

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)

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 2001 calendar year, or tax year period beginning and ending

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

C Name of organization
BLUE RIBBON COALITION INC
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
4555 BURLEY DRIVE
 City or town, state or country, and ZIP + 4
CHUBBUCK, ID 83202-0003

D Employer identification number
82-0413981

E Telephone number
(208) 237-1008

F Accounting method: Cash Accrual
 Other (specify) ▶

G Web site: ▶ **WWW.SHARETRAILS.ORG**

J Organization type (check only one) 501(c)(3) (insert no.) 4947(a)(1) 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **958,678.**

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? **N/A** Yes No
 (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit GEN ▶

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances				
Revenue	1	Contributions, gifts, grants, and similar amounts received:		
	a	1a	252,797.	
	b	1b		
	c	1c		
	d	1d	252,797.	
	2	2	239,421.	
	3	3	276,055.	
	4	4	12,167.	
	5	5		
	6a	6a		
	b	6b		
	c	6c		
7	7			
8a	(A) Securities		(B) Other	
	8a	60,000.		
	8b	49,250.		
	8c	10,750.		
d	8d	STMT 1	10,750.	
9	9a			
b	9b			
c	9c			
10a	10a	8,668.		
b	10b	5,629.		
c	10c	STMT 2	3,039.	
11	11		109,570.	
12	12		903,799.	
Expenses	13	13	843,432.	
	14	14	75,142.	
	15	15	20,527.	
	16	16		
	17	17		939,101.
Net Assets	18	18	<35,302.>	
	19	19	215,782.	
	20	20	SEE STATEMENT 3	
	21	21	180,481.	

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.

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			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25	50,047.	0.	0.
26 Other salaries and wages	26	117,590.	24,574.	
27 Pension plan contributions	27	18,762.		
28 Other employee benefits	28	8,538.	380.	
29 Payroll taxes	29	11,845.		
30 Professional fundraising fees	30			
31 Accounting fees	31	3,187.	3,187.	
32 Legal fees	32	188,812.		
33 Supplies	33	188,563.	7,513.	14,585.
34 Telephone	34	17,223.	6,972.	
35 Postage and shipping	35	69,992.	2,687.	5,942.
36 Occupancy	36	18,034.	18,034.	
37 Equipment rental and maintenance	37	685.	685.	
38 Printing and publications	38	33,186.		
39 Travel	39	48,566.	179.	
40 Conferences, conventions, and meetings	40	13,269.		
41 Interest	41	7,345.		
42 Depreciation, depletion, etc. (attach schedule) ...	42	6,244.		
43 Other expenses not covered above (itemize):				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e SEE STATEMENT 4	43e	137,213.	10,931.	
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	939,101.	843,432.	20,527.

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

What is the organization's primary exempt purpose?

EDUCATION IN REGARDS TO USE OF PUBLIC LANDS

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 TO DISTRIBUTE INFORMATION ABOUT PUBLIC LANDS AND OTHER RECREATION AREAS AND THE WISE USE OF SUCH AREAS. ALSO TO WORK WITH PUBLIC LAND MANAGERS AND MEET WITH AND LOBBY WITH STATE AND FEDERAL GOVERNMENT OFFICES (Grants and allocations \$ _____)	843,432.
b TO CONTINUE PROVIDING AVAILABILITY OF PUBLIC LANDS.	
_____ (Grants and allocations \$ _____)	
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)	843,432.

Part IV Balance Sheets

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

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	165,773.	45	82,785.
	46 Savings and temporary cash investments	94,122.	46	220,797.
	47 a Accounts receivable	11,861.		
	b Less: allowance for doubtful accounts		47c	11,861.
	48 a Pledges receivable			
	b Less: allowance for doubtful accounts		48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable			
	b Less: allowance for doubtful accounts		51c	
	52 Inventories for sale or use	7,656.	52	9,475.
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments - land, buildings, and equipment: basis			
	b Less: accumulated depreciation		55c	
	56 Investments - other		56	
	57 a Land, buildings, and equipment: basis	73,446.		
	b Less: accumulated depreciation STMT 5	48,859.	57c	24,587.
58 Other assets (describe ▶ _____)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	343,680.	59	349,505.	
Liabilities	60 Accounts payable and accrued expenses	23,285.	60	39,148.
	61 Grants payable		61	
	62 Deferred revenue	104,613.	62	129,876.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ▶ _____)		65	
66 Total liabilities (add lines 60 through 65)	127,898.	66	169,024.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	215,782.	67	180,481.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
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)	215,782.	73	180,481.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	343,680.	74	349,505.	

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 VII Analysis of Income-Producing Activities (See Specific Instructions on page 32.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a LEGAL FUND INCOME					239,421.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					276,055.
95 Interest on savings and temporary cash investments			14	12,167.	
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	453000	10,750.			
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory	453000	3,039.			
103 Other revenue:					
a MAGAZINE/ADVERTISING	541800	93,461.			
b OTHER REVENUE - UNRELAT		416.			
c AFFINITY PROGRAM					1,336.
d SPECIAL PROGRAM					14,170.
e OTHER REVENUE-RELATED					187.
104 Subtotal (add columns (B), (D), and (E))		107,666.		12,167.	531,169.
105 Total (add line 104, columns (B), (D), and (E))					651,002.

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 Specific Instructions on page 32.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE STATEMENT 8

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33.)

(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 Specific Instructions on page 33.)

- (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).

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.

Please Sign Here

Signature of officer: _____ Date: _____ Type or print name and title: _____

Paid Preparer's Use Only

Preparer's signature: _____ Date: 05/08/02 Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: **DEATON & COMPANY, CHARTERED**
215 NORTH 9TH - SUITE A
POCATELLO, ID 83201-5278

EIN: _____ Phone no.: (208) 232-5825

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

2001

Name of the organization **BLUE RIBBON COALITION INC** Employer identification number **82 0413981**

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 ▶	0			

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 ▶	0	

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

Schedule A (Form 990 or 990-EZ) 2001

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 ► \$ _____ \$ <u>25,000.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	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)?	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?	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 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** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2).** (See section 509(a)(3).)

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

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

- 14** An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	245,757.	115,046.	122,254.	103,995.	587,052.
16 Membership fees received	299,600.	186,590.	168,248.	153,088.	807,526.
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	172,708.	144,303.	175,474.	125,467.	617,952.
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	12,537.	7,071.	6,613.	3,362.	29,583.
19 Net income from unrelated business activities not included in line 18	154,002.	103,035.	78,946.	<9,580.>	326,403.
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	884,604.	556,045.	551,535.	376,332.	2,368,516.
24 Line 23 minus line 17	711,896.	411,742.	376,061.	250,865.	1,750,564.
25 Enter 1% of line 23	8,846.	5,560.	5,515.	3,763.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 35,011.
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 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 1,750,564.
d Add: Amounts from column (e) for lines: 18 29,583. 19 326,403. 22 _____ 26b _____					26d 355,986.
e Public support (line 26c minus line 26d total)					26e 1,394,578.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 79.6645%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2000) _____ (1999) _____ (1998) _____ (1997) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2000) _____ (1999) _____ (1998) _____ (1997) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12, that received any unusual grants during 1997 through 2000, 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.

NONE

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?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			

32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	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.)			

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?	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)

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		0.
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		0.
38 Total lobbying expenditures (add lines 36 and 37)	38		25,000.
39 Other exempt purpose expenditures	39		939,102.
40 Total exempt purpose expenditures (add lines 38 and 39)	40		964,102.
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	169,615.
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		42,404.
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		0.
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		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.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount	169,615.	152,768.	113,584.	105,429.	541,396.
46 Lobbying ceiling amount (150% of line 45(e))					812,094.
47 Total lobbying expenditures	25,000.	25,000.	25,000.	25,000.	100,000.
48 Grassroots nontaxable amount	42,404.	38,192.	28,396.	26,357.	135,349.
49 Grassroots ceiling amount (150% of line 48(e))					203,024.
50 Grassroots lobbying expenditures	5,000.	5,000.	5,000.	5,000.	20,000.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 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:	Yes	No	Amount
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 .)			0.

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

Schedule B
(Form 990, 990-EZ, or
990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No. 1545-0047

2001

Name of organization

BLUE RIBBON COALITION INC

Employer identification number

82-0413981

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General rule** or a **Special rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General rule and a Special rule-see instructions.)

General Rule-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ► \$ _____

Caution: Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	PROGRAM SERVICES											
1	PRIOR YEAR ASSETS	VARIABLES	200DB	5.00	17	57,234.			57,234.	42,615.		4,811.
2	PENTIUM III	060101	SL	5.00	19B	4,149.			4,149.			415.
3	POWERMAC-SERVER	060101	SL	5.00	19B	4,340.			4,340.			434.
4	LOVESEAT	060101	SL	7.00	19C	294.			294.			21.
5	PRINTPRO	060101	SL	5.00	19B	251.			251.			25.
6	DFI MOTHERBOARD	060101	SL	5.00	19B	871.			871.			87.
7	TELEPHONE SYSTEM	030101	SL	7.00	19C	5,399.			5,399.			386.
8	SIGN	033001	SL	7.00	19C	908.			908.			65.
	* 990 PAGE 2 TOTAL PROGRAM SERVICES					73,446.		0.	73,446.	42,615.	0.	6,244.
	* GRAND TOTAL 990 PAGE 2 DEPR					73,446.		0.	73,446.	42,615.	0.	6,244.

FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 1

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
OFFICE BUILDING/LAND	04/08/97	07/11/01	PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	60,000.	47,600.	6,016.	4,366.	10,750.
TO FM 990, PART I, LN 8	60,000.	47,600.	6,016.	4,366.	10,750.

FORM 990

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 10

STATEMENT 2

INCOME

1. GROSS RECEIPTS	8,668	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		8,668
4. COST OF GOODS SOLD (LINE 13)	5,629	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		3,039

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	7,656	
7. MERCHANDISE PURCHASED		
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES	3,602	
10. OTHER COSTS		
11. ADD LINES 6 THROUGH 10		11,258
12. INVENTORY AT END OF YEAR	5,629	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12).		5,629

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

DESCRIPTION	AMOUNT
ROUNDING	1.
TOTAL TO FORM 990, PART I, LINE 20	1.

FORM 990 OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
DUES & SUBSCRIPTIONS	2,922.	2,922.		
REGISTRATIONS	100.	100.		
OFFICE EXPENSE	15,252.	7,053.	8,199.	
MISCELLANEOUS	4,287.	4,287.		
INSURANCE	3,474.	742.	2,732.	
CONTRACT LABOR	64,741.	64,741.		
TAXES	371.	371.		
PUBLIC RELATIONS	30,969.	30,969.		
TRAINING	9,871.	9,871.		
WEB PAGE	5,226.	5,226.		
TOTAL TO FM 990, LN 43	137,213.	126,282.	10,931.	

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 5

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
PRIOR YEAR ASSETS	57,234.	47,426.	9,808.
PENTIUM III	4,149.	415.	3,734.
POWERMAC-SERVER	4,340.	434.	3,906.
LOVESEAT	294.	21.	273.
PRINTPRO	251.	25.	226.
DFI MOTHERBOARD	871.	87.	784.
TELEPHONE SYSTEM	5,399.	386.	5,013.

SIGN	908.	65.	843.
TOTAL TO FORM 990, PART IV, LN 57	73,446.	48,859.	24,587.

FORM 990 OTHER REVENUE INCLUDED ON FORM 990 STATEMENT 6

DESCRIPTION	AMOUNT
GAIN ON SALE OF ASSETS	10,750.
TOTAL TO FORM 990, PART IV-A	10,750.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 7

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN CONTRIB	PLAN EXPENSE ACCOUNT
JACK WELCH 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	PRESIDENT 10	0.	0.	17,264.
A. DEAN RICHARDSON 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	VICE PRESIDENT 0	0.	0.	0.
JONI MOGSTAD 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	TREASURER 0	0.	0.	0.
KARL FRANK 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
BILL SCHUMANN 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
CARL ATAMANCZYK 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
RANDY BLOCK 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.

BILL DART 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
BRETT DAVIS 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
GRANT GERBER 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
TOM GLASS 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
PAT HARRIS 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
RALPH MCMULLEN 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
LOREN MCGOVERN 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
BETTY MORRIS 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
GREG MUMM 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
JIM MURPHY 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
BILL RUGG 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
JACK SHEETS 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.
BOB STEVENSON 4555 BURLEY DRIVE CHUBBUCK, ID 83202-0003	BOARD MEMBER 0	0.	0.	0.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2001

Department of the Treasury Internal Revenue Service

For calendar year 2001 or other tax year beginning and ending

See separate instructions.

Header section containing: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year; D Employer identification number; E NEW unrelated bus. activity codes; F Group exemption number; G Check organization type; H Describe the organization's primary unrelated business activity.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?
J The books are in care of CLARK COLLINS Telephone number 208-233-6570

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales (8,668), Cost of goods sold (5,629), and TOTAL (96,500).

Table with 4 columns: Part II Deductions Not Taken Elsewhere, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees; Depreciation; and Unrelated business taxable income (984).

Part III Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 35 (Organizations Taxable as Corporations), 36 (Trusts Taxable at Trust Rates), 37 (Proxy tax), 38 (Alternative minimum tax), and 39 (Total).

Part IV Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 40a-f (Credits), 41-43 (Taxes), 44a-f (Payments), 45 (Total payments), 46 (Estimated tax penalty), 47 (Tax due), 48 (Overpayment), and 49 (Enter the amount of line 48).

Part V Statements Regarding Certain Activities and Other Information (See instructions on page 15.)

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions about foreign accounts, distributions to trusts, and tax-exempt interest.

Schedule A - Cost of Goods Sold (See instructions on page 16.)

Table for Schedule A - Cost of Goods Sold. Includes Method of inventory valuation (COST) and lines 1 through 8 detailing inventory and costs.

Sign Here section containing signature of officer, date, title, and preparer information including signature, date, firm name (DEATON & COMPANY, CHARTERED), address, and phone number.

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(See instructions on page 16.)

Table for Schedule C with columns: 1 Description of property, 2 Rent received or accrued (a) From personal property, (b) From real and personal property, 3 Deductions directly connected with the income. Total income 0. Total deductions 0.

Schedule E - Unrelated Debt-Financed Income (See instructions on page 17.)

Table for Schedule E with columns: 1 Description of debt-financed property, 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property (a) Straight-line depreciation, (b) Other deductions, 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Column 4 divided by column 5, 7 Gross income reportable, 8 Allocable deductions. Totals 0. Total dividends-received deductions 0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (See instructions on page 18.)

Table for Schedule F with columns: 1 Name of Controlled Organization, 2 Employer Identification Number, 3 Net unrelated income, 4 Total of specified payments made, 5 Part of column (4) that is included in the controlling organization's gross income, 6 Deductions directly connected with income in column (5), 7 Taxable Income, 8 Net unrelated income (loss), 9 Total of specified payments made, 10 Part of column (9) that is included in the controlling organization's gross income, 11 Deductions directly connected with income in column (10), 12 Totals. Totals 0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(See instructions on page 18.)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals	0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(See instructions on page 18.)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Column totals	0.	0.				0.

Schedule J - Advertising Income (See instructions on page 19.)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Column totals (carry to Part II, line (5))	0.	0.				0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

(1) BLUE RIBBON						
(2) MAGAZINE	93,461.	21,813.	71,648.	44,764.	159,143.	71,648.
(3)						
(4)						
(5) Totals from Part I	0.	0.				0.
Column totals, Part II	93,461.	21,813.				71,648.

Schedule K - Compensation of Officers, Directors, and Trustees (See instructions on page 19.)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
			%
			%
			%
			%
Total - Enter here and on line 14, Part II, page 1			0.

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT	9
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ADVERTISING IN THE BLUE RIBBON COALITION MAGAZINE

TO FORM 990-T, PAGE 1

Depreciation and Amortization (Including Information on Listed Property) 990 See separate instructions. Attach to your tax return.

Name(s) shown on return: BLUE RIBBON COALITION INC Business or activity to which this form relates: FORM 990 PAGE 2 Identifying number: 82-0413981

Part I Election To Expense Certain Tangible 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: Maximum amount. See instructions for a higher limit for certain businesses. Line 2: Total cost of section 179 property placed in service. Line 3: Threshold cost of section 179 property before reduction in limitation. Line 4: Reduction in limitation. Subtract line 3 from line 2. Line 5: Dollar limitation for tax year.

Table with 3 columns: (a) Description of property, (b) Cost (business use only), (c) Elected cost. Rows 6-7 for listed property.

Table with 13 rows for Part I continuation. Line 7: Listed property. Line 8: Total elected cost of section 179 property. Line 9: Tentative deduction. Line 10: Carryover of disallowed deduction from line 13 of your 2000 Form 4562. Line 11: Business income limitation. Line 12: Section 179 expense deduction. Line 13: Carryover of disallowed deduction to 2002.

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 14: Special depreciation allowance for certain property. Line 15: Property subject to section 168(f)(1) election. Line 16: Other depreciation (including ACRS).

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

Table with 2 rows for Section A. Line 17: MACRS deductions for assets placed in service in tax years beginning before 2001. Line 18: If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here.

Section B - Assets Placed in Service During 2001 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-19g for general depreciation system.

Section C - Assets Placed in Service During 2001 Tax Year Using the Alternative 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 20a-20c for alternative depreciation system.

Part IV Summary (See instructions.)

Table with 3 rows for Part IV. Line 21: Listed property. Line 22: Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Line 23: For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="radio"/> Yes <input checked="" type="radio"/> No				24b If "Yes," is the evidence written? <input type="radio"/> Yes <input checked="" type="radio"/> No				
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for listed property acquired after September 10, 2001, and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
	:	:	%					
	:	:	%					
	:	:	%					
27 Property used 50% or less in a qualified business use:								
	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2001 tax year:					
	:				
43 Amortization of costs that began before your 2001 tax year					43
44 Total. Add amounts in column (f). See instructions for where to report					44