Department of the Treasury Internal Revenue Service

Short Form 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) For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year The organization may have to use a copy of this return to satisfy state reporting requirements

2005

OMB No 1545-1150

Open to Public Inspection

Other (specify)	Accrual not 1990,
Name change Intital return Application pending Solicity Specific Sp	not 1 990,
Name change Intital return Application pending September Primal return Application pending Section 501(c/3) organizations and 4947(a/1) nonexempt charitable trusts Ga Accounting method Cash Accounting metho	not 1 990,
Colorado Springs Colorado Sp	not 1 990,
F Group Exemption F Gr	not 1 990,
Amended return Application pending library (bins). * Section 501(c/3) organizations and 4947(a/1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Web site: N/A	not 1 990,
**Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Web site: ► N/A	not 1 990,
**Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Web site: ► N/A	not 1 990,
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Web site: Final N/A Jorganization type (check only one) - X 501(c) (3) 4947(a)(1) or 527 990-EZ. 990	990,
Web site: N/A Yoganization type (check only one) - X 501(c) (3) (insert no) 4947(a)(1) or 527 990-EZ, or 990-FF).	990,
J Organization type (check only one) — X 501(c) (3)	
Solicy	he IRS;
K Check X if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return. L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. Part Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions) 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule) For a Gross revenue (not including \$	he IRS;
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12 Salaries, other compensation, and employee benefits E 13 Professional fees and other payments to independent contractors 2007	
Professional fees and other payments to independent contractors \(\alpha \)	
S 14 Occupancy, rent, utilities, and maintenance 5.	
E 15 Printing, publications, postage, and shipping	
15 Printing, publications, postage, and shipping OGDEN. UT 16 Other expenses (describe) 16 16	
17 Total expenses (add lines 10 through 16)	0.
To total expenses (each miss to through to)	0.
To Excess of General for the year (the year time vi)	
Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year	^
igure reported on prior year's return)	0.
T 1 20 Other changes in net assets or fund balances (attach explanation) 20	
S 21 Net assets or fund balances at end of year (combine lines 18 through 20)	0.
Part II Balance Sheets – If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.	
(See Instructions) (A) Beginning of year (B) End of year	year
22 Cash, savings, and investments 22	
23 Land and buildings 23	
24 Other assets (describe >) . 24	
25 Total assets 0 . 25	
	0.
26 Total liabilities (describe ►) 0 . 26 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 0 . 27	0. 0. 0.

Form	990-EZ (2005) TOXIC ELEMENT F	RESEARCH FOUNDATION			1-094	<u> 40289</u>	F	age 2
Part	III Statement of Program Ser	vice Accomplishments	(See Instructions)	N/A		Expen	ses	
What i	s the organization's primary exempt purpose?				_ (Req	uired for 5	01(c)(3	3)
Desc	ribe what was achieved in carrying out to	he organization's exempt purp	oses. In a clear and co	ncise manner,	and	(4) organız '(a)(1) trus	ations	and
desci	ibe the services provided, the number of am title	or persons benefited, or other i	relevant information for	eacn	for o	thers)	is, opti	Ullai
28								
					1			
					1			
	(Grants \$) If the	his amount includes foreign gr	ants check here		1 28a			
20	(Glants ϕ	ms amount melades lereign gr	arts, check here	<u> </u>	 	<u> </u>		
29					1			
				-	1			
				-	1 29a	1		
	(Grants \$) If t	his amount includes foreign gi	ants, check here	-	254	 		
30					-	1		
		. _			-			
				ے۔۔۔۔۔	1			
		<u>his amount includes foreign gr</u>	ants, check here	>	30 a	<u> </u>		
31	Other program services (attach schedul			. –	,			
		his amount includes foreign gi	ants, check here	•	31 a	ļ		
	Total program service expenses (add		•	•	122	<u> </u>		
Part	IV List of Officers, Directors,	Trustees, and Key Emp	loyees (List each one	even if not com	pensa			
		(B) Title and average hours	(C) Compensation (If	(D) Contribution		(E) Expe	nse ac	count
	(A) Name and address	per week devoted to position	not paid, enter -0)	employee benefit pl deferred compens	ans and sation	and other	allow	ances
		to position						
		1						
		-						
		┪				1		
		4						
						 		
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		4		1				
Parl	V Other Information (Note the	attachment requirement in th	o instructions)	SEE ST.	ΔጥΕΜΙ	ENT 1	Yes	No
			•			· · · · · · · · · · · · · · · · · · ·	163	110
33	Did the organization engage in any acti	ivity not previously reported to	the IRS? If 'Yes,' attac	h a detailed des	cription	n 33		x
24	of each activity .	decreased by the web seconded by the	- IDC2 if 'Van ' attack a canfo	rmad annu of the cho		34		$\frac{1}{x}$
34	Were any changes made to the organizing or gover	•					+	1
35	If the organization had income from business activ	ities, such as those reported on lines 2,	6, and 7 (among others), but	not reported on Form	990-T, a	attach		
	a statement explaining your reason for not reporting	-						\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Did the organization have unrelated business gros		notice, reporting, and proxy t	ax requirements?		35		X
	If 'Yes,' has it filed a tax return on Forr	-				35	b N	
	Was there a liquidation, dissolution, termination, o				•	36	-	X
37 a	Enter amount of political expenditures, direct or in	idirect, as described in the instructions	, ▶	37a		0	_ -	 -
ь	Did the organization file Form 1120-PO	L for this year?				37	b	X
							_	لــــا
38 a	Did the organization borrow from, or many such loans made in a prior year an	ake any loans to, any officer,	director, trustee, or key	employee or we	re	38	ا	X
		· ·	e period covered by thi	38b		N/A	-	+ **
	olf 'Yes,' attach the sch specified in the In 38 instru	actions and enter the amount involved		300		- IV/ A		
	501(c)(7) organizations Enter:			100		NT / A		
	Initiation fees and capital contributions		•	39a		N/A		
	Gross receipts, included on line 9, for p		•	39b		N/A		
40 a	501(c)(3) organizations Enter amount							
	section 4911 ► 0.	_; section 4912 ►	0.; section 49	955 ►		0.	_	
E	501(c)(3) and (4) organizations. Did the organization	on engage in any section 4958 excess b	enefit transaction during the y	ear or did it become a	ware of	an . 40	ь	x
,	excess benefit transaction from a prior year? If 'Ye Enter amount of tax imposed on organi	s, <i>auden an explanation</i> Ization managers or disquialifie	ed persons during the v	ear under		40	~	1 **
	sections 4912, 4955, and 4958		a persons during the y		>			<u>0.</u>
c	Enter amount of tax on line 40c reimbu	irsed by the organization						0.
							~~ ==	(2005)

Form 990-l	EZ (2005) TOXIC ELEMENT RESEARCH FOUNDATION	84-0940289	Page 3				
Part V	Other Information (Note the attachment requirement in the instructions)	(Continued)					
41 List th	he states with which a copy of this return is filed NONE						
42 a The bo	nooks are in care of ►	Telephone no. ►					
Locate	ed at ► ,	ZIP + 4 ►					
h At ar	ny timo during the calendar year, did the organization have an interest in or a s	unnature or other authority over a	Yes No				
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?							
If 'Ye	es,' enter the name of the foreign country						
See	the instructions for exceptions and filing requirements for Form TD F 90-22.1.						
cAt any time during the calendar year, did the organization maintain an office outside of the U.S.?							
If 'Ye	es,' enter the name of the foreign country:.						
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here							
	enter the amount of tax-exempt interest received or accrued during the tax year	- 1 1	N/A				
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedule true, correct, and complete Declaration of preparer (other than officer) is based on all information of wh	s and statements, and to the best of my knowledge a	nd belief, it is				
Please	The, correct, and complete becaration of preparer (other trial officer) is based on an information of the	man preparer rips dry knowledge					
Sign	20 Dec	06 president					
Here	Signature of officer Date	Type or print name and title					
Paid	Preparer's Date CPA	1 14 I General Inst	SN or PTIN (See ruction W)				
Pre-	Significant Value / Life	-18-06 semiloyed ► P00329	228				
parer's	Firm's name (or PATRICK J. MURPHY, P.C. yours if self-	- 04 16	10705				
Use	employed), address, and COLORADO CRPTINGS COLORADO 1460		512735 8-8711				
Only BAA	ZIP+4 COLORADO SPRINGS, CO 80918-1469		990-EZ (2005)				
DAA	TEEA0812L 02/06/06	i Oniii	330-LE (2003)				

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

2005

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

Employer identification number Name of the organization 84-0940289 TOXIC ELEMENT RESEARCH FOUNDATION Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions List each one If there are none, enter 'None,') (d) Contributions to employee benefit plans and deferred (b) Title and average (c) Compensation (e) Expense (a) Name and address of each account and other employee paid more than \$50,000 hours per week allowances devoted to position compensation NONE Total number of other employees paid over \$50,000 Part II - A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Part II — B | Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions) (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service NONE Total number of other contractors receiving over \$50,000 for other services

Schedule	A (Form 990 or 990-EZ) 2005 TOXIC ELEMENT RESEARCH FOUNDATION 84-0940289	9	F	age 2
Part III	Statements About Activities (See Instructions.)		Yes	No
	ing the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid incurred in connection with the lobbying activities \$\bigs\ \N/A			
-	ıst equal amounts on line 38, Part VI-A, or line i of Part VI-B) .	_1		X
org	panizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other anizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the bying activities.			
sub	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any istantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any able organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal seficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)		_	
a Sal	e, exchange, or leasing of property?	2a		х
b Ler	iding of money or other extension of credit?	2b		Х
c Fur	nishing of goods, services, or facilities?	2c		Х
d Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		Х
e Tra	nsfer of any part of its income or assets?	2e		Х
3a Do	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an			v
	lanation of how you determine that recipients qualify to receive payments.) you have a section 403(b) annuity plan for your employees?	3a 3b		X
	ing the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		X
4 a Did	you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?			
		_4a		X
b D6	you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		Х
	A church, convention of churches, or association of churches Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquire organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization (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) box that describes the type of supporting organization. Type 1 Type 2 Type 3 Provide the following information about the supported organizations. (See instructions.)	170(to	ss recuppointe	eipts rt
14	An organization organized and operated to test for public safety Section 509(a)(4) (See instructions.)	rm 99	0 F 7	

	Support Schedule						ung.
Note	: You may use the worksheet in t	ne instructions for con	iverting from the ac	crual to the cash me		ig T	-
begi	ndar year (or fiscal year nning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001		(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	N/A				_	
16	Membership fees received	. <u> </u>		ļ. <u> </u>			
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						
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						
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							
23	Total of lines 15 through 22.						
24	Line 23 minus line 17						
	Enter 1% of line 23						
	Organizations described on line			column (e), line 24		26a	
t	 Prepare a list for your records to show th supported organization) whose total gifts return. Enter the total of all these excess 	for 2001 through 2004 excee	buted by each person (oded the amount shown in	other than a governmental n line 26a. Do not file th i	unit or publicly is list with your	26 b	
(: Total support for section 509(a)(1) test: Enter line 24,	column (e)		•	26 c	
(Add: Amounts from column (e) f	or lines: 18		19	<u>-</u>		
		22		26 b		26 d	
	Public support (line 26c minus li				•	26 e	
	Public support percentage (line		led by line 26c (der	nominator))		26f	%
27 a	Organizations described on line For amounts included in lines 15 name of, and total amounts rece such amounts for each year	i, 16, and 17 that were eived in each year from	n, each 'disqualified	d person.' Do not fil	e this list with you	ır return.	Enter the sum of
	(2004)	(2003)	(2002)		(2001)		
	bFor any amount included in line to show the name of, and amou \$5,000 (Include in the list organ After computing the difference b differences (the excess amounts	17 that was received to the received for each year actions described in letween the amount resolution for each year.	from each person (ear, that was more lines 5 through 11b ceived and the larg	other than 'disqualif than the larger of (1 , as well as individu er amount describe	led persons'), pre I) the amount on la als) Do not file th d in (1) or (2), ente	oare a list ine 25 for i is list wit er the sur	t for your records the year or (2) th your return. n of these
	(2004) c Add Amounts from column (e) 1	(2003)	(2002)		⁽²⁰⁰¹⁾		
•	Add Amounts from column (e) t	or lines: 15		16		1 1	
	17	20 ar		21		27 c	
•	d Add: Line 27a total	ar	nd line 27b total .			27 d	
	Public support (line 27c total mil			امساحى	· •	27e	
	Total support for section 509(a)(27-	%
	Public support percentage (line				nator))	2/g 27h	%
	Investment income percentage Unusual Grants: For an organization						
_	list for your records to show, for nature of the grant. Do not file t	each year, the name his list with your return	of the contributor, t	the date and amoun hese grants in line	t of the grant, and	l a brief d	escription of the

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that			
	makes the policy known to all parts of the general community it serves? . If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement.)	31		
	Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b		
	 C Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? 	32 c 32 d		
	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?	33 a		
	b Admissions policies?	33b		
	c Employment of faculty or administrative staff? d Scholarships or other financial assistance?	33c 33d		
	e Educational policies?	33e		
	f Use of facilities?	33 f	_	
	g Athletic programs?	33 g		
	h Other extracurricular activities?	33 h		
	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?	34 a		
	b Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement.	34b		
35		35		

Schedule A (Form 990 or 990-EZ) 2005 TOXIC ELEMENT RESEARCH FOUNDATION

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)

	(To be complete	ed ONLY by an eligible	organization that filed	Form 5768)					N/A		
Chec	k > a If the organiz	zation belongs to an aff	filiated group. Check	▶ b If you	ı check	ed ' a ' and 'l	lımıted	contre	ol' provisions apply.		
Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred) (a) Affiliated group totals To be completed for ALL electing organizations											
36	Total lobbying expenditi	ures to influence public	opinion (grassroots lot	obying) .	36						
37	Total lobbying expendition	-	-	ying)	37	_					
38	Total lobbying expendition		37) .		38						
39	Other exempt purpose	•			39						
40	Total exempt purpose e				40	-					
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										
	1 1										
	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										
	Over \$1,500,000 but not over \$		000 plus 10% of the excess ov		 			$\overline{}$			
	Over \$17,000,000		100,000 .	ci \$1,500,000							
42	Grassroots nontaxable	• •	,		42						
43	Subtract line 42 from lin	•			43						
44	Subtract line 41 from lin				44						
•	Caution: If there is an a			ile 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 (a) (b) (c) (d) (e) (or fiscal year beginning in) ► 2005 2004 2003 2002 Total										
45	Lobbying nontaxable amount										
46	Lobbying ceiling amount (150% of line 45(e))										
47	Total lobbying expenditures										
48	Grassroots non- taxable 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) N/A											
Durii atter	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										
	Volunteers .				، الحديدة	,	\vdash				
	Paid staff or manageme			ea on lines c thr	ougn n .	.,	┝╌┤				
	Media advertisements.	 parelatore or the public				•	\vdash		<u> </u>		
	Mailings to members, le				•	•	\vdash				
	Publications, or publish						\vdash				
	Grants to other organiz Direct contact with legis			enislative body		•	\vdash				
-	n Rallies, demonstrations										
	•			,			} <u>-</u>				
•	i Total lobbying expenditures (add lines c through h.) 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)

of the	Code (other than section	n 501(c)(3) c	irganizations) (or in section 527, rela	ating to political organizations?)	1011 50	1(0)
	fers from the reporting or						Yes	No
(i) Ca	ash .				•	51 a (i)		Х
(ii) O	ther assets .					a (ii)		Х
b Other	transactions:							
(i)S:	ales or exchanges of ass	ets with a no	oncharitable ex	empt organization		b (i)		Х
(ii)Pi	urchases of assets from	a noncharita	ble exempt org	ganization		b (ii)		Х
(iii)R	ental of facilities, equipm	ent, or other	assets	-		b (iii)		Х
(iv)R	eimbursement arrangeme	ents				b (iv)		Х
(v)Lo	oans or loan guarantees					b (v)		X
٠,,	erformance of services o	r membersh	p or fundraisin	o solicitations		. b (vi)		Х
	ng of facilities, equipmen		•	-		c		Х
d If the the go any tr	answer to any of the abo ods, other assets, or ser ansaction or sharing arra	ove is 'Yes,' vices given ingement, st	complete the forby the reporting	ollowing schedule Cog organization. If the (d) the value of the o	olumn (b) should always show organization received less tha goods, other assets, or service	the fair market values received	ue of e in	
(a) Line no	(b) Amount involved		(c)	exempt organization		(d)		ts
N/A								
	-							
	-				"		-	
								
·								

	·····			-		•		
			•					
						•	-	
		<u> </u>		4.4				
descri	organization directly or in the section 501(c) of states, complete the following	the Code (of	liated with, or her than section	related to, one or mo on 501(c)(3)) or in se	ore tax-exempt organizations ction 527?	► ☐ Ye	s X	No
	(a)	,		(b)	T .	(c)		
N/A	Name of organization		Туре о	f organization	Description	(c) of relationship		
M/ A								
				·		<u>.</u>		
				-	 			
	<u> </u>			-	<u> </u>			
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						1 /F 000 0		2005

2005

FEDERAL STATEMENTS

PAGE 1

TOXIC ELEMENT RESEARCH FOUNDATION

84-0940289

STATEMENT 1	
FORM 990-EZ, PART V	
	WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?

NO

NO