

Return of Organization Exempt From Income Tax

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

2004

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2004 calendar year, or tax year beginning **2004**, and ending **20**

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

C Name of organization, number and street, city, town, street, and ZIP code
React International, Inc.
5210 Auth Road
SUITLAND MD 20746

D Employer identification number: 51-0168558

E Telephone number: 301-316-2900

F Acctg. method: Cash, Accrual, Other (specify) _____

G Website: _____

J Organization type (check only one): 501(c)(3), 4947(a)(1) or 527

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

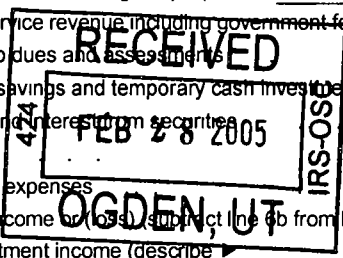
L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: 130,218.

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? (If "No," attach a list. See instructions.) Yes, No
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes, No
I Group Exemption Number: _____

M Check if 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 (See the instructions)

| | | | | | |
|---|---|--------|----------|---------|--|
| Revenue | 1 Contributions, gifts, grants, and similar amounts received: | | | | |
| | a Direct public support | 1a | 186. | | |
| | b Indirect public support | 1b | | | |
| | c Government contributions (grants) | 1c | | | |
| | d Total (add lines 1a through 1c) (cash \$ 186. noncash \$) | 1d | | 186. | |
| | 2 Program service revenue, including government fees and contracts (from Part VII, line 93) | 2 | | | |
| | 3 Membership dues and assessments | 3 | | 62,770. | |
| | 4 Interest on savings and temporary cash investments | 4 | | 2,885. | |
| | 5 Dividends and interest from securities | 5 | | 6,687. | |
| | 6 a Gross rents | 6a | | | |
| | b Less rental expenses | 6b | | | |
| | c Net rental income or (loss) (subtract line 6b from line 6a) | 6c | | | |
| 7 Other investment income (describe _____) | 7 | | | | |
| 8 a Gross amount from sales of assets other than inventory | (A) Securities | | | | |
| | 51,528. | 8a | | | |
| | b Less cost or other basis & sales expenses | 8b | | | |
| | 52,271. | 8b | | | |
| c Gain or (loss) (attach schedule) | 8c | | | | |
| (743.) | 8c | | | | |
| d Net gain or (loss) (combine line 8c, columns (A) and (B)) | 8d | | (743.) | | |
| 9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/> | | | | | |
| a Gross revenue (not including \$ _____ of contributions reported on line 1a) | 9a | | | | |
| b Less direct expenses other than fundraising expenses | 9b | | | | |
| c Net income or (loss) from special events (subtract line 9b from line 9a) | 9c | | | | |
| 10 a Gross sales of inventory, less returns and allowances | 10a | 3,973. | | | |
| b Less cost of goods sold | 10b | 2,020. | | | |
| c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) | 10c | | 1,953. | | |
| 11 Other revenue (from Part VII, line 103) | 11 | | 2,189. | | |
| 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) | 12 | | 75,927. | | |
| Expenses | 13 Program services (from line 44, column (B)) | 13 | 61,708. | | |
| | 14 Management and general (from line 44, column (C)) | 14 | 13,728. | | |
| | 15 Fundraising (from line 44, column (D)) | 15 | | | |
| | 16 Payments to affiliates (attach schedule) | 16 | | | |
| | 17 Total expenses (add lines 16 and 44, column (A)) | 17 | | 75,436. | |
| Net Assets | 18 Excess or (deficit) for the year (subtract line 17 from line 12) | 18 | 491. | | |
| | 19 Net assets or fund balances at beginning of year (from line 73, column (A)) | 19 | 132,800. | | |
| | 20 Other changes in net assets or fund balances (attach explanation) | 20 | (1,655.) | | |
| | 21 Net assets or fund balances at end of year (combine lines 18, 19, and 20) | 21 | 131,636. | | |



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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 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 | | | |
| 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 | | | |
| 26 | Other salaries and wages | 26 | 19152. | 16279. | 2873. |
| 27 | Pension plan contributions | 27 | | | |
| 28 | Other employee benefits | 28 | 201. | | 201. |
| 29 | Payroll taxes | 29 | 1586. | 1348. | 238. |
| 30 | Professional fundraising fees | 30 | | | |
| 31 | Accounting fees | 31 | 3580. | | 3580. |
| 32 | Legal fees | 32 | 453. | 385. | 68. |
| 33 | Supplies | 33 | 3846. | 3269. | 577. |
| 34 | Telephone | 34 | 1585. | 1347. | 238. |
| 35 | Postage and shipping | 35 | 7892. | 4371. | 3521. |
| 36 | Occupancy | 36 | 9396. | 7987. | 1409. |
| 37 | Equipment rental and maintenance | 37 | 3493. | 2969. | 524. |
| 38 | Printing and publications | 38 | 18028. | 18028. | |
| 39 | Travel | 39 | | | |
| 40 | Conferences, conventions, and meetings | 40 | 1041. | 1041. | |
| 41 | Interest | 41 | | | |
| 42 | Depreciation, depletion, etc (attach schedule) | 42 | 300. | | 300. |
| 43 | Other expenses not covered above (itemize) a Bank S/C | 43a | 199. | | 199. |
| | b Group insurance | 43b | 4684. | 4684. | |
| | c | 43c | | | |
| | d | 43d | | | |
| | e | 43e | | | |
| 44 | Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15 | 44 | 75436. | 61708. | 13728. |

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 the instructions)

| What is the organization's primary exempt purpose? <input checked="" type="checkbox"/> Citizens Radio Service | Program Service Expenses (Required for 501(c)(3) & (4) orgs. & 4947(a)(1) trusts, but optional for others) |
|---|--|
| a Educating 3,220 members and general public through a bi-monthly newsletter about using personal radio services for emergency aid to individuals, promote transportation safety. (Grants and allocations \$ _____) | 29620. |
| b Make personal eqpmt available for use at community events. Participate in citizens crime prevention programs. Provide support services to volunteers of the organ. thru meetings and conventions (Grants and allocations \$ _____) | 32088. |
| 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) | 61708. |

Part IV Balance Sheets (See 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 | 4,615. | 45 | 11,200. |
| | 46 Savings and temporary cash investments | 22,021. | 46 | 18,383. |
| | 47 a Accounts receivable | 47 a | | |
| | b Less allowance for doubtful accounts | 47 b | 47 c | |
| | 48 a Pledges receivable | 48 a | | |
| | b Less allowance for doubtful accounts | 48 b | 48 c | |
| | 49 Grants receivable | | 49 | |
| | 50 Receivables from officers, directors, trustees, and key employees (attach schedule) | | 50 | |
| | 51 a Other notes and loans receivable (attach schedule) | 51 a | | |
| | b Less allowance for doubtful accounts | 51 b | 51 c | |
| | 52 Inventories for sale or use | 12,746. | 52 | 17,325. |
| | 53 Prepaid expenses and deferred charges | 2,280. | 53 | 8,845. |
| | 54 Investments - securities (attach schedule) ▶ <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV | 127,706. | 54 | 122,487. |
| | 55 a Investments - land, buildings, and equipment: basis | 55 a 24,561. | | |
| | b Less accumulated depreciation (attach schedule) | 55 b 24,561. | 55 c | |
| 56 Investments - other (attach schedule) | | 56 | | |
| 57 a Land, buildings, and equipment basis | 57 a | | | |
| b Less accumulated depreciation (attach schedule) | 57 b | 57 c | | |
| 58 Other assets (describe ▶ Schedule) | 300. | 58 | 660. | |
| 59 Total assets (add lines 45 through 58) (must equal line 74) | 170,328. | 59 | 178,900. | |
| Liabilities | 60 Accounts payable and accrued expenses | 1,650. | 60 | 11,242. |
| | 61 Grants payable | | 61 | |
| | 62 Deferred revenue | 35,878. | 62 | 36,022. |
| | 63 Loans from officers, directors, trustees, and key employees (attach schedule) | | 63 | |
| | 64 a Tax-exempt bond liabilities (attach schedule) | | 64 a | |
| | b Mortgages and other notes payable (attach schedule) | | 64 b | |
| | 65 Other liabilities (describe ▶) | | 65 | |
| 66 Total liabilities (add lines 60 through 65) | 37,528. | 66 | 47,264. | |
| 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 | 132,800. | 67 | 131,636. |
| | 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) | 132,800. | 73 | 131,636. | |
| 74 Total liabilities and net assets/fund balances (add lines 66 and 73) | 170,328. | 74 | 178,900. | |

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 the instructions)

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

| | | | | |
|-----|--|----|--------|--------|
| a | Total revenue, gains, and other support per audited financial statements | ▶ | a | 74272. |
| b | Amounts included on line a but not on line 12, Form 990 | | | |
| (1) | Net unrealized gains on investments | \$ | -1655. | |
| (2) | Donated services & use of facilities | \$ | | |
| (3) | Recoveries of prior year grants | \$ | | |
| (4) | Other (specify) | | | |
| | | \$ | | |
| | Add amounts on lines (1) through (4) | ▶ | b | -1655. |
| c | Line a minus line b. | ▶ | c | 75927. |
| d | Amounts included on line 12, Form 990 but not on line a: | | | |
| (1) | Investment expenses not included on line 6b, Form 990 | \$ | | |
| (2) | Other (specify) | | | |
| | | \$ | | |
| | Add amounts on lines (1) and (2) | ▶ | d | |
| e | Total revenue per line 12, Form 990 (line c plus line d) | ▶ | e | 75927. |

| | | | | |
|-----|--|----|---|--------|
| a | Total expenses and losses per audited financial statements | ▶ | a | 75436. |
| b | Amounts included on line a but not on line 17, Form 990 | | | |
| (1) | Donated services & use of facilities | \$ | | |
| (2) | Prior year adjustments reported on line 20, Form 990 | \$ | | |
| (3) | Losses reported on line 20, Form 990 | \$ | | |
| (4) | Other (specify) | | | |
| | | \$ | | |
| | Add amounts on lines (1) through (4) | ▶ | b | |
| c | Line a minus line b | ▶ | c | 75436. |
| d | Amounts included on line 17, Form 990 but not on line a: | | | |
| (1) | Investment expenses not included on line 6b, Form 990 | \$ | | |
| (2) | Other (specify) | | | |
| | | \$ | | |
| | Add amounts on lines (1) and (2) | ▶ | d | |
| e | Total expenses per line 17, Form 990 (line c plus line d) | ▶ | e | 75436. |

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see 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 comp | (E) Expense account and other allowances |
|--------------------------------|--|---|---|--|
| See attached list all officers | officers 10 | 0 | | |
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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 the instructions

| Part VI Other Information (See 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? | 78 a | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 78 b | |
| 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? | 80 a | X |
| b | If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt. | | |
| 81 a | Enter direct or indirect political expenditures. See line 81 instructions | 81 a | |
| b | Did the organization file Form 1120-POL for this year? | 81 b | 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? | 82 a | 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.) | 82 b | |
| 83 a | Did the organization comply with the public inspection requirements for returns and exemption applications? | 83 a | X |
| b | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | 83 b | X |
| 84 a | Did the organization solicit any contributions or gifts that were not tax deductible? | 84 a | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 84 b | |
| 85 | 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? | 85 a | |
| b | Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. | 85 b | |
| c | Dues, assessments, and similar amounts from members | 85 c | |
| d | Section 162(e) lobbying and political expenditures | 85 d | |
| e | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices | 85 e | |
| f | Taxable amount of lobbying and political expenditures (line 85d less 85e) | 85 f | |
| g | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? | 85 g | |
| 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? | 85 h | |
| 86 a | 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 | 86 a | |
| b | Gross receipts, included on line 12, for public use of club facilities | 86 b | |
| 87 a | 501(c)(12) orgs. Enter: a Gross income from members or shareholders | 87 a | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 87 b | |
| 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 <input type="checkbox"/> ; section 4912 <input type="checkbox"/> , section 4955 <input type="checkbox"/> | | |
| 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 | 89 b | X |
| c | Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/> | | |
| d | Enter: Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/> | | |
| 90 a | List the states with which a copy of this return is filed <input type="checkbox"/> IL | | |
| b | Number of employees employed in the pay period that includes March 12, 2004 (See instructions) | 90 b | 1 |
| 91 | The books are in care of <input type="checkbox"/> <u>React International Inc</u> Telephone no. <input type="checkbox"/> <u>301-316-2900</u> Located at <input type="checkbox"/> <u>5210 Auth Rd Ste 403, Suitland MD</u> ZIP + 4 <input type="checkbox"/> <u>20746-4325</u> | | |
| 92 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 92 | | |

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

| | Unrelated business income | | Excluded by section 512, 513, or 514 | | (E) Related or exempt function income |
|---|---------------------------|---------------|--------------------------------------|---------------|---|
| | (A) Business code | (B) Amount | (C) Exclusion code | (D) Amount | |
| Note: Enter gross amounts unless otherwise indicated | | | | | |
| 93 Program service revenue | | | | | |
| a _____ | | | | | |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| f Medicare/Medicaid payments | | | | | |
| g Fees & contracts from govt agencies | | | | | |
| 94 Membership dues & assessments | | | | | 62,770. |
| 95 Interest on savings and temporary cash investments | | | 14 | 2,885. | |
| 96 Dividends & interest from securities | | | 14 | 6,687. | |
| 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 | | | | (743.) | |
| 101 Net income or (loss) from special events | | | | | |
| 102 Gross profit or (loss) from sales of inventory | | | | | 1,953. |
| 103 Other revenue: a Late fees | | | | | 2,189. |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| 104 Subtotal (add columns (B), (D), and (E)) | | | | 8,829. | 66,912. |
| 105 Total (add line 104, columns (B), (D), and (E)) | | | | | 75,741. |

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 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) |
|----------|--|
| 93 | To promote the use of the citizen band radio services and other |
| Thru | personal radio services as an additional source of communication |
| 103 | for emergencies, disasters, and other forms of aid to the public |

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

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions.)

- (a) Did the organization, during the yr., 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 Thomas Karkh 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.

2/19/2005 Date
Treasurer

Date Check if Preparer's SSN or PTIN (See Gen. Inst. W)

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

2004

Name of the organization
React International, Inc.

Employer identification number
51-0168558

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See 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 allowance |
|---|--|------------------|---|---|
| none | | | | |
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Total number of other employees paid over \$50,000 ▶

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See 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 | | |
| | | |
| | | |
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Total number of others receiving over \$50,000 for professional services ▶

| Part III Statements About Activities (See instructions) | Yes | No |
|--|-----|----|
| <p>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 ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B.)</p> <p>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.</p> | 1 | X |
| <p>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)</p> <p>a Sale, exchange, or leasing of property?</p> | 2a | X |
| <p>b Lending of money or other extension of credit?</p> | 2b | X |
| <p>c Furnishing of goods, services, or facilities?</p> | 2c | X |
| <p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p> | 2d | X |
| <p>e Transfer of any part of its income or assets?</p> | 2e | X |
| <p>3a Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)</p> | 3a | X |
| <p>b Do you have a section 403(b) annuity plan for your employees?</p> | 3b | X |
| <p>4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?</p> | 4a | X |
| <p>b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?</p> | 4b | X |

| Part IV Reason for Non-Private Foundation Status (See instructions) |
|--|
| <p>The organization is not a private foundation because it is: (Please check only ONE applicable box)</p> <p>5 <input type="checkbox"/> A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)</p> <p>6 <input type="checkbox"/> A school. Section 170(b)(1)(A)(ii). (Also complete Part V)</p> <p>7 <input type="checkbox"/> A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)</p> <p>8 <input type="checkbox"/> A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)</p> <p>9 <input type="checkbox"/> A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____</p> <p>10 <input type="checkbox"/> 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)</p> <p>11a <input type="checkbox"/> 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.)</p> <p>11b <input type="checkbox"/> A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)</p> <p>12 <input checked="" type="checkbox"/> 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)</p> <p>13 <input type="checkbox"/> 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))</p> |

Provide the following information about the supported organizations (See 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 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) 2003 | (b) 2002 | (c) 2001 | (d) 2000 | (e) Total |
|--|----------|----------|----------|----------|-----------|
| 15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.) | 1341 | 8663 | 937 | 6154 | 17095 |
| 16 Membership fees received | 60322 | 63465 | 63614 | 70704 | 258105 |
| 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 | 4972 | 4988 | 5335 | 5686 | 20981 |
| 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 | 9365 | 8821 | 11039 | 14333 | 43558 |
| 19 Net income from unrelated business activities not included in line 18 | | | | | |
| 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | | | | |
| 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge. | | | | | |
| 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. | 1167 | 689 | 410 | 1862 | 4128 |
| 23 Total of lines 15 through 22 | 77167 | 86626 | 81335 | 98739 | 343867 |
| 24 Line 23 minus line 17 | 72195 | 81638 | 76000 | 93053 | 322886 |
| 25 Enter 1% of line 23 | 772 | 866 | 813 | 987 | |

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ **26a**

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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶ **26b**

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ **26c**

d Add: Amounts from column (e) for lines: 18 _____ 19 _____
22 _____ 26b _____ ▶ **26d**

e Public support (line 26c minus line 26d total) ▶ **26e**

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ **26f** %

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.

(2003) _____ (2002) _____ (2001) _____ (2000) _____

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 the year.

(2003) _____ (2002) _____ (2001) _____ (2000) _____

c Add: Amounts from column (e) for lines: 15 _____ 17095 16 _____ 258105
17 _____ 20981 20 _____ 21 _____ ▶ **27c** 296181

d Add: Line 27a total _____ and line 27b total _____ ▶ **27d**

e Public support (line 27c total minus line 27d total) ▶ **27e** 296181

f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) ▶ **27f** 343867

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ **27g** 86.13 %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ **27h** 12.67 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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 VI-A Lobbying Expenditures by Electing Public Charities (See 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 | | (a) Affiliated group totals | (b) To be completed for ALL electing organizations | | | | | | | | | | | | |
|---|---|--------------------------------------|---|--------------------|------------------------------|---|---|---|---|--|--|-------------------|-------------|-----------|--|
| (The term "expenditures" means amounts paid or incurred) | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | |
| 39 | Other exempt purpose expenditures | 39 | | | | | | | | | | | | | |
| 40 | Total exempt purpose expenditures (add lines 38 and 39) | 40 | | | | | | | | | | | | | |
| 41 | Lobbying nontaxable amount. Enter the amount from the following table - | | | | | | | | | | | | | | |
| | <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">If the amount on line 40 is -</td> <td style="width: 50%;">The lobbying nontaxable amount is -</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table> | 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 | 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 | 41 | |
| 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 | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | |
| 43 | Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 | 43 | | | | | | | | | | | | | |
| 44 | Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 | 44 | | | | | | | | | | | | | |

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)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|---|-------------|-------------|-------------|-------------|--------------|
| Calendar year (or fiscal year beginning in) ▶ | (a) 2004 | (b) 2003 | (c) 2002 | (d) 2001 | (e) Total |
| 45 Lobbying nontaxable amount | | | | | |
| 46 Lobbying ceiling amount (150% of line 45(e)) | | | | | |
| 47 Total lobbying expenditures | | | | | |
| 48 Grassroots nontaxable amount | | | | | |
| 49 Grassroots ceiling amount (150% of line 48(e)) | | | | | |
| 50 Grassroots lobbying expenditures | | | | | |

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See 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.

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines c through h.)

| Yes | No | Amount |
|--------------------------|-------------------------------------|--------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

(i) Cash

(ii) Other assets

b Other transactions:

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

| | Yes | No |
|---------------|-----|----|
| 51a(i) | | X |
| a(ii) | | X |
| b(i) | | X |
| b(ii) | | X |
| b(iii) | | X |
| b(iv) | | X |
| b(v) | | X |
| b(vi) | | X |
| c | | X |

| (a) Line no. | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, & sharing arrangements |
|-----------------|------------------------|--|---|
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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 |
|-----------------------------|-----------------------------|------------------------------------|
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US 990**Investments - Securities: Page 3, Line 54****2004**

| Description | Book Value |
|------------------------------|------------|
| Stocks | 17,550. |
| Corporate bonds | 12,411. |
| US Govt and Federal agencies | 26,050. |
| Mutual funds | 66,476. |
| | 122,487. |

US 990

Investments - Land, Buildings and Equipment
990: Page 3, Line 55; 990-PF: Page 2, Line 11

2004

| Description | Cost / Basis | Accumulated Deprecation | Book Value |
|------------------------|--------------|----------------------------|------------|
| Computer equipment | 18,093. | 18,093. | |
| Furniture and fixtures | 6,468. | 6,468. | |
| | 24,561. | 24,561. | |

Sale of Securities

US 990

990: Page 6, Line 100; 990-EZ: Page 1, Line 5; 990PF: Page 11, Line 8

2004

| Description | Date Acquired | Date Sold | Sales Price | Cost/Basis | Selling Expense | Accumulated Depreciation |
|-------------|---------------|------------|--------------------|--------------------|-----------------|--------------------------|
| Stock/bonds | 12/31/2002 | 01/02/2004 | 51,528. 51,528. | 52,271. 52,271. | | |

Gross Profit on Sales of Inventory

US 990 990: Page 6, Line 102; 990-EZ: Page 1, Line 7; 990-PF: Page 11, Line 10

2004

| Description | Gross Sales Less Returns | Cost of Goods Sold | Gross Profit |
|-------------------------------|-----------------------------|-----------------------|------------------|
| Sale of REACT inventory items | 3,973. 3,973. | 2,020. 2,020. | 1,953. 1,953. |

REACT INTERNATIONAL, INC.

FYE: 12/31/04

EIN: 51-0168558

FORM 990

SCHEDULE A PART IV-A, LINE 22 - OTHER INCOME

| <u>DESCRIPTION</u> | <u>2003</u> | <u>2002</u> | <u>2001</u> | <u>2000</u> |
|-------------------------|----------------|--------------|--------------|----------------|
| MISCELLANEOUS | \$0 | \$0 | \$0 | \$900 |
| REACTer ADVERTISING | 438 | 8 | 0 | 0 |
| INSURANCE REIMBURSEMENT | | 0 | 0 | 962 |
| LATE FEES | 729 | 681 | 410 | 0 |
| | <u>\$1,167</u> | <u>\$689</u> | <u>\$410</u> | <u>\$1,862</u> |



REACT International, Inc.
5210 Auth Road - Suite 403
Suitland, MD 20746

(301)316-2900 Office
(301)316-2903 Fax

e-mail: <react@reactintl.org>
<[http://www/reactintl.org](http://www.reactintl.org)>

Contact Directory

OFFICERS & BOARD OF DIRECTORS – 2003-2004

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8607 Timber Ash
San Antonio, TX 78250

Norman L. Kaplan
2605 Loma Street
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Fax (775)218-0732
e-mail: <membership@reactintl.org>

Cell (210-771-7075
Fax (210)680-2680
e-mail: <lbesing@reactintl.org>

HP (301)649-6389
e-mail: <nkaplan@erols.com>

Title

President

Executive Vice President

Secretary

Treasurer

Board of Directors

Laurence "Larry" Fry
833 Cornelia Street
Janesville, WI 53545-1609

Fred Lanshe
610 Washington St.
Allentown, PA 18102

Contact

HP (608)752-4547
Fax (608)757-2379
e-mail: <lfryr@reactintl.org>

HP/FAX (610)434-3235
e-mail: <flanshe@reactintl.org>

Title/Region Assigned

Chairman of the Board
Region 5
ND, SD, NE, MN, IA, WI, IL

Region 1
ME, VT, NH, MA, CT, RI, NY, PA

(Continued on next page)

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OFFICERS & BOARD OF DIRECTORS – 2003-2004 (*Continues*)

| <u>Board of Directors</u> | <u>Contact</u> | <u>Title/Region Assigned</u> |
|---|---|---|
| Dan Manlove 4019 West Dogwood Ave. Chester, VA 23831-7311 | HP (804-283-2210 e-mail: | Region 2 DE, NJ, MD, VA, KY, WV |
| John T. Knott 833 Grenadier Drive Orlando, FL 32807 | HP/Fax (321)438-5952 e-mail: <jknott@orlandoreact.org> | Region 3 TN, NC, SC, MS, AL, GA, FL |
| Paul Jackson 424 Montreal Place Westerville, OH 43081 | HP (614)891-2357 | Region 4 MI, IN, OH |
| Laurence O. "Larry" Fry 833 Cornelia Street Janesville, WI 53545-1609 | HP (608)752-4547 Fax (608)757-2379 e-mail: <lfry@reactintl.org> | Region 5 ND, SD, NE, MN, IA, WI, IL |
| Frank Jennings 19933 Nilsen Lane NW Poulsbo, WA 98370 | HP (360)779-4125 Fax (360)779-2468 e-mail <fjennings@reactintl.org> | Region 6 AK, HI, WA, OR, ID, MT, WY |
| Robert Kaster, Jr. 2401 SW 76 Oklahoma City, OK 73159 | HP (405)685-9745 e-mail: <bobk1011@cox.net> | Region 7 AR, LA, NM, CO, KS, MO, OK, TX |
| Rob Clark 3420 W. Arby Avenue Las Vegas, NV 89118 | HP (702)361-5322 e-mai: <crestreact89@aol.com> | Region 8 CA, NV, UT, AZ |
| Kenny Jagdeosingh P.O. Box 3062 St. James Post Office Trinidad & Tobago, West Indies | HP (868)628-2886 Fax (868)622-2557 e-mail: <kennyr631@tsst.net.tt> | Region 9 Canada, W. Indies, PR, UK, Germany The Philippines, Scotland |

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