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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2002

Open to Public Inspection

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

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

Please use IRS label or print or type See Specific Instructions

C Name of organization: Metropolitan Organizations for People

Number and street (or P O box if mail is not delivered to street address): 1980 Dahlia Street — Room/suite:

City or town: Denver — State or country: Colorado — ZIP + 4: 80220

D Employer identification number: 84-0753677

E Telephone number: 303-399-2425

F Accounting method ☐ Cash ☒ Accrual ☐ 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)**

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 ▶ N/A

H(c) Are all affiliates included? N/A ☐ Yes ☐ No
(If "No " attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Enter 4-digit GEN ▶ N/A

G Web site ▶ N/A

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*

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* ▶ 430,221

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

AUG 19 '03

SCANNED

Revenue	1	Contributions, gifts, grants, and similar amounts received					
	a	Direct public support		1a	346,179		
	b	Indirect public support		1b	0		
	c	Government contributions (grants)		1c	70,000		
	d	TOTAL (add lines 1a through 1c) (cash $ 416,179 noncash $ 0)				1d	416,179
	2	Program service revenue including government fees and contracts (from Part VII, line 93)				2	0
	3	Membership dues and assessments				3	11,550
	4	Interest on savings and temporary cash investments				4	0
	5	Dividends and interest from securities				5	0
	6 a	Gross rents		6a	0		
	b	Less rental expenses		6b	0		
	c	*Net rental income or (loss) (subtract line 6b from line 6a)*				6c	0
	7	Other investment income (describe ▶)				7	0
	8 a	Gross amount from sales of assets other than inventory	(A) Securities: 0	8a	(B) Other: 0		
	b	Less cost or other basis and sales expenses	0	8b	0		
	c	Gain or (loss) (attach schedule)	0	8c	0		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))				8d	0
	9	Special events and activities (attach schedule)					
	a	Gross revenue (not including $ 0 of contributions reported on line 1a)		9a	0		
	b	Less direct expenses other than fundraising expenses		9b	0		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)				9c	0
	10 a	Gross sales of inventory, less returns and allowances		10a	0		
	b	*Less cost of goods sold*		10b	0		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)				10c	0
	11	Other revenue (from Part VII, line 103)				11	2,492
	12	TOTAL REVENUE (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)				12	430,221
Expenses	13	Program services (from line 44, column (B))				13	480,740
	14	Management and general (from line 44, column (C))				14	33,062
	15	Fundraising (from line 44, column (D))				15	29,951
	16	Payments to affiliates (attach schedule)				16	0
	17	TOTAL EXPENSES (add lines 16 and 44, column (A))				17	543,753
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)				18	-113,532
	19	Net assets or fund balances at beginning of year (from line 73, column (A))				19	199,556
	20	*Other changes in net assets or fund balances (attach explanation)*				20	0
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)				21	86,024

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18

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 21 of the instructions)

	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) (cash $ noncash $)	22	0			
23	Specific assistance to individuals (attach schedule)	23	0			
24	Benefits paid to or for members (attach schedule)	24	0			
25	Compensation of officers, directors, etc	25	0			
26	Other salaries and wages	26	334,903	298,652	18,125	18,126
27	Pension plan contributions	27	0			
28	Other employee benefits	28	0			
29	Payroll taxes	29	0			
30	Professional fundraising fees	30	0			
31	Accounting fees	31	0			
32	Legal fees	32	0			
33	Supplies	33	6,007	5,188	410	409
34	Telephone	34	11,186	9,878	654	654
35	Postage and shipping	35	1,554	1,169	77	308
36	Occupancy	36	3,700	3,316	192	192
37	Equipment rental and maintenance	37	3,733	3,611	61	61
38	Printing and publications	38	6,712	3,369	3,343	0
39	Travel	39	13,216	12,276	470	470
40	Conferences, conventions, and meetings	40	0			
41	Interest	41	0			
42	Depreciation, depletion, etc (attach schedule) See Statement 1	42	3,975	3,339	318	318
43	Other expenses not covered above (itemize) a	43a	0			
b	See Statement 2	43b	158,767	139,942	9,412	9,413
c		43c	0			
d		43d	0			
e		43e	0			
f		43f	0			
44	TOTAL FUNCTIONAL EXPENSES (add lines 22 through 43) ORGANIZATIONS COMPLETING COLUMNS (B)-(D) CARRY THESE TOTALS TO LINES 13-15	44	543,753	480,740	33,062	29,951

JOINT COSTS Check ▶ ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes " enter (i) the aggregate amount of these joint costs $ ______, (ii) the amount allocated to Program services $ ______, (iii) the amount allocated to Management and general $ ______, and (iv) the amount allocated to Fundraising $ ______

Part III Statement of Program Service Accomplishments (See page 24 of the instructions)

What is the organization's primary exempt purpose? ▶ Leadership Training

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) and (4) orgs and 4947(a)(1) trusts but optional for others)
a	Rebuilding Community Campaign - a three-year campaign to build new leadership in new and existing member neighborhoods throughout the five-county Denver region Over the next three years, low and moderate-income families will address a series of local issues in their communities and increase the Organization's member from 12 churches to 40 churches (Grants and allocations $)	307,423
b	NE Denver Parent Organizing Efforts to create parent organization committees in 11 NE Denver public schools with the purpose of involving parents more in their children's education and concerns in the neighborhoods (Grants and allocations $)	173,317
c	(Grants and allocations $)	
d	(Grants and allocations $)	
e	Other program services (attach schedule) (Grants and allocations $)	
f	TOTAL OF PROGRAM SERVICE EXPENSES (should equal line 44, column (B), Program services) ▶	480,740

Part IV **Balance Sheets** (See page 24 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
Assets	45	Cash - non-interest-bearing			198 690	45	78,361
	46	Savings and temporary cash investments			0	46	0
	47 a	Accounts receivable	47a	0			
	b	Less allowance for doubtful accounts	47b	0	0	47c	0
	48 a	Pledges receivable	48a	0			
	b	Less allowance for doubtful accounts	48b	0	0	48c	0
	49	Grants receivable			0	49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			0	50	0
	51 a	Other notes and loans receivable (attach schedule)	51a	0			
	b	Less allowance for doubtful accounts	51b	0	0	51c	0
	52	Inventories for sale or use			0	52	
	53	Prepaid expenses and deferred charges			1,212	53	1,351
	54	Investments - securities (attach schedule) ▶ ☐ Cost ☐ FMV			0	54	0
	55 a	Investments - land, buildings, and equipment basis	55a	0			
	b	Less accumulated depreciation (attach schedule)	55b	0	0	55c	0
	56	Investments - other (attach schedule)			0	56	0
	57 a	Land, buildings, and equipment basis	57a	15,766			
	b	Less accumulated depreciation (attach schedule) See Statement 1	57b	8,564	5,935	57c	7,202
	58	Other assets (describe ▶)			0	58	0
	59	TOTAL ASSETS (add lines 45 through 58) (must equal line 74)			205 837	59	86,914
Liabilities	60	Accounts payable and accrued expenses			6,281	60	890
	61	Grants payable			0	61	0
	62	Deferred revenue			0	62	0
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			0	63	0
	64 a	Tax-exempt bond liabilities (attach schedule)			0	64a	0
	b	Mortgages and other notes payable (attach schedule)			0	64b	0
	65	Other liabilities (describe ▶)			0	65	0
	66	TOTAL LIABILITIES (add lines 60 through 65)			6,281	66	890
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted			43,977	67	47,304
	68	Temporarily restricted			155,579	68	38,720
	69	Permanently restricted			0	69	0
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	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)			199,556	73	86,024
	74	TOTAL LIABILITIES AND NET ASSETS / FUND BALANCES (add lines 66 and 73)			205 837	74	86 914

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 26 of the instructions)

a	Total revenue gains and other support per audited financial statements ▶	a	430 221
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments $ 0		
(2)	Donated services and use of facilities $ 0		
(3)	Recoveries of prior year grants $ 0		
(4)	Other (specify) $ 0		
	Add amounts on lines (1) through (4) ▶	b	0
c	Line a minus line b ▶	c	430 221
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $ 0		
(2)	Other (specify) $ 0		
	Add amounts on lines (1) and (2) ▶	d	0
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	430,221

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

a	Total expenses and losses per audited financial statements ▶	a	543,753
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities $ 0		
(2)	Prior year adjustments reported on line 20, Form 990 $ 0		
(3)	Losses reported on line 20, Form 990 $ 0		
(4)	Other (specify) $ 0		
	Add amounts on lines (1) through (4) ▶	b	0
c	Line a minus line b ▶	c	543,753
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $ 0		
(2)	Other (specify) $ 0		
	Add amounts on lines (1) and (2) ▶	d	0
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	543,753

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 26 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) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See Statement 3				

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 26 of the instructions

Part VI Other Information (See page 27 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
78 a	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?	N/A	78b		
79	Was there a liquidation dissolution termination or substantial contraction during the year? If "Yes," attach a statement		79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees officers, etc , to any other exempt or nonexempt organization?		80a		X
b	If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt OR ☐ nonexempt				
81 a	Enter direct or indirect political expenditures See line 81 instructions	81a 0			
b	Did the organization file FORM 1120-POL for this year?		81b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		82a		X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b 0			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	84b		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	85a		
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	N/A	85b		
c	Dues, assessments, and similar amounts from members	85c N/A			
d	Section 162(e) lobbying and political expenditures	85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	85g		
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?	N/A	85h		
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities	86b N/A			
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a N/A			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX		88		X
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0				
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			

90 a List the states with which a copy of this return is filed ▶ (none)

b Number of employees employed in the pay period that includes March 12, 2002 (See instructions) 90b 9

91 The books are in care of ▶ Metropolitan Organizations for People Telephone no ▶ 303-399-2425

Located at ▶ 1980 Dahlia St Denver, CO ZIP + 4 ▶ 80220

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of FORM 1041 - Check here N// ▶ ☐

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 31 of the instructions)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income (A) Business code	(B) Amount	Excluded by section 512 513 or 514 (C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					11,550
95 Interest on savings and temporary cash investments					
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					
103 Other revenue a Miscellaneous					2,492
b					
c					
d					
e					
104 Subtotal (add columns (B), (D) and (E))		0		0	14,042
105 TOTAL (add line 104, columns (B) (D) and (E)) ►					14,042

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

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

Line No ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
94	Membership dues allow the Organization to provide the members with leadership training in the handling of community issues
103a	Incidental miscellaneous income

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

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

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

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

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

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] 7/30/2003
Signature of officer Date

► PHUONGLAN T. NGUYEN / BOARD MEMBER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ► [signature] CPA	Date 7/14/2003	Check if self-employed ► ☐	Preparer's SSN or PTIN (See Gen Inst W)
Firm's name (or yours if self employed) address and ZIP + 4 ►	The Taylor Company, PC		EIN ► 84-1080763
	800 Grant Street #406, Denver, Colorado 80203-2944		Phone no ► 303-830-8109

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2002

Name of the organization: Metropolitan Organizations for People

Employer identification number: 84-0753677

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

(a) Name and address of each *employee paid more than $50 000*	(b) Title and average *hours per week* devoted to position	(c) *Compensation*	(d) Contributions to *employee benefit plans &* deferred compensation	(e) Expense account *and other* allowances
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		

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

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities $ 3,033 **(Must equal amounts on line 38,** Part VI-A, or line i of Part VI-B)	1	X	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other *organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of* the lobbying activities			
2	*During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any* substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? See Part V of 990	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc ? (See NOTE below)	3		X
4	Do you have a section 403(b) annuity plan for your employees? See Schedule 5	4	X	

Note *Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments*

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

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

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

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

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

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

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) ENTER THE HOSPITAL'S NAME, CITY, AND STATE

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)

11 a ☒ 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)

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, and gross receipts from activities related to its charitable, etc functions - subject to certain exceptions, and (2) NO MORE THAN 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the SUPPORT SCHEDULE in Part IV-A)

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

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

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

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

Part IV-A **Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) USE CASH METHOD OF ACCOUNTING

Note *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting*

Calendar year (or fiscal year beginning in)		(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	420,896	156,439	95,260	109,438	782,033
16	Membership fees received	6,008	3,158	3,283	5,100	17,549
17	Gross receipts from admissions, merchandise sold or services performed or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	0	0	0	0	0
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents royalties and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	0	0	0	0	0
19	Net income from unrelated business activities not included in line 18	0	0	0	0	0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	1,244	2,490	2,441	6,167	12,342
23	Total of lines 15 through 22	428,148	162,087	100,984	120,705	811 924
24	Line 23 minus line 17	428,148	162,087	100,984	120,705	811,924
25	Enter 1% of line 23	4,281	1,621	1,010	1,207	

26 ORGANIZATIONS DESCRIBED ON LINES 10 OR 11 **a** Enter 2% of amount in column (e), line 24 — **26a** 16 238

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a DO NOT FILE THIS LIST WITH YOUR RETURN Enter the total of all these excess amounts — **26b** 252,322

c Total support for section 509(a)(1) test Enter line 24, column (e) — **26c** 811,924

d Add Amounts from column (e) for lines 18 0 19 0 22 12,342 26b 252,322 — **26d** 264,664

e Public support (line 26c minus line 26d total) — **26e** 547,260

f PUBLIC SUPPORT PERCENTAGE (LINE 26E (NUMERATOR) DIVIDED BY LINE 26C (DENOMINATOR)) — **26f** 67 40%

27 ORGANIZATIONS DESCRIBED ON LINE 12 **a** *For amounts included in lines 15, 16, and 17 that were received from a "disqualified person,"* prepare a list for your records to show the name of, and total amounts received in each year from each "disqualified person " DO NOT FILE THIS LIST WITH YOUR RETURN *Enter the sum of such amounts for each year*

(2001) ________ (2000) ________ (1999) ________ (1998) ________

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to *show the name of and amount received for each year, that was more than the LARGER of (1) the amount on line 25 for the year or (2) $5 000* (Include in the list organizations described in lines 5 through 11, as well as individuals) DO NOT FILE THIS LIST WITH YOUR RETURN After *computing the difference between the amount received and the larger amount described in (1) or (2) enter the sum of these differences (the* excess amounts) for each year

(2001) ________ *(2000)* ________ *(1999)* ________ *(1998)* ________

c *Add Amounts from column (e) for lines* 15 0 16 0 17 0 20 0 21 0 — **27c** 0

d *Add Line 27a total* 0 *and line 27b total* 0 — **27d** 0

e Public support (line 27c total minus line 27d total) — **27e** 0

f *Total support for section 509(a)(2) test Enter amount from line 23 column (e)* **27f** 0

g PUBLIC SUPPORT PERCENTAGE (LINE 27E (NUMERATOR) DIVIDED BY LINE 27F (DENOMINATOR)) — **27g** 0 00%

h INVESTMENT INCOME PERCENTAGE (LINE 18 COLUMN (E) (NUMERATOR) DIVIDED BY LINE 27F (DENOMINATOR)) — **27h** 0 00%

28 UNUSUAL GRANTS For an organization described in line 10 11 or 12 that received any unusual grants during 1998 through 2001 prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant DO NOT FILE THIS LIST WITH YOUR RETURN Do not include these grants in line 15

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? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31		
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above please explain (If you need more space, attach a separate statement)	32d		
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities? If you answered "Yes" to any of the above please explain (If you need more space, attach a separate statement)	33h		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

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)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	*Total lobbying expenditures to influence public opinion (grassroots lobbying)*	36		
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	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 following table -			
	If the amount on line 40 is - / **The lobbying nontaxable amount is -**			
	Not over $500 000 / 20% of the amount on line 40			
	Over $500,000 but not over $1,000,000 / $100,000 plus 15% of the excess over $500,000			
	Over $1,000,000 but not over $1 500 000 / $175 000 plus 10% of the excess over $1,000,000	41	0	0
	Over $1,500,000 but not over $17,000,000 / $225,000 plus 5% of the excess over $1,500,000			
	Over $17 000,000 / $1 000,000			
42	Grassroots nontaxable amount (enter 25% of line 41)	42	0	0
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	0	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	0	0

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)

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

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers	X		
b Paid staff or management (Include compensation in expenses reported on lines c through h)	X		
c Media advertisements		X	
d Mailings to members, legislators, or the public	X		400
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body	X		2,633
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means	X		0
i Total lobbying expenditures (Add lines c through h)			3,033

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities See Statement 4

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 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?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

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

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers transactions, and sharing arrangements

52 a 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

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Metropolitan Organizations for People

Statement 1

Page 2, Part II, Line 42
Depreciation Expense

Depreciation expense for year ended December 31, 2002 was $3,975

Description	Cost	S/L Life	2001 Accumulated Depreciation	2002 Depreciation	2002 Accumulated Depreciation
Property and equipment	$15,766	Varied	$4,590	$3,975	$8,564

Page 3, Part IV, Line 57a
Property and Equipment

Description	Amount
Furniture and equipment	$15,766
Less accumulated depreciation	(8,564)
Net property and equipment	$7,202

Statement 2

Page 2, Part II, Line 43b
Other Expenses

Description	Total	Program Services	Management and General	Fund-raising
Payroll taxes and benefits	$54,142	$48,425	$2,859	$2,858
Consultants	12,000	10,080	960	960
Professional services	5,727	5,031	348	348
Training	35,786	30,849	2,468	2,469
Dues and subscriptions	2,758	2,675	41	42
Technology project	3,046	3,046	0	0
Meetings	31,536	26,152	2,692	2,692
Contract labor	9,662	9,662	0	0
Technical assistance	61	61	0	0
Land trust	2,500	2,500	0	0
Other	1,549	1,461	44	44
	$158,767	$139,942	$9,412	$9,413

Statement 3

Page 4, Part V
List of Officers, Directors and Key Employees

Name and Address	Title and Time	Compensation	To Employee Benefit Plan	Expense Account
Jane Highfill 6351 East 67th Ave Commerce City, CO 80022	Chairperson President 2-5 Hours/Month	0	0	0
Tom Powers 2221 Grape St Denver, CO 80207	Board Member 2-5 Hours/Month	0	0	0
Jeanne Orrben 4824 W 31st Ave Denver, CO 80212	Board Member 2-5 Hours/Month	0	0	0
Fr Marty Lally 11385 Grant Drive Northglenn, CO 80233	Board Member 2-5 Hours/Month	0	0	0
Donna Drotar 9762 West 77th Ave Arvada, CO 80005	Treasurer 2-5 Hours/Month	0	0	0
Michelle Valdez 25 South Winona Court Denver, CO 80219	Secretary 2-5 Hours/Month	0	0	0
Phil Kaspar 2618 W 13th Avenue Denver, CO 80204	Board Member 2-5 Hours/Month	0	0	0
Erika G Lindholm 2416 Emerson Street Denver, CO 80205	Board Member 2-5 Hours/Month	0	0	0
Susan Molina 4343 Clayton Street Denver, CO 80216	Board Member 2-5 Hours/Month	0	0	0
Phuonglan Nguyen 661 Pearl Street Denver, CO 80203	Board Member 2-5 Hours/Month	0	0	0
Mike Kromrey 1980 Dahlia Street Denver, CO 80220	Executive Director 40+ Hours/Week	67,973	1,000	0

Statement 4

Schedule A, Page 5, Part VI-B (i)
Description of Lobbying Activities

Total lobbying expenses were as follows

Paid staff (10 days for 2 staff)	$2,633
Mailings to members	400
Total expenses	$3,033

The primary lobbying work of MOP in 2002 involved our work to push for passage of an Inclusionary Housing Ordinance (affordable housing ordinance) through the City Council of Denver which was accomplished in August 2002

Our activity in 2002 included meetings with city council members and testimony before city council hearings, and some communication by organizational letters Staff themselves do not testify at hearings, but we are physically in attendance The testimony is done by volunteer leaders at MOP

Statement 5

Schedule A, Page 2, Part III, Line 4
403(b) Annuity Plan

The Organization contributes to a retirement plan established in accordance with Section 403(b) of the Internal Revenue Code, on behalf of participating employees During the year, the Organization made $999 in contributions to the plan