Form 990

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

<u>20**03**</u>

Department of the Treasury Internal Revenue Service

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

Open to Public

B. Check of applicable. Address change Initial return Amended return Application pending • Section Strip (Check only) one) • Section Strip (Check only) on	A	Fo	r the	2003 calendar	year, or	tax year beginning	1/1/2003	, and e	ending	12	2/31/2003		
Address change Name change										D Emplo	oyer Identificat	lon numbe	r
Name change Initial return Initial		٦.		• •		The Committee of One Hu	ındred			95-8187	7105		
Initial return	$\overline{}$	ī		_				ress) F					
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Interest continued return San Diego	<u> </u>	jimii 1	iai rei		See								
Application pending Section 391(e)3) organizations and 4847(a)(1) nonexampt charitable truets must attach a completed Schedule A (Form #90 or 990-EZ). G Website:		Fin	al ret			City or town	State or co	untry ZIF	P + 4	F Accou	nting method.	Cash	XAccrual
Trusts must attach a completed Schedule A (Form 990 or 980-E2). Website:		Am	nende	d return	tions	San Diego	CA	92	120	l ∐°	ther (specify)	>	
G Website: J Organization type (check only one) Solicio 3]Ap	plicati	on pending	Section	501(c)(3) organizations and 494	7(a)(1) nonexempt charitat	le	H and I are	not applica	ble to section 5	527 organiza	ations
J Organization type (chock only one)					trusts r	nust attach a completed Schedu	le A (Form 990 or 990-EZ).		H(a) Is this	s a group ret	um for affiliates?		Yes X No
Companization type (check only one) Sortici 3 4 (neer no 4447(a)(1) or 527 Hold 1 the organization and not file a return with the Pick but of the organization need not file a return with the Pick but of the organization need not file a return with the Pick but of the organization need not file a return with the Pick but of the organization need not file a return with the Pick but of the organization need not file a return with the Pick but of the organization need not file a return with the Pick but of the organization need a file and the Pick But of the organization need not file a return with the Pick But of the organization need need to be a file orga	<u>G</u>	We	bsite): >					H(b) If "Ye	es," enter n	number of affilia	tes 📐	<u></u>
Check here									H(c) Are a	all affiliates	included?		Yes No
coveraced not group nutroy?	J	Org	janiza	tion type (check o	only one)	► X 501(c)(3) ◀	(insert no)4947(a)(1) o	r527	(If "N	lo," attach	a list. See instr	uctions)	
coveraced not group nutroy?	ĸ	Che	eck he	re 🕨 if i	the organi	zation's gross receipts are normal	v not more than \$25,000 The	9	H(d) Isthi	is a separa	te return filed b	v an organiz	zation
Cross receipts: Add lines 6b, 8b, 9b, and 10b to line 12					-	• ,	•		1 ''	-			
Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12		ma	ıl, ıt sh	ould file a return w	uthout fina	ncial data Some states require a	complete return.		I Grou	ıp Exemptı	on Number	<u> </u>	
Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.) 1 Contributions, gifts, grants, and similar amounts received: a Direct public support b Indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ noncash \$) 1 d 76,312 2 Program service revenue including government fees and contracts (from Part VII, line 93) 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				· · · · · · · · · · · · · · · · · · ·							_	ation is not	required
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to Gross sales of inventory, less returns and allowances be Less: cost of goods sold costs from sales of inventory (attach schedule) (subtract line 10b from line 10a) costs from sales of inventory (attach schedule) (subtract line 10b from line 10a) costs from line 10a) costs from line 10a) costs from line 10b from line 10a) costs from line 10a costs from											9c		1 501
b Less: cost of goods sold		-								5.038	7///		1,001
C Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) 10 Other revenue (from Part VII, line 103) 11 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 13 Program services (from line 44, column (B)) 14 Management and general (from line 44, column (C)) 15 Fundraising (from line 44, column (D)) 16 Payments to affiliates (attach schedule) 17 Total expenses (add lines 16 and 44, column (A)) 18 Excess or (deficit) for the year (subtract line 17 from line 12) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 20 0										1 703			
11 Other revenue (from Part VII, line 103)		- 1											3 335
Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 13 Program services (from line 44, column (B)) 14 Management and general (from line 44, column (C)) 15 Fundraising (from line 44, column (D)) 16 Payments to affiliates (attach schedule) 17 Total expenses (add lines 16 and 44, column (A)) 18 Excess or (deficit) for the year (subtract line 17 from line 12) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 20 0				•									0,000
13 Program services (from line 44, column (B))		- 1								lane.			
Management and general (from line 44, column (C)) Fundraising (from line 44, column (D)) Payments to affiliates (attach schedule) Total expenses (add lines 16 and 44, column (A)) Excess or (deficit) for the year (subtract line 17 from line 12) Net assets or fund balances at beginning of year (from line 73, column (A)) Other changes in net assets or fund balances (attach explanation) Other changes in net assets or fund balances (attach explanation) 14 15,559 16 17 79,808 18 22,439 19 Other changes in net assets or fund balances (attach explanation) Other changes in net assets or fund balances (attach explanation) Other changes in net assets or fund balances (attach explanation)	_	-											
Fundraising (from line 44, column (D)) 15 4,448 16 Payments to affiliates (attach schedule) 17 Total expenses (add lines 16 and 44, column (A)) 18 Excess or (deficit) for the year (subtract line 17 from line 12) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 20 0													
17 Total expenses (add lines 16 and 44, column (A))		ens		Fundraising (from lin	e 44, column (D))		ECL					
17 Total expenses (add lines 16 and 44, column (A))		<u> </u>		Payments to	affiliate	s (attach schedule)							0
18 Excess or (deficit) for the year (subtract line 17 from line 12) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 Other changes in net assets or fund balances (attach explanation) 10 COLUMN 11 18 22,439 19 245,958 20 0		- 1		Total expens	ses (add	d lines 16 and 44, column	(A))						79,808
19 Net assets or fund balances at beginning of year (from line 73, column (A))	_	\neg		Excess or (de	eficit) fo	r the year (subtract line 17	from line 12) S	EL A S	ZUU4				22,439
# 20 Other changes in net assets or fund balances (attach explanation) (Set								, ЗЯ. Г	19	-	245,958
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20) 268,397		[ي								j. F	20		0
				Net assets or	r fund b	alances at end of year (co	mbine lines 18, 19, an	d 20)		1)			268,397

Functional Expenses and section 4947(a)(1) nonexempt char	ntable trusts	s but optional for o	thers (See page 22 o	of the instructions)	(4) Organizations
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)					<i>}{////////////////////////////////////</i>
(cash \$ 0 noncash \$ 0)					<i> </i>
23 Specific assistance to individuals (attach schedule)	23				X/////////////////////////////////////
24 Benefits paid to or for members (attach schedule)	24	0			
25 Compensation of officers, directors, etc	25				+
26 Other salaries and wages	26				
Pension plan contributions	27	0			
Other employee benefits	28			 	
29 Payroll taxes	30	0			
30 Professional fundraising fees	31	2,000		- 2 00	
31 Accounting fees	32	2,000		2,00	
32 Legal fees	33			-	
33 Supplies	34				
	35		 	 	
35 Postage and shipping	36	2,407		1,80	602
37 Equipment rental and maintenance	37			1,00	002
38 Printing and publications	38	7,692	1	3,84	3,846
39 Travel	39	7,002		- 0,04	0,040
40 Conferences, conventions, and meetings	40				<u> </u>
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42				
43 Other expenses not covered above (itemize): a Office	43a	2,223	3	2,22	23
b Architectural Improvements - Exempt Purpose	43b	59,801			
c Insurance	43c	5,685	5	5,68	5
d	43d	C			
е	43e				
f	43f				
Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44	79,808	59,801	15,55	9 4,448
Joint Costs. Check if you are following SOP 98-2. Are any joint costs from a combined educational campaign and fundraising s if "Yes," enter (i) the aggregate amount of these joint costs [iii) the amount allocated to Management and general \$	<u>0</u> ;	(ii) the amount		am services \$_	
Part III Statement of Program Service Accomplishments (S					
What is the organization's primary exempt purpose?					Program Service
					Expenses Required for 501(c)(3) and
All organizations must describe their exempt purpose achievements in a clea of clients served, publications issued, etc. Discuss achievements that are no				i	(4) orgs , and 4947(a)(1)
organizations and 4947(a)(1) nonexempt charitable trusts must also enter the					trusts, but optional for others)
a The exempt purpose of The Committee of One Hundred is prese					
Balboa Park. The Committee is currently raising funds and prep	aring thi				
the west arcade on the Balboa Park prado.			4:		50.00
<u> </u>		nts and alloca			59,801
b			• • • • • • • • • • • • • • • • • • • •		
		nts and alloca	tions \$		
C					
c					
•••••		nts and alloca	tions \$		
d					
	(Gra	nts and alloca	tions \$)_	<u> </u>
Other program services (attach schedule)		nts and alloca			
f Total of Program Service Expenses (should equal line 44, col	umn (B).	Program serv	ices)		59,801

Par	l IV	Balance Sheets (See page 25 of the instruction	ns.)			
	Note:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	s within the description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing		12,523	45	266,971
	46	Savings and temporary cash investments	[232,829	46	
		Accounts receivable	47a 0			
	b	Less: allowance for doubtful accounts	47b 0	0	47c	0
	l .	Pledges receivable	48a 0			•
	1	Less: allowance for doubtful accounts	48b 0	0	48c	0
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and	- ' -	٥	50	0
	51.0	(attach schedule)	· · · · · · · · · · · · · · · · · · ·	U	111111	U
st e	31 a	•	51a 0			
Assets	۱ ۾	Less: allowance for doubtful accounts		0	51c	0
•	52	Inventories for sale or use		· · · · · · · · · · · · · · · · · · ·	52	
	53	Prepaid expenses and deferred charges	P	606	53	1,200
	54	Investments—securities (attach schedule)			54	0,200
		Investments—land, buildings, and				
	""	equipment: basis	55a 0			
	Ь	Less: accumulated depreciation (attach				
	-		55b 0	0	55c	0
	56	Investments—other (attach schedule)		0		0
	1	Land, buildings, and equipment: basis	57a 0			· · · · ·
	1	Less: accumulated depreciation (attach				
			57b 0	0	57c	0
	58	Other assets (describe)	0	58	0
					1	
	59	Total assets (add lines 45 through 58) (must equ	ıal line 74)	245,958	59	268,171
	60	Accounts payable and accrued expenses			60	
	61	Grants payable			61	
un.	62	Deferred revenue			62	
Liabilities	63	Loans from officers, directors, trustees, and key e				
E E		schedule)			63	0
Ξ		Tax-exempt bond liabilities (attach schedule) .			64a	0
		Mortgages and other notes payable (attach sched	dule)		64b	0
	65	Other liabilities (describe)	0	65	0
		Tablitabilities (add lines CO Abranch CE)		•	60	O
	66	Total liabilities (add lines 60 through 65)		0	66	U
	Orga		▶ X and complete lines			
		67 through 69 and lines 73 and 74.		227 400	67	257.042
Če	67	Unrestricted		237,409		257,942
ם	68	Temporarily restricted	,	9.540	68	10.220
8	69	Permanently restricted		8,549	/////	10,229
<u> </u>	Urga		iere Pilland			
正	70	complete lines 70 through 74. Capital stock, trust principal, or current funds.			70	
ठ		Paid-in or capital surplus, or land, building, and e			71	
8	71	• • • • • • • • • • • • • • • • • • • •	· ·		72	
Net Assets or Fund Balances	72	Retained earnings, endowment, accumulated inc	_		11/11	
2	73	Total net assets or fund balances (add lines 67	unough oa oi			
		lines 70 through 72; column (A) must equal line 19; column (B) must	equal line 21)	245,958	72	260 174
	74	Total liabilities and net assets / fund balances (add	· · · · · · · · · · · · · · · · · · ·	245,958		268,171 268,171
	74	PO is available for public inspection and, for some r				

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.

Form 99	90 (2003)			The Committee	of On	e Hun	ndred	95	5-8187105	5		Page 4
Part IV	/-A Reconciliation	of Revenue per A	udite	d	Part IV	V-B	Reconcil	liation of Expe	nses per	Aud	ited	
	Financial State	ments with Rever	nue p	er			Financia	l Statements v	with Expe	nses	per	
	Return (See pa	ge 27 of the instruc	ctions	.)			Return		•		-	
a	Total revenue, gains, and				а	Tota	l expenses	and losses pe	r			
	per audited financial state		a	109,721	}		•	al statements	🕨	a	 	37,508
b	Amounts included on	line a but not			ь			led on line a bu	it not			
	on line 12, Form 990:						ne 17, Forn					
(1)	Net unrealized gains				(4)		ated service					
(.,	on investments	e			``		use of facili				<i>/////////////////////////////////////</i>	
(2)	Donated services and				(2)	-	r year adjus	······		////		
(2)	use of facilities				(2)		-					
(2)		. 3			1	•	rted on line					
(3)	Recoveries of prior	•					n 990			<i>\\\\\\</i>		
440	year grants	\$			(3)		es reported					
(4)	Other (specify):						20, Form 99					
	F/R Expenses	\$ 5,771			(4)) Othe	er (specify):	•				
	CGS	\$ 1,703			1		Expenses	<u>\$</u>	5,771			
	Add amounts on lines (1)	through (4) >	b	7,474		CGS	3	_\$	1,703			
]			lines (1) through	(4) ▶	Ь		7,474
C	Line a minus line b .	•	c	102,247	c			ne b		С		80,034
d	Amounts included on	line 12.			d	Amo	unts includ	led on line 17,				
	Form 990 but not on li	•						ot on line a:				
(1)	Investment expenses				(1)		stment exp					
(')	not included on line				\''		ncluded on					
		c									<i>/////////</i>	
(0)	6b, Form 990	2			(0)			<u>.</u>		<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>		
(2)	Other (specify):				(2)) Othe	er (specify):					
		\$			1			<u> </u>		<i>\\\\\\</i>		
		\$			1			<u> </u>			[[]][]]]	
	Add amounts on lines		d	0		Add	amounts of	n lines (1) and	(2) . ▶	d		
θ	Total revenue per line	12, Form 990			e	Tota	I expenses	per line 17, Fo	rm 990	1 1		
	(line c plus line d) .	.	е	102,247		(line	c plus line	d)	🕨	е		80,034
Part V	List of Officers	, Directors, Truste	es, a	nd Key Emplo	yees (l	List ea	ach one eve	en if not compe	ensated; se	ee pa	ige 27	
	of the instruction							•		•	_	
	(A) Name and a	ddress		Title and average hours			mpensation ot paid,	(D) Contribut employee bene			(E) Expens	
				week devoted to positio	"'	ent	er -0)	deferred comp	ensation	ļ	allowances	3
Name	See Attached List str	. 	1	Title	Ì							
City	<u>, ST</u>	ZIP	Hr/	wk As Required	1		0)		
Name	Str		1	Title .								
Cıty	<u>ı</u> ST	ZIP	Hr/	WK	l_							
Name	Str		_ 1	Fitle								
City	, ST	ZIP	Hr/	wĸ	- 1							
Name	Str			Title								
City		ZIP		WK						ŀ		
Name				ritle		•				1		
					- 1							
City		ZIP		WK						 		
Name				Title								
City		ZIP		wĸ						-		
Name	Str		1	Title Title								
City	<u>/ </u>	ZIP	Hr/	wĸ						ļ		
Name	Str		1	Γıtle	-							
City	<u>/ST</u>	ZIP	Hr/	wĸ								
Name	Str		_	Title								
City		ZIP		WK						1		
Name			\neg	Title						1		
City		ZIP	1	WK				!				
City	31	417	1 1717	****				L	·	<u> </u>		
75 Di	d any officer, director, trus	stee, or key employee	e recei	ve aggregate com	npensat	ion of	more than \$1	100,000 from you	ır	_	_	
or	ganization and all related	organizations, of which	ch moi	e than \$10,000 w	as prov	ided b	y the related	l organizations?	▶	Yes		No
	"Yes," attach schedules								-	_		

orm :	990 (2003) The Committee of One Hundred 95-6167105			Page 3
art \	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?	77		X
	If "Yes," attach a conformed copy of the changes.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		<u> X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	//////	mm.
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common	900		
	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	//////	ziim.
D	If "Yes," enter the name of the organization ▶			
	and check whether it isexempt ornonexempt.			
	Enter direct and indirect political expenditures. See line 81 instructions 81a	81b		
D	Did the organization file Form 1120-POL for this year?	610		
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		×
_	If "Yes," you may indicate the value of these items here. Do not include this amount	77777		
I,	as revenue in Part I or as an expense in Part II. (See instructions in Part III.) . 82b N/A			
92 -	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	////// X	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	<u> </u>
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Х
	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		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	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.			
C	Dues, assessments, and similar amounts from members			
	Section 162(e) lobbying and political expenditures	<i>-\\\\\\</i>		
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e	<i>- {/////</i>		<i>W////.</i>
f	Taxable amount of lobbying and political experiences (into each lobe each)	<u> </u>		
ç		85g	ļ	₩
r	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to	1		
	its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the	85h		1
0.0	following tax year?	77777	/////	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	- <i>\\\\\\</i>	<i>\\\\\</i>	<i>X/////</i>
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	<i>-\////</i>		<i>\\\\\\</i>
	Gross income from other sources. (Do not net amounts due or paid to other	<i>-\////</i>		<i>}/////</i>
•	sources against amounts due or received from them.)			<i>\$/////.</i>
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	7,,,,,		,,,,,,,
•	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		l
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:		X////	<i>}/////</i>
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶	_\////	X/////	<i>{//////</i>
t	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		:	1
	a statement explaining each transaction	89b	!	<u> </u>
(Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			
(1 Enter: Amount of tax on line 89c, above, reimbursed by the organization			
90 a	List the states with which a copy of this return is filed ► CA			
	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.)			
91	The books are in care of ► Name Telephone no ►			
- 1	Located at ► 6751 Caminito del Greco Cıty San Diego ST Zıp+4 ► 92120			
02	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041— Check here			
92	Section 4947(a)(1) nonexempt chantable trusts ming roth 990 in field of Form 1041 — Office field			
	and enter the amount of tax-exempt interest received or accrued during the tax year			

art V		, 			·	
lote:	Enter gross amounts unless otherwise	Unrelated busin	ess income	Excluded by section	512, 513, or 514	(E)
ndicat	ed	(A)	(B)	(C)	(D)	Related or exempt
93	Program service revenue:	Business code	Amount	Exclusion code	Amount	function income
а						
b						
d					<u> </u>	
е				ļ		
f	Medicare/Medicaid payments	ļ			ļ. <u> </u>	
	Fees and contracts from government agencies					
94	Membership dues and assessments			 	0.450	17,48
95	Interest on savings and temporary cash investments			14	2,153	
96	Dividends and interest from securities			14	1,459	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
97	Net rental income or (loss) from real estate:					
	debt-financed property			- 	ļ	
	not debt-financed property			 	 -	
98	Net rental income or (loss) from personal property			 	 	
99	Other investment income			 	 	
00	Gain or (loss) from sales of assets other than inventory			 		
01	Net income or (loss) from special events			<u> </u>		
02 03	Gross profit or (loss) from sales of inventory			 	 	
	Other revenue: a			 		
b						
_					 	
				1		
d					<u> </u>	.
e 04 05 ote:	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal to	the amount on line 1			· · · • •	21,09
e 04 05 ote: art V	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal is Relationship of Activities to the A to. Explain how each activity for which inco	the amount on line 1 Accomplishment of me is reported in colur	2, Part I Exempt Purport (E) of Part Vi	ooses (See page 34	of the instructio	21,09 ns.)
e 04 05 ote: art V ine N	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal to relationship of Activities to the Activities to the Activity for which inco of the organization's exempt purposes (the amount on line 1 Accomplishment of me is reported in colur other than by providing	2, Part I Exempt Purp nn (E) of Part VI funds for such	ooses (See page 34 I contributed importan purposes).	▶	21,09 ns.) shment
e 04 05 ote: art V ine N	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal is Relationship of Activities to the A to. Explain how each activity for which incoof the organization's exempt purposes (in the American Section 1).	the amount on line 1 Accomplishment of me is reported in colur other than by providing e that there is intere	2, Part I Exempt Purport Inn (E) of Part Vi I funds for such st on behalf of	ooses (See page 34 I contributed importan purposes). the members and t	▶	21,09 ns.) shment
e 04 05 ote: art V	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal to relationship of Activities to the Activities to the Activity for which inco of the organization's exempt purposes (the amount on line 1 Accomplishment of me is reported in colur other than by providing e that there is intere	2, Part I Exempt Purport Inn (E) of Part Vi I funds for such st on behalf of	ooses (See page 34 I contributed importan purposes). the members and t	▶	21,09 ns.) shment
e 04 05 ote: art V	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal is Relationship of Activities to the A to. Explain how each activity for which incoof the organization's exempt purposes (in the American Section 1).	the amount on line 1 Accomplishment of me is reported in colur other than by providing e that there is intere	2, Part I Exempt Purport Inn (E) of Part Vi I funds for such st on behalf of	ooses (See page 34 I contributed importan purposes). the members and t	▶	21,09 ns.) shment
e 04 05 ote: art V	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal to Relationship of Activities to the Activities to the Activity for which inco of the organization's exempt purposes (Membership fees are charged to insurance members is kept. Newsletters, minute	the amount on line 1 Accomplishment of me is reported in colur other than by providing that there is interest, and other communications.	Exempt Purpose (Exempt Purpose) Exempt Purpose (Exempt Purpose) In (E) of Part Violations for such set on behalf of the inications are set on the inication are s	ooses (See page 34 I contributed importan purposes). the members and t sent to members.	I of the instruction the total an accurate	21,09 ns.) shment list of
e 04 05 ote: art V	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal is Relationship of Activities to the A to. Explain how each activity for which incoof the organization's exempt purposes (Membership fees are charged to insurant members is kept. Newsletters, minute Information Regarding Taxable S (A)	the amount on line 1 Accomplishment of me is reported in colur other than by providing that there is interes, and other communities, and other communities and Di	Exempt Purpose in (E) of Part Vironds for such st on behalf of inications are seregarded En	l contributed important purposes). the members and to sent to members.	of the instruction of the instruction	21,09 ns.) shment list of ns.) (E)
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SCHEDULE A (Form 990 or 990-EZ)

Part I

Organization Exempt Under Section 501(c)(3)

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

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

OMB No 1545-0047

(d) Contributions to

2002

(e) Expense

Department of the Treasury
Internal Revenue Service

MUST be completed by t

Name of the organization

The Committee of One Hundred

95-8187105

(See page 1 of the instructions. List each one. If there are none, enter "None.")

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(a) Name ar	than \$50,000	IIIOre	per week devoted to position		(c) Compensation	employee benefit plans & deferred compensation	account and other allowances
Name Str None							
	ST		Title				
City Zip			Avg hr/wk				
	Country		Avg III/wk	\vdash			
Name							I
Str	ST		T:410				
City			Title				
Zip	Country		Avg hr/wk	╁			
Name							
Str	ST		T.410				
City			Title				
Zip	Country		Avg hr/wk	\vdash			
Name							
Str			~ ************************************				
City	ST		Title				
Zip	Country		Avg hr/wk	╁			
Name							
Str			L				
City	ST		Title	1			
Zip	Country		Avg hr/wk	<i></i>			
	of other employees paid o	ver					
\$50,000 <u>.</u>		<u> </u>					
	compensation of the Fi See page 2 of the instruction						
	nd address of each independe					pe of service	(c) Compensation
Name Wheele	r, Wimer, Blackman & Ass	ociates	Check here if a business	X			
	amino Del Rio North	ooiatoo	Oncok horo ir a basinose	٠			
City San Die							
ST CA	ZIP 92108	Countr	N.		Architectural Plan	e e	59,801
Name	ZIF 32 100	Count	Check here if a business	$\overline{\mathbf{I}}$	Architecturar Flam	3	39,001
Str			Official field if a publicas	ــــــــــــــــــــــــــــــــــــــ			
City ST	ZIP	Countr	у	.,			
Name			Check here if a business	<u>:</u>			
Str							
City							
ST	ZIP	Countr	у				
Name			Check here if a business	3			
Str							
City	•••••				[
ST	ZIP	Countr	v				
Name			Check here if a business	3			
Str					1		
City					1		
ST	ZIP	Countr	v				
	of others receiving over	Count					
	rofessional services	•			<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>		
AAAAAA IOI D			1		<i></i>		

Part	111	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	atte or ir	ing the year, has the organization attempted to influence national, state, or local legislation, including any impt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid in connection with the lobbying activities	1		X
	orga	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other anizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities.			
2	sub with own	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the esactions.)			
a b c	Len Fur	e, exchange, or leasing of property?	2a 2b 2c		X X X
đ	Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)? .	2d		
е	Tra	nsfer of any part of its income or assets?	2e		Х
3 a		you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			,
b	•	determine that recipients qualify to receive payments.)	3a 3b		X
4		you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?	4		×
Part	:IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)	· · · · · · · · · · · · · · · · · · ·		
The o	organ	ization is not a private foundation because it is: (Please check only ONE applicable box.)			
5	\Box	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	\Box	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	\Box	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	\sqcap	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 hosp name, city, and state	ital's		
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Sec 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)	tion		
11 a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the generablic. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	rai		
11 b		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 receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more that of its support from gross investment income and unrelated business taxable income (less section 511 tax) from be acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in	an 33 usines	1/3% sses	
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 509(a)(2). (See section 509(a)(3).)		tion	_
		Provide the following information about the supported organizations. (See page 5 of the instructions.)			
		(a) Name(s) of supported organization(s) (b) Line no from about		•	
					-
				<u> </u>	•
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instruction	s.)		•

	IV-A Support Schedule (Complete only if you checke		•			counti	ng.
	You may use the worksheet in the instructions for converti						
	dar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1	999	(e) Total
15	Gifts, grants, and contributions received. (Do						
40	not include unusual grants. See line 28.)	55,028	106,668	56,080		56,080	273,856
16	Membership fees received						0
17	Gross receipts from admissions, merchandise		•				
	sold or services performed, or furnishing of						
	facilities in any activity that is related to the	{		į			^
40	organization's charitable, etc., purpose	 		<u> </u>			0
18	Gross income from interest, dividends,	<u>,</u>				J	
	amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and					ľ	
	unrelated business taxable income (less			i			
	section 511 taxes) from businesses acquired	}				1	
	by the organization after June 30, 1975	1,449	5,569	8,131		8,131	23,280
19	Net income from unrelated business	1,449	0,009	0,131		0,131	23,200
13	activities not included in line 18						0
20	Tax revenues levied for the organization's						
	benefit and either paid to it or expended on	l					
	its behalf	Ì					0
21	The value of services or facilities furnished to						
	the organization by a governmental unit	Î					
	without charge. Do not include the value of						
	services or facilities generally furnished to the	1					
	public without charge						0
22	Other income. Attach a schedule. Do not						
	include gain or (loss) from sale of capital assets						0
23	Total of lines 15 through 22	56,477	112,237	64,211		64,211	297,136
24	Line 23 minus line 17	56,477				64,211	297,136
25	Enter 1% of line 23	565	1,122	642	L	642	
26	Organizations described on lines 10 or 11: a Enter 2	2% of amount in	column (e), line	24	▶	_26a	5,943
b	Prepare a list for your records to show the name of and ar	mount contribute	ed by each perso	on (other than a			
	governmental unit or publicly supported organization) who				ne		
	amount shown in line 26a. Do not file this list with your					26b	
С	Total support for section 509(a)(1) test: Enter line 24, colu				, ▶	26c	297,136
d	Add: Amounts from column (e) for lines: 18	23,280 19		0			
	22	0 26	b	<u>0</u>	, ▶	26d	23,280
•	Public support (line 26c minus line 26d total)				. ▶	26e	273,856
f	Public support percentage (line 26e (numerator) divide	ed by line 26c (denominator))	<u> </u>	<u>.</u> •	26f	92.17%
27	Organizations described on line 12: a For amounts	included in line	s 15, 16, and 17	that were recei	ved fror	n a "dis	qualified
	person," prepare a list for your records to show the name						
	person." Do not file this list with your return. Enter the					•	
	(2002) (2001)	(20	000)	((1999)		
h	For any amount included in line 17 that was received from					ro o lief	for your
b	records to show the name of, and amount received for ear	•	•	•			•
	year or (2) \$5,000. (Include in the list organizations descri						
	your return. After computing the difference between the a						
	sum of these differences (the excess amounts) for each y		and the larger	arriourit describe	54 III (1)	OI (2),	enter the
			100)	,	(4000)		
	(2002) (2001)	(20)00)	((1999)		
С	Add: Amounts from column (e) for lines: 15	0 16	0	1			
-	17 _ 0 20	0 21	0		. •	27c	0
d	Add: Line 27a total 0 20 and lin	ne 27b total	0	[•	27d	0
8	Public support (line 27c total minus line 27d total)				. •	27е	0
f	Total support for section 509(a)(2) test: Enter amount from				(
g	Public support percentage (line 27e (numerator) divide	ed by line 27f (d	denominator))		•	27g	0.00%
h	Investment income percentage (line 18, column (e) (nu	umerator) divid	ed by line 27f (denominator))	<u>.</u> •	27h	0.00%
28	Unusual Grants: For an organization described in line 10		•	•	•		•
	2002, prepare a list for your records to show, for each year	ar, the name of t	he contributor, t	he date and amo	ount of t	he grar	nt. and a

brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part	V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	20	Yes	No
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?	29 /// 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		
32	Does the organization maintain the following:			
a b	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a 32b		
	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		
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a	<i>(//////</i>	<i>(111111</i>
b	Admissions policies?	33b		
G	Employment of faculty or administrative staff?	33c 33d		-
	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.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	ļ	
b	Has the organization's right to such aid ever been revoked or suspended?	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	<i>X/////</i>	<i>X/////</i>

Part	VI-A Lobbying Expenditures by Electing Pub (To be completed ONLY by an eligible organization)	•		. •	the ins	tructio	ns.)		
Check	▶ a if the organization belongs to an affiliated group	Check ▶	ь [ıf you che	cked "a'	and "li	mited cor	ntrol" p	rovisions apply.
	Limits on Lobbying Exp		<u> </u>	- ·			(a) Affiliated total	group	(b) To be completed for ALL electing
26	(The term "expenditures" means amount Total lobbying expenditures to influence public opinion (g					36			organizations
36 37	Total lobbying expenditures to influence a legislative bod					37			
38	Total lobbying expenditures (add lines 36 and 37)					38		0	0
39	Other exempt purpose expenditures					39		──┤	
40	Total exempt purpose expenditures (add lines 38 and 39					40		0	0
41	Lobbying nontaxable amount. Enter the amount from the	•			• •				
71	, -	ng nontaxable		ount is—					
	Not over \$500,000	-			<u> </u>				
	Over \$500,000 but not over \$1,000,000 \$100,000 plu								
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plu					41	********	0	0
	Over \$1,500,000 but not over \$17,000,000 . \$225,000 plu								
	Over \$17,000,000				J				
42	Grassroots nontaxable amount (enter 25% of line 41) .					42		0	0
43	Subtract line 42 from line 36. Enter -0- if line 42 is more to	than line 36 .				43		0	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more to	than line 38 .				44		0	0
	Caution: If there is an amount on either line 43 or line 44	4, you must file	Forn	1 4720.					
	4-Year Averaging								
	(Some organizations that made a section 501(h) See the instructions for lines 4						nns belov	w. 	
		Lobbyi	ng E	xpenditure	s Durin	g 4-Ye	ar Aver	aging	Period
	Calendar year (or fiscal year beginning in) ▶	(a) 2003		(b) 2002	(c 200	-	(d) 200		(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		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i></i>	,,,,,,,	,,,,,,,,,,	,,,,,,,	0
49	Grassroots ceiling amount (150% of line 48(e))								О
43	Grassioots ceiling amount (130 % of line 40(e))						<i>~~~~</i>		
50	Grassroots lobbying expenditures								0
Part	VI-B Lobbying Activity by Nonelecting Public								
	(For reporting only by organizations that did no	t complete Part	VI-A	(See page	12 of t	he inst	ructions	.)	
Durin	g the year, did the organization attempt to influence nation	nal, state or loca	al lec	islation, inc	ludina a	inv	1., 1		
	pt to influence public opinion on a legislative matter or ref		_	-	J	•	Yes	No	Amount
а	Volunteers		٠.,					Х	
b	Paid staff or management (Include compensation in exp	enses reported	on li	nes c throu	gh h .)			Х	
C	Media advertisements							Χ	
d	Mailings to members, legislators, or the public							Х	
е	Publications, or published or broadcast statements							Χ	
f	Grants to other organizations for lobbying purposes							Х	
g	Direct contact with legislators, their staffs, government o							Х	
ĥ	Rallies, demonstrations, seminars, conventions, speech	es, lectures, or	any (other mean	3			Χ	
i	Total lobbying expenditures (Add lines c through h.) .						· //////		0
	If "Yes" to any of the above, also attach a statement givi	ng a detailed de	escri	otion of the	lobbying	activi	ties.		

Part	VII	•	, .	fers To and Transaction age 12 of the instructions	s and Relationships With Noncharitab)	le		
51			•		he following with any other organization desc section 527, relating to political organizations		sectio	n
а	Trans	sfers from the repor	ting organization	n to a noncharitable exempt	organization of:		Yes	No
	(i)	Cash				51a(i)		Х
	(ii)	Other assets				a(ii)		Х
b	Othe	r transactions:						
	(i)	Sales or exchange	es of assets with	a noncharitable exempt org	anization	b(i)		Х
	(ii)	Purchases of asse	ets from a nonch	aritable exempt organization		b(ii)		Х
	(iii)	Rental of facilities,	equipment, or o	other assets		b(iii)		Х
	(iv)	Reimbursement ar	rrangements .			b(iv)		Х
	(v)	Loans or loan guar	rantees			b(v)		Х
	(vi)	Performance of se	rvices or memb	ership or fundraising solicita	tions	b(vi)		X
С	Shar	ing of facilities, equi	ipment, mailing	lists, other assets, or paid er	mployees	С		X
d	If the	answer to any of th	ne above is "Yes	s," complete the following scl	nedule. Column (b) should always show the fa	air mark	et valu	ie
		•			zation. If the organization received less than f		et valu	ıe
	in an		aring arrangeme	nt, show in column (d) the va	alue of the goods, other assets, or services re	eceived:		
	a)	(b)	Nome of sec	(c)	(d)		monto	
Lini	e no	Amount involved	Name or none	chantable exempt organization	Description of transfers, transactions, and shan	ng arrange	ments	
								
		 		···				
		<u> </u>						
				s. 100				
		-	· ·-					
		<u> </u>						
		<u>. </u>	<u> </u>					
	desc		(c) of the Code	(other than section 501(c)(3	ne or more tax-exempt organizations)) or in section 527? [Yes	X] No
		(a)	g conjugat	(b)	(c)			
		Name of organization	n	Type of organization	Description of relationship			
								
	-		****					
				<u> </u>				-
						·		
	-							

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December 31, 2003

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