	DIRECTOR 1	0.	0.	0.
HARRY COPLAN 5551 BALBOA BLVD ENCINO, CA 91316	DIRECTOR 1	0.	0.	0.
NORA FRASER 5551 BALBOA BLVD ENCINO, CA 91316	DIRECTOR 1	0.	0.	0.
LINDA J. RETZ 5551 BALBOA BLVD ENCINO, CA 91316	DIRECTOR 1	0.	0.	0.
KIRK J. RETZ 5551 BALBOA BLVD ENCINO, CA 91316	DIRECTOR 1	0.	0.	0.

BEVERLY KASKEY 5551 BALBOA BLVD ENCINO, CA 91316	SENIOR VICE PRESIDENT 50	62,400.	0.	0.
MICHELE MARTINEZ-HIXON 5551 BALBOA BLVD ENCINO, CA 91316	DIRECTOR 1	0.	0.	0.
PAUL IRWIN 2100 L. STREET, N.W. WASHINGTON DC 20037	VP (POST 8-21-02) 1	0.	0.	0.
PATRICIA FORKAN 2100 L. STREET, N.W. WASHINGTON DC 20037	SECRETARY 1	0.	0.	0.
G. THOMAS WAITE, III 2100 L. STREET, N.W. WASHINGTON DC 20037	TREASURER (POST 8-21-02) 1	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		134,400.	0.	0.

FORM 990 IDENTIFICATION OF RELATED ORGANIZATIONS STATEMENT 11  
PART VI, LINE 80B

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
THE HUMANE SOCIETY OF THE UNITED STATES	X	
THE HUMANE SOCIETY OF THE UNITED STATES WILDLIFE LAND TRUST	X	
THE HUMANE SOCIETY INTERNATIONAL	X	
THE NATIONAL ASSOCIATION FOR HUMANE AND ENVIRONMENTAL EDUCATION	X	
THE CENTER FOR RESPECT OF LIFE AND THE ENVIRONMENT	X	
EARTHVOICE INTERNATIONAL	X	
EARTHKIND USA	X	
MEADOWCREEK, INC.	X	
WORLDWIDE NETWORK, INC.	X	

FORM 990 STATEMENT CONCERNING LIQUIDATION,  
TERMINATION, ETC. - PART VI, LINE 79 STATEMENT 12

EXPLANATION

SEE FOOTNOTE REGARDING MERGER

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO  
ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 13

LINE      EXPLANATION OF RELATIONSHIP OF ACTIVITIES

93      BELIEVING THE MAJOR MEDIA IS THE MOST POWERFUL EDUCATOR OF THE MASSES, OUR ORGANIZATION ENCOURAGES AND AWARDS INDIVIDUALS IN THE MEDIA AND ARTS COMMUNITY FOR PRODUCING THOSE WORKS WHICH RAISE PUBLIC CONSCIOUSNESS ON ISSUES OF ANIMAL ABUSE AND EXPLOITATION. THE WINNERS ARE HONORED AT AN ANNUAL CEREMONY WHICH IS ATTENDED BY OVER 1,000 PEOPLE AND VIDEOTAPED FOR AIRING SEEN BY AN AUDIENCE OF APPROXIMATELY TWO MILLION PEOPLE. WE BELIEVE THE ARK TRUST, INC.'S PURPOSE IS FULFILLED BY INFORMING AND EDUCATING SO MANY INDIVIDUALS WITH OUR MESSAGE OF COMPASSION FOR ANIMALS.

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

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

**Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.**

Type or print. File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <b>THE ARK TRUST, INC.</b>	Employer identification number <b>95-4327927</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>5551 BALBOA BOULEVARD</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>ENCINO, CA 91316</b>	

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

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

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

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

4 I request an additional 3-month extension of time until November 17, 2003.

5 For calendar year 2002, or other tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_

6 If this tax year is for less than 12 months, check reason:  Initial return     Final return     Change in accounting period

7 State in detail why you need the extension  
**ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION TO COMPLETE THE RETURN.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ \_\_\_\_\_

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. \$ \_\_\_\_\_

c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ N/A

**Signature and Verification**

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

Signature: *John Woodson* Title: CPA Date: 8/15/03

**Notice to Applicant - To Be Completed by the IRS**

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

Director \_\_\_\_\_ By: \_\_\_\_\_ Date \_\_\_\_\_

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

Type or print. 223132 05-22-02	Name <b>CALIBRE CPA GROUP PLLC</b>
	Number and street (includes suite, room, or apt. no.) Or a P.O. box number <b>900 17TH STREET, N.W.</b>
	City or town, province or state, and country (including postal or ZIP code) <b>WASHINGTON, DC 20006</b>