

The Dove Foundation

RETURN OF TAX EXEMPT ORGANIZATION
(KEEP FOR YOUR RECORDS)

April 30, 2005

STERK, EDWARDS, SOLOMON & CO., P.C.

Certified Public Accountants

-00000-

2432 Camelot Court S.E.

Grand Rapids, MI 49546-6001

Tel. (616) 956-1888

Form **990**

OMB No. 1545-0047

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)

2004

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 5/01/04, and ending 4/30/05

| | | |
|---|--|--|
| B Check if applicable: <input 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 | C Name of organization THE DOVE FOUNDATION Number and street (or P.O. box if mail is not delivered to street address) Room/suite 535 EAST FULTON 1A City or town, state or country, and ZIP + 4 GRAND RAPIDS MI 49503 | D Employer identification no. 38-3040503 |
| | | E Telephone number 616-454-5021 |
| Please use IRS label or print or type. See Specific Instructions. | | F 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 Website: WWW.DOVE.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.**

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates
H(c) Are all affiliates included? Yes No (If "No," att. a list. See instr.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **432,454**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

| | | | | | |
|---|---|------------|----------------|----------------|--|
| R e v e n u e | 1 Contributions, gifts, grants, and similar amounts received: | | | | |
| | a Direct public support | 1a | 408,050 | | |
| | b Indirect public support | 1b | | | |
| | c Government contributions (grants) | 1c | | | |
| | d Total (add lines 1a through 1c) (cash \$ 390,183 noncash \$ 17,867) | 1d | | 408,050 | |
| | 2 Program service revenue including government fees and contracts (from Part VII, line 93) | 2 | | 23,792 | |
| | 3 Membership dues and assessments | 3 | | | |
| | 4 Interest on savings and temporary cash investments | 4 | | 162 | |
| | 5 Dividends and interest from securities | 5 | | | |
| | 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 | | | | |
| 8a Gross amount from sales of assets other than inventory | (A) Securities | 8a | | | |
| | (B) Other | 8b | | | |
| | Less: cost or other basis and sales expenses | 8c | | | |
| | d Net gain or (loss) (combine line 8c, columns (A) and (B)) | 8d | | | |
| 9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/> | 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 | | | |
| 10a Gross sales of inventory, less returns and allowances | | 10a | 450 | | |
| | b Less: cost of goods sold | 10b | | | |
| | c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) STMT 1 | 10c | | 450 | |
| 11 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 | | 432,454 | | |
| E x p e n s e s | 13 Program services (from line 44, column (B)) | 13 | | 221,083 | |
| | 14 Management and general (from line 44, column (C)) | 14 | | 66,983 | |
| | 15 Fundraising (from line 44, column (D)) | 15 | | 19,305 | |
| | 16 Payments to affiliates (attach schedule) | 16 | | | |
| | 17 Total expenses (add lines 16 and 44, column (A)) | 17 | | 307,371 | |
| A s s e t s | 18 Excess or (deficit) for the year (subtract line 17 from line 12) | 18 | | 125,083 | |
| | 19 Net assets or fund balances at beginning of year (from line 73, column (A)) | 19 | | 33,069 | |
| | 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, 19, and 20) | 21 | | 158,152 | |

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. (See page 22 of the instructions.)

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include 22 Grants and allocations, 23 Specific assistance to individuals, 24 Benefits paid to or for members, 25 Compensation of officers, directors, etc., 26 Other salaries and wages, 27 Pension plan contributions, 28 Other employee benefits, 29 Payroll taxes, 30 Professional fundraising fees, 31 Accounting fees, 32 Legal fees, 33 Supplies, 34 Telephone, 35 Postage and shipping, 36 Occupancy, 37 Equipment rental and maintenance, 38 Printing and publications, 39 Travel, 40 Conferences, conventions, and meetings, 41 Interest, 42 Depreciation, depletion, etc. (attach schedule), 43 Other expenses not covered above (itemize): a, b SEE STATEMENT 2, c, d, e, 44 Total functional expenses (add lines 22 - 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15

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 [X] 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 (See page 25 of the instructions.)

What is the organization's primary exempt purpose?

TO PROMOTE FAMILY FRIENDLY ENTERTAINMENT.

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

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

Table with 2 columns: Description, Program Service Expenses. Rows include a SEE STATEMENT 3 (67,943), b SEE STATEMENT 4 (58,516), c SEE STATEMENT 5 (76,479), d SEE STATEMENT 6 (18,145), e Other program services (attach schedule), f Total of Program Service Expenses (should equal line 44, column (B), Program services) 221,083

Part IV Balance Sheets (See page 25 of the 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 |
|---|--|--------------------------|------------|--------------------|
| A | 45 Cash-non-interest-bearing | 19,700 | 45 | 77,235 |
| | 46 Savings and temporary cash investments | | 46 | 80,050 |
| | 47a Accounts receivable | 4,100 | | |
| | b Less: allowance for doubtful accounts | | 47c | 4,100 |
| | 48a Pledges receivable | | 48c | |
| | b Less: allowance for doubtful accounts | | 48c | |
| | 49 Grants receivable | | 49 | |
| | 50 Receivables from officers, directors, trustees, and key employees (attach schedule) | | 50 | |
| s | 51a Other notes and loans receivable (attach schedule) | | | |
| | b Less: allowance for doubtful accounts | | 51c | |
| s | 52 Inventories for sale or use | | 52 | |
| s | 53 Prepaid expenses and deferred charges | | 53 | 4,000 |
| | 54 Investments-securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV | | 54 | |
| | 55a Investments-land, buildings, and equipment: basis | | | |
| | b Less: accumulated depreciation (attach schedule) | | 55c | |
| | 56 Investments-other (attach schedule) | | 56 | |
| | 57a Land, buildings, and equipment: basis | 17,758 | | |
| | b Less: accumulated depreciation (attach schedule) SEE STATEMENT 7 | 16,891 | 57c | 867 |
| | 58 Other assets (describe <input type="checkbox"/>) | | 58 | |
| | 59 Total assets (add lines 45 through 58) (must equal line 74) | 73,442 | 59 | 166,252 |
| L | 60 Accounts payable and accrued expenses | 5,373 | 60 | 6,720 |
| i | 61 Grants payable | | 61 | |
| a | 62 Deferred revenue SEE STATEMENT 8 | | 62 | 1,380 |
| b | 63 Loans from officers, directors, trustees, and key employees (attach schedule) | | 63 | |
| i | 64a Tax-exempt bond liabilities (attach schedule) | | 64a | |
| t | b Mortgages and other notes payable (attach schedule) | | 64b | |
| i | 65 Other liabilities (describe <input type="checkbox"/> SEE STATEMENT 9) | 35,000 | 65 | |
| e | 66 Total liabilities (add lines 60 through 65) | 40,373 | 66 | 8,100 |
| s | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74. | | | |
| N | 67 Unrestricted | 33,069 | 67 | 158,152 |
| F | 68 Temporarily restricted | | 68 | |
| e | 69 Permanently restricted | | 69 | |
| u | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74. | | | |
| n | 70 Capital stock, trust principal, or current funds | | 70 | |
| d | 71 Paid-in or capital surplus, or land, building, and equipment fund | | 71 | |
| A | 72 Retained earnings, endowment, accumulated income, or other funds | | 72 | |
| s | 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) | 33,069 | 73 | 158,152 |
| B | 74 Total liabilities and net assets / fund balances (add lines 66 and 73) | 73,442 | 74 | 166,252 |

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

| Part IV-A | Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.) | Part IV-B | Reconciliation of Expenses per Audited Financial Statements with Expenses per Return |
|------------------|--|------------------|--|
| a | Total revenue, gains, and other support per audited financial statements ▶ a 432,454 | a | Total expenses and losses per audited financial statements ▶ a 307,371 |
| b | Amounts included on line a but not on line 12, Form 990: | b | Amounts included on line a but not on line 17, Form 990: |
| (1) | Net unrealized gains on investments \$ | (1) | Donated services and use of facilities \$ |
| (2) | Donated services and use of facilities \$ | (2) | Prior year adjustments reported on line 20, Form 990 \$ |
| (3) | Recoveries of prior year grants \$ | (3) | Losses reported on line 20, Form 990 \$ |
| (4) | Other (specify): \$ | (4) | Other (specify): \$ |
| | Add amounts on lines (1) through (4) ▶ b | | Add amounts on lines (1) through (4) ▶ b |
| c | Line a minus line b ▶ c 432,454 | c | Line a minus line b ▶ c 307,371 |
| d | Amounts included on line 12, Form 990 but not on line a : | d | Amounts included on line 17, Form 990 but not on line a : |
| (1) | Investment expenses not included on line 6b, Form 990 \$ | (1) | Investment expenses not included on line 6b, Form 990 \$ |
| (2) | Other (specify): \$ | (2) | Other (specify): \$ |
| | Add amounts on lines (1) and (2) ▶ d | | Add amounts on lines (1) and (2) ▶ d |
| e | Total revenue per line 12, Form 990 (line c plus line d) ▶ e 432,454 | e | Total expenses per line 17, Form 990 (line c plus line d) ▶ e 307,371 |

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (If not paid, enter -0-) | (D) Contrib. to employee benefit plans & deferred compensation | (E) Expense account and other allowances |
|---|--|---|--|--|
| RICHARD ROLFE 4154 RADSTOCK DR. DORR MI 49323 | CHAIRMAN 40 | 22,350 | 866 | 0 |
| DAR VANDERARK 798 144TH AVE WAYLAND MI 49348 | SECRETART/TR | 0 | 0 | 0 |
| JANIS PETRINI 8460 BUTTERVIEW GRAND RAPI MI 49315 | DIRECTOR | 0 | 0 | 0 |
| BOB BRATT 618 N 50 WEST TETONIA ID 83452 | DIRECTOR | 0 | 0 | 0 |
| KEITH LANG 749 WOODMEADE CT GRAND RAPI MI 49506 | DIRECTOR | 0 | 0 | 0 |
| RONALD LUBBERS 4827 PINEMONT CT BELMONT MI 49306 | DIRECTOR | 0 | 0 | 0 |
| GORDON TOERING 1271 ASTRO COURT JENISON MI 49428 | DIRECTOR | 0 | 0 | 0 |
| DAVID LUKENS 420 ROSEWOOD SE GRAND RAPI MI 49506 | EXE.DIRECTOR 40 | 54,426 | 1,546 | 0 |
| | | | | |
| | | | | |

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? ▶ Yes No
If "Yes," attach schedule-see page 28 of the instructions.

| Part VI Other Information (See page 28 of the instructions.) | | Yes | No |
|--|--|-----|-----|
| 76 | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity | 76 | X |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. | 77 | X |
| 78a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 78a | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 78b | |
| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement | 79 | X |
| 80a | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? | 80a | X |
| b | If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt. | | |
| 81a | Enter direct and indirect political expenditures. See line 81 instructions | 81a | |
| b | Did the organization file Form 1120-POL for this year? | 81b | X |
| 82a | 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 | |
| 83a | 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 | N/A |
| 84a | 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 | |
| d | Section 162(e) lobbying and political expenditures | 85d | |
| e | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices | 85e | |
| f | Taxable amount of lobbying and political expenditures (line 85d less 85e) | 85f | |
| 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) orgs. Enter: a Initiation fees and capital contributions included on line 12 | 86a | |
| b | Gross receipts, included on line 12, for public use of club facilities | 86b | |
| 87 | 501(c)(12) orgs. Enter: a Gross income from members or shareholders | 87a | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) | 87b | |
| 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 |
| 89a | 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) orgs. 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 |
| 90a | List the states with which a copy of this return is filed <u>MI</u> | | |
| b | Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) | 90b | 5 |
| 91 | The books are in care of <u>DAVID LUKENS</u> Telephone no. <u>616-454-5021</u> Located at <u>GRAND RAPIDS, MI</u> ZIP + 4 <u>49503</u> | | |
| 92 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year | 92 | |

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

| | Unrelated business income | | Excluded by sec. 512, 513, or 514 | | (E) Related or exempt function income |
|--|---------------------------|---------------|-----------------------------------|---------------|--|
| | (A) Business code | (B) Amount | (C) Exclusion code | (D) Amount | |
| Note: Enter gross amounts unless otherwise indicated. | | | | | |
| 93 Program service revenue: | | | | | |
| a PROGRAM SERVICE REVENUE | | | | | 23,792 |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| f Medicare/Medicaid payments | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 94 Membership dues and assessments | | | | | |
| 95 Interest on savings and temporary cash investments | | | 14 | | 162 |
| 96 Dividends and interest from securities | | | | | |
| 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 | | | | | |
| 101 Net income or (loss) from special events | | | | | |
| 102 Gross profit or (loss) from sales of inventory | | | | | 450 |
| 103 Other revenue: a _____ | | | | | |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| 104 Subtotal (add columns (B), (D), and (E)) | | 0 | | 0 | 24,404 |
| 105 Total (add line 104, columns (B), (D), and (E)) | | | | | 24,404 |

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

| Line No. | Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). |
|------------|---|
| N/A | |
| | |
| | |

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

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

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here

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.

Signature of officer: **DAVID LUKENS** Date: _____
 Type or print name and title: **EXECUTIVE DIRECTOR**

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed: Preparer's SSN or PTIN (See Gen. Instr. W): **268-46-3156**

Firm's name (or yours if self-employed), address, and ZIP + 4: **STERK EDWARDS SOLOMON & CO., PC, CPA'S**
2432 CAMELOT CT. SE
GRAND RAPIDS, MI 49546-6001 EIN: **38-2150780** Phone no.: **616-956-1888**

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No. 1545-0047

2004

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

Employer identification number

THE DOVE FOUNDATION

38-3040503

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 empl. ben. plans & deferred comp. | (e) Expense account and other allowances |
|---|--|------------------|--|--|
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Total number of other employees paid over \$50,000 ▶

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

| (a) Name and address of each independent contractor paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Total number of others receiving over \$50,000 for professional services ▶

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

Schedule A (Form 990 or 990-EZ) 2004

Part III Statements About Activities (See page 2 of the instructions.)

Table with 3 columns: Question, Yes, No. Rows include: 1. During the year, has the organization attempted to influence national, state, or local legislation... 2. During the year, has the organization, either directly or indirectly, engaged in any of the following acts... 3a-3b. Do you make grants for scholarships... 4a-4b. Did you maintain any separate account for participating donors...

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

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

- 5 [] A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
6 [] A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
7 [] A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
8 [] A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
9 [] A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
10 [] An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
11a [X] 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.)

Table with 2 columns: (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.)

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.

Table with columns for years (2003, 2002, 2001, 2000) and Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends; 19 Net income from unrelated business activities; 20 Tax revenues levied; 21 Value of services or facilities furnished; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12; 28 Unusual Grants.

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

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

| | N/A | Yes | No |
|--|-----|-----|----|
| 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | 29 | | |
| 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | 30 | | |
| 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? | 31 | | |
| 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? | 34b | | |
| If you answered "Yes" to either 34a or b, please explain using an attached statement. | | | |
| 35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation | 35 | | |

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

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

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

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

Table with columns for line numbers (36-44), descriptions of lobbying expenditures, and columns (a) Affiliated group totals and (b) To be completed for ALL electing organizations.

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.)

Table titled 'Lobbying Expenditures During 4-Year Averaging Period' with columns for Calendar year (or fiscal year beginning in) and sub-columns (a) 2004, (b) 2003, (c) 2002, (d) 2001, and (e) Total.

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.)

Table with columns Yes, No, and Amount for each activity listed in the previous block.

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 page 11 of the 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

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 3 columns: Question, Yes, No. Rows include 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c. 'No' column contains 'X' for all rows.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 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. Row 1 contains 'N/A'.

Depreciation and Amortization

OMB No. 1545-0172

Form 4562

(Including Information on Listed Property)

2004

Department of the Treasury Internal Revenue Service

See separate instructions.

Attach to your tax return.

Attachment Sequence No. 67

Name(s) shown on return

THE DOVE FOUNDATION

Identifying number

38-3040503

Business or activity to which this form relates

VIDEO/DOVE SEALS

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 rows for Part I. Line 1: 102,000; Line 3: 410,000; Line 13: 13.

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

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

Table with 3 rows for Part II. Line 16: 1,010.

Part III MACRS Depreciation (Do not include listed property.) (See page 5 of the instructions.)

Section A

Table with 2 rows for Section A. Line 17: 0.

Section B-Assets Placed in Service During 2004 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows 19a-g, h, i.

Section C-Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System

Table with 6 columns: (a) Class life, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows 20a, b, c.

Part IV Summary (see page 8 of the instructions)

Table with 3 rows for Part IV. Line 22: 1,010; Line 23: 23.

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2004)

Federal Statements

Statement 1 - Form 990, Line 10c - Sales of Inventory

| <u>Description</u> | <u>Gross Sales</u> | <u>COGS</u> | <u>Gross Profit</u> |
|--------------------|------------------------|-------------|-------------------------|
| VIDEO/DOVE SEALS | \$ 450 | \$ | \$ 450 |
| TOTAL | <u>\$ 450</u> | <u>\$ 0</u> | <u>\$ 450</u> |

Federal Statements

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

| Description | Total Expenses | Program Service | Mgt & General | Fund- Raising |
|------------------------------|-------------------|--------------------|------------------|------------------|
| | \$ | \$ | \$ | \$ |
| EXPENSES | | | | |
| EQUIPMENT | 6,914 | 4,591 | 1,452 | 871 |
| LEASES | -1,724 | -1,145 | -362 | -217 |
| BANK FEES | 571 | 379 | 120 | 72 |
| PROPERTY & LIABILITY INS. | 2,436 | | 2,436 | |
| TRAVEL, MEALS, ENTERTAINMENT | 533 | 485 | 30 | 18 |
| DUES AND SCUBSCRIPTIONS | 914 | 445 | 469 | |
| CONTRACT LABOR | 3,208 | 2,273 | 935 | |
| ENTERTAINMENT | 1 | | 1 | |
| WEB SERVICES EXPENSE | 791 | 96 | | 695 |
| PROJECTS | 54,350 | 45,968 | | 8,382 |
| OTHER EXPENSES | 42,413 | 28,162 | 8,907 | 5,344 |
| PROGRAM RELATED | 7,500 | 7,500 | | |
| MISC | -1 | 517 | -616 | 98 |
| TOTAL | <u>\$ 117,906</u> | <u>\$ 89,271</u> | <u>\$ 13,372</u> | <u>\$ 15,263</u> |

Statement 3 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

STATEMENT 3: FILM

THE DOVE FOUNDATION BUILDS AND MAINTAINS RELATIONSHIPS WITH FILM DISTRIBUTORS AND MAJOR MOTION PICTURE STUDIOS COMMUNICATING FAMILY AUDIENCE DESIRES CONCERNING FILM CONTENT. DOVE PROVIDES REVIEWS OF FILMS/DVD'S ON ITS WEB SITE PROVIDING FAMILIES WITH MEANINGFUL FILM CONTENT INFORMATION.

Statement 4 - Form 990, Part III, Line b - Statement of Program Service Accomplishments

STATEMENT 4: NATIONAL

DOVE CONDUCTS AN ONGOING OPINION POLL TO REACH FAMILIES AROUND THE COUNTRY ASKING ABOUT THEIR FEELINGS ON CONTENT ISSUES. DOVE ALSO INFORMS THE PUBLIC AS TO HOW THEY CAN HELP IN GETTING MORE FAMILY ENTERTAINMENT MADE. DOVE ALSO PROVIDES A CLEAN, UPLIFTING ALTERNATIVE TO HOSPITALIZED CHILDREN THROUGHOUT THE NATION.

Federal Statements

Statement 5 - Form 990, Part III, Line c - Statement of Program Service Accomplishments

STATEMENT 5: OUTREACH

DOVE'S OUTREACH IS AIMED AT BOTH THE GENERAL PUBLIC AND THE ENTERTAINMENT INDUSTRY. THROUGH THE ROI STUDY, BROCHURE DEVELOPMENT AND PUBLIC RELATIONS EFFORTS, DOVE CAN REACH INDUSTRY LEADERS AS TO WHAT THE FAMILY AUDIENCE WANTS. THROUGH DOVE'S MEMBERSHIP, PUBLIC RELATIONS AND BROCHURES IT CAN REACH THE FAMILY AUDIENCE INFORMING THEM AS TO WHAT HOLLYWOOD IS PRODUCING AIMED AT THEM AND HOW THEIR VIEWS CAN BE HEARD.

Statement 6 - Form 990, Part III, Line d - Statement of Program Service Accomplishments

STATEMENT 6: REGIONAL

DOVE HAS REGIONAL PROGRAMS THAT BRING FAMILIES AND WHOLESOME ENTERTAINMENT TOGETHER. FREE TO KIDS 12 AND UNDER THE DOVE FAMILY FILM FESTIVAL ALLOWS KIDS AND THEIR PARENTS TO SEE ENTERTAINING UPLIFTING FILMS AT A FAR REDUCED RATE. DOVE'S MARATHONS ALLOWS KIDS TO LEARN DISCERNMENT IN THEIR VIEWING HABITS THROUGH SEEING AND TALKING ABOUT WHAT MAKES A DECENT FAMILY FILM.

Federal Statements

Statement 7 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

| Description | Beginning of Year | Accum Deprec | End of Year | Accum Deprec |
|----------------------|----------------------|-----------------|----------------|-----------------|
| COMPUTER EQUIPMENT | \$ 97,434 | \$ 57,052 | \$ | \$ |
| FURNITURE & FIXTURES | | | 2,880 | 2,880 |
| | | | 14,878 | 14,011 |
| TOTAL | \$ 97,434 | \$ 57,052 | \$ 17,758 | \$ 16,891 |

Statement 8 - Form 990, Part IV, Line 62 - Deferred Revenue

| Description | Beginning of Year | End of Year |
|------------------|----------------------|----------------|
| DEFERRED REVENUE | \$ | \$ 1,380 |
| TOTAL | \$ 0 | \$ 1,380 |

Statement 9 - Form 990, Part IV, Line 65 - Other Liabilities

| Description | Beginning of Year | End of Year |
|--------------|----------------------|----------------|
| NOTE PAYABLE | \$ 35,000 | \$ |
| TOTAL | \$ 35,000 | \$ 0 |

0968 The Dove Foundation
 38-3040503
 FYE: 4/30/2005

Federal Asset Report Video/Dove Seals

| Asset | Description | Date In Service | Cost | Bus % | Sec 179 | Sec 168(k) | Basis for Depr | PerConv Meth | Prior | Current |
|--|------------------------------|--------------------|---------------|----------|------------|---------------|-------------------|--------------|---------------|--------------|
| Other Depreciation: | | | | | | | | | | |
| 1 | Furniture | 5/22/00 | 3,035 | | | | 3,035 | 7 MO S/L | 1,734 | 434 |
| 2 | Booth | 1/26/93 | 1,200 | | | | 1,200 | 7 MO S/L | 1,200 | 0 |
| 3 | Derse Exhibit - Hall of Fame | 4/28/95 | 10,643 | | | | 10,643 | 7 MO S/L | 10,643 | 0 |
| 4 | Sony VAIO Laptop | 1/29/00 | 2,880 | | | | 2,880 | 5 MO S/L | 2,304 | 576 |
| Total Other Depreciation | | | <u>17,758</u> | | | | <u>17,758</u> | | <u>15,881</u> | <u>1,010</u> |
| Total ACRS and Other Depreciation | | | <u>17,758</u> | | | | <u>17,758</u> | | <u>15,881</u> | <u>1,010</u> |
| Grand Totals | | | 17,758 | | | | 17,758 | | 15,881 | 1,010 |
| Less: Dispositions | | | <u>0</u> | | | | <u>0</u> | | <u>0</u> | <u>0</u> |
| Net Grand Totals | | | <u>17,758</u> | | | | <u>17,758</u> | | <u>15,881</u> | <u>1,010</u> |

0968 The Dove Foundation
 38-3040503
 FYE: 4/30/2005

MI Asset Report Video/Dove Seals

| Asset | Description | Date In Service | Cost | Basis for Depr | MI Prior | MI Current | Federal Current | Difference Fed - MI |
|--|------------------------------|--------------------|---------------|-------------------|---------------|---------------|--------------------|------------------------|
| Other Depreciation: | | | | | | | | |
| 1 | Furniture | 5/22/00 | 3,035 | 3,035 | 1,734 | 0 | 434 | 434 |
| 2 | Booth | 1/26/93 | 1,200 | 1,200 | 1,200 | 0 | 0 | 0 |
| 3 | Derse Exhibit - Hall of Fame | 4/28/95 | 10,643 | 10,643 | 10,643 | 0 | 0 | 0 |
| 4 | Sony VAIO Laptop | 1/29/00 | 2,880 | 2,880 | 2,304 | 576 | 576 | 0 |
| Total Other Depreciation | | | <u>17,758</u> | <u>17,758</u> | <u>15,881</u> | <u>576</u> | <u>1,010</u> | <u>434</u> |
| Total ACRS and Other Depreciation | | | <u>17,758</u> | <u>17,758</u> | <u>15,881</u> | <u>576</u> | <u>1,010</u> | <u>434</u> |
| Grand Totals | | | 17,758 | 17,758 | 15,881 | 576 | 1,010 | 434 |
| Less: Dispositions | | | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| Net Grand Totals | | | <u>17,758</u> | <u>17,758</u> | <u>15,881</u> | <u>576</u> | <u>1,010</u> | <u>434</u> |

0968 The Dove Foundation
 38-3040503
 FYE: 4/30/2005

AMT Asset Report Video/Dove Seals

| Asset | Description | Date In Service | Cost | Bus % | Sec 179 | Sec 168(k) | Basis for Depr | PerConv Meth | Prior | Current |
|----------------------------|--|--------------------|--------------|----------|------------|---------------|-------------------|--------------|--------------|------------|
| Prior MACRS: | | | | | | | | | | |
| 1 | Furniture | 5/22/00 | 3,035 | | | | 3,035 | 7 HY 200DB | 1,734 | 372 |
| | | | <u>3,035</u> | | | | <u>3,035</u> | | <u>1,734</u> | <u>372</u> |
| Other Depreciation: | | | | | | | | | | |
| 2 | Booth | 1/26/93 | 0 | | | | 0 | 0 HY | 0 | 0 |
| 3 | Derse Exhibit - Hall of Fame | 4/28/95 | 0 | | | | 0 | 0 HY | 0 | 0 |
| 4 | Sony VAIO Laptop | 1/29/00 | 0 | | | | 0 | 0 HY | 0 | 0 |
| | Total Other Depreciation | | <u>0</u> | | | | <u>0</u> | | <u>0</u> | <u>0</u> |
| | Total ACRS and Other Depreciation | | <u>0</u> | | | | <u>0</u> | | <u>0</u> | <u>0</u> |
| | Grand Totals | | 3,035 | | | | 3,035 | | 1,734 | 372 |
| | Less: Dispositions | | <u>0</u> | | | | <u>0</u> | | <u>0</u> | <u>0</u> |
| | Net Grand Totals | | <u>3,035</u> | | | | <u>3,035</u> | | <u>1,734</u> | <u>372</u> |

0968 The Dove Foundation

38-3040503

FYE: 4/30/2005

Depreciation Adjustment Report

All Business Activities

| <u>Form</u> | <u>Unit</u> | <u>Asset</u> | <u>Description</u> | <u>Tax</u> | <u>AMT</u> | <u>AMT Adjustments/ Preferences</u> |
|--|-------------|--------------|--------------------|------------|------------|---|
| There are no assets that meet the criteria of this report | | | | | | |

0968 The Dove Foundation

38-3040503

Future Depreciation Report **FYE: 4/30/06**

FYE: 4/30/2005

Video/Dove Seals

| <u>Asset</u> | <u>Description</u> | <u>Date In Service</u> | <u>Cost</u> | <u>Tax</u> | <u>AMT</u> |
|-----------------------------------|--|------------------------|---------------|------------|------------|
| <u>Other Depreciation:</u> | | | | | |
| 1 | Furniture | 5/22/00 | 3,035 | 433 | 372 |
| 2 | Booth | 1/26/93 | 1,200 | 0 | 0 |
| 3 | Derse Exhibit - Hall of Fame | 4/28/95 | 10,643 | 0 | 0 |
| 4 | Sony VAIO Laptop | 1/29/00 | 2,880 | 0 | 0 |
| | Total Other Depreciation | | <u>17,758</u> | <u>433</u> | <u>372</u> |
| | Total ACRS and Other Depreciation | | <u>17,758</u> | <u>433</u> | <u>372</u> |
| | Grand Totals | | <u>17,758</u> | <u>433</u> | <u>372</u> |

0968 The Dove Foundation

38-3040503

FYE: 4/30/2005

Federal Statements

| <u>Code</u> | <u>Description</u> | <u>Amount</u> | <u>Amount</u> |
|-------------|----------------------------|------------------|---------------|
| | DOVE FOUNDATION - CHECKING | \$ 39,920 | \$ |
| | FIRST - CHECKING | 13,719 | |
| | CC CHECKING | 22,259 | |
| | SHOP@DOVE | 1,238 | |
| | PETTY CASH | 100 | |
| | ROUNDING | -1 | |
| TOTAL | | <u>\$ 77,235</u> | <u>\$ 0</u> |

0968 The Dove Foundation
38-3040503
FYE: 4/30/2005

Federal Statements

Form 990, Part I, Line 1a - Direct Public Support

| <u>Description</u> | <u>Cash</u> | <u>Noncash</u> | <u>Total</u> |
|----------------------|-------------------|------------------|-------------------|
| DONATION INCOME | \$ 23,641 | \$ | \$ 23,641 |
| INDIVIDUAL DONATIONS | 312,019 | | 312,019 |
| FOUNDATION INCOME | 47,500 | | 47,500 |
| MOVIE MARATHON | 7,664 | | 7,664 |
| REIMB INCOME | -2,003 | | -2,003 |
| IN-KIND DONATIONS | | 17,867 | 17,867 |
| ROUNDING | -2 | | -2 |
| OTHER CONTRIBUTIONS | 1,364 | | 1,364 |
| TOTAL | <u>\$ 390,183</u> | <u>\$ 17,867</u> | <u>\$ 408,050</u> |

0968 The Dove Foundation
 38-3040503
 FYE: 4/30/2005

Federal Statements

Direct Depreciation Expense - Allocation for Special Events

| Desc | Total Expenses | Prog % | Program Services | M & G % | Mgt & General | Fund % | Fund- Raising |
|-------|-------------------|-----------|---------------------|------------|------------------|-----------|------------------|
| | \$ 1,010 | | | | | | |
| TOTAL | \$ 1,010 | | 0 | | 0 | | 0 |