

1-2

PERIODIC REPORT

TO ATTORNEY GENERAL OF CALIFORNIA

Section 12586, California Government Code

Failure to file this report by the 15th day of the fifth month after the close of your accounting period may result in the disallowance of your tax exemption and the assessment of a minimum tax of \$200.

City of Charitable Trusts
J. Box 13447
Sacramento, California 95818

For the Calendar or Fiscal Year Beginning 19 and Ending 12-19-80

CT No. 2375

NAME 02375 YEAR ENDED DEC 31, 1980 L
C/O
ADDRESS NATIONAL HEALTH FEDERATION
CITY 212 WEST FOOTHILL BLVD
MONROVIA CA 91016

File the copy which has your preaddressed identification label attached.
Correct any errors on the label.

Corporate or Organization No. D-0297032
Federal Employer Identification No. 94-1294934
If tax exempt, enter Code subsection under which you received exemption:
Federal 501(c)(4) State 23701 F

For Registry Use Only
Analyzed by Date

Revenue and Expenditures

1 Gross revenue from all sources—complete statement at top of page 3

911,127

IF LINE 1 IS OVER \$10,000 SKIP TO ITEM 12 AND COMPLETE BALANCE OF REPORT.

IF LINE 1 IS \$10,000 OR LESS COMPLETE ONLY PAGES 1, 2 and 3.

2 Expenditures for your exempt purposes—complete Schedule A, page 2

3 All other expenditures and costs

4 Increase (decrease) in fund balances (line 1 less lines 2 and 3)

Assets, Liabilities and Fund Balances

5 Cash and checking and savings accounts—itemize on page 3

6 Investments (current market value ▶ \$)

7 Land and buildings (current market value ▶ \$)

8 Other assets—complete Schedule B, page 2, if more than 50% of line 9

9 Total assets (Sum of lines 5 through 8)

10 Total liabilities

11 Fund balances ("net worth"—line 9 less line 10)

(Line 11, beginning of year fund balances plus line 4 should equal end of year fund balances.)

12 Check the form numbers of the returns filed with the Internal Revenue Service for this year:

a ☒ 990; b ☐ Sch. A, 990; c ☐ 990-PF; d ☐ 990-AR; e ☒ 990-T; f ☐ 4720; g ☐ Others:

13 Were the schedules and statements comprising this Periodic Report Form CT-2 prepared by a person outside your organization? If "No," skip to item 16.

YES	NO
X	

14 If the answer to 13 is "Yes," give name and address of preparer: Friedman & Rheingold

4640 Admiralty Way, Marina Del Rey, CA 90291

15 Did the person named at 14 issue to your organization a report on your financial statements for the period covered by this Periodic Report Form CT-2?

X	
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16 Did you use a paid fund-raiser during the year? If "Yes," complete Schedule C, page 3.

	X
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17 Do you regularly solicit salvage for resale in a thrift store? If "Yes," show gross revenue on line 34.

	X
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18 Have any changes not previously reported to the Registry been made in your governing instrument (articles, bylaws, trust instrument, etc.)? If "Yes," attach a copy of the changes.

	X
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19 The books of account are in care of ▶ Alberta Wichman Telephone No. ▶ (213) 357-2181

Located at ▶ 212 W. Foothill Blvd., Monrovia, CA 91016

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete.

SIGNATURE OF PRINCIPAL OFFICER OR TRUSTEE (SEE INSTRUCTIONS) K.W. JONSBACH CHAIRMAN 8-13-81
PRINTED NAME TITLE DATE

NATIONAL HEALTH FEDERATION # D-0297032

Statement of progress and accomplishments during the year in carrying out your exempt (charitable) purposes. Include the various programs or services provided and the number of persons who received each service, or comparable information.

National Health Federation is a health rights organization. To keep the public abreast of important health issues, NHF stages conventions and seminars in many cities throughout the United States each year. Through the NHF Bulletin it gives to the members unbiased, consumer-oriented views and through the NHF Newsletter the same information is sent to scores of publications and radio and TV stations.

List of All Checking and Savings Accounts:

[illegible]

Schedule C—Paid Fund-Raisers

Complete questions below for each paid fund-raiser used during the year. Attach schedule if necessary.

Name and address Richard A. Viguerie Co. Inc., 7777 Leesberg Pike, Falls Church, CA 22043

Type of event or solicitation held: Balance of 1979 mailings fees

Type of event or solicitation held:	YES	NO
Did you receive an accounting of the <u>gross</u> receipts and expenses?	X	
Gross receipts collected in the name of your organization (Include in line 25)	\$ 0	
Deduct: Amount retained by or paid to the fund-raiser	27,311	
All other expenses related to the solicitation or event		
Net amount received by your organization	\$ 0	

Gross Revenue

25	Contributions, gifts and bequests received	319,921	25
26	Fees and grants from government agencies		26
27	Grants from foundations and trusts		27
28	Allocations from fund-raising organizations		28
29	Dues and assessments from members and affiliates	194,762	29
30	Program service fees		30
31	Interest	2,286	31
32	Dividends		32
33	Rents and royalties	4,858	33
34	Other business activities (describe nature ►)		34
35	Sales of securities—from Schedule I, page 7		35
36	Sales of other assets—from Schedule J, page 8	8,823	36
37	Other gross revenue—complete Schedule E, page 6	380,477	37
38	Total gross revenue (Sum of lines 25 through 37. Enter here and on line 1)	911,127	38
	DEDUCT:		
39	Cost of goods sold in business activities reported on line 34		39
40	Cost or other basis of securities sold—from Schedule I, page 7		40
41	Adjusted cost of other assets sold—from Schedule J, page 8	3,920	41
42	Total deductions from gross revenue (Sum of lines 39 through 41)	(3,920)	42
43	Total available revenue (Line 38 less line 42)	907,207	43

Expenditures

		A	B	
		ATTRIBUTABLE TO GROSS REVENUE	FOR EXEMPT PURPOSES	
44	Compensation of board of directors or trustees			44
45	Other salaries, wages and employee benefits		325,416	45
46	Legal fees		30,770	46
47	Accounting fees			47
48	Consulting fees (Describe ►)			48
49	Interest		2,317	49
50	Private foundation excise tax on net investment income (from federal return)			50
51	Real property taxes			51
52	Other taxes (Describe ► Property & Licenses)		2,965	52
53	Rent, utilities and maintenance		36,314	53
54	Depreciation—from Schedule K, page 8		8,296	54
55	Travel		31,647	55
56	Other operating expenditures—complete Schedule A, page 2		541,419	56
57	Total—attributable to gross revenue (Sum of lines 44 through 56, column A)			57
58	Total—for exempt purposes (Sum of lines 44 through 56, Column B)		979,144	58
59	Total (Sum of lines 57 and 58. Complete statement at top of page 3.)		979,144	59
60	Excess of revenue (expenditures)—(Line 43 less line 59)		(71,937)	60
61	Contributions, grants, etc., made during year—from Schedule G, page 6			61
62	Increase (decrease) in fund balances (Line 60 less line 61)		(71,937)	62

BALANCE SHEET

Assets		A		B	
		BEGINNING OF YEAR		END OF YEAR	
63	Cash on hand and in checking accounts (itemize on page 3)	83,071		8,998	63
64	Cash in interest bearing accounts (itemize on page 3)	25,512		2,656	64
65	Accounts receivable—net	91,753		50,670	65
66	Notes receivable—complete Schedule H, page 6				66
67	Inventories (Describe ► Books and Literature)	43,496		43,496	67
68	Investment in government obligations—complete Schedule I, page 7				68
69	Investment in nongovernment bonds—complete Schedule I, page 7				69
70	Investment in corporate stocks or mutual funds—complete Schedule I, page 7	150		150	70
71	Mortgage loans (number of loans)	54,460		49,945	71
72	Other investments not shown on lines 73 and 75 (attach schedule)				72
73	Land held for investment (current market value ► \$ Sold)	3,920		0	73
74	Land used in exempt purposes	44,600		44,600	74
75	Depreciable assets held for investment—complete Schedule K, page 8				75
76	Depreciable assets used in exempt purposes—complete Schedule K, page 8	154,797		172,100	76
77	Accumulated depreciation on items 75 and 76—from Schedule K, page 8	63,427		71,723	77
78	Other assets—complete Schedule B, page 2 Prepaid Expenses	60,218		86,259	78
79	Total assets (Sum of lines 63 through 78)	498,550		386,851	79

Liabilities					
80 Accounts payable	132,544		31,879		80
81 Contributions and grants payable					81
82 Notes payable	5,000		29,786		82
83 Mortgages payable					83
84 Other liabilities—complete Schedule F, page 6 Deferred Revenue	266,845		282,634		84
85 Total liabilities (Sum of lines 80 through 84)	404,389		344,299		85

Fund Balances ("Net Worth")					
86 Land, buildings and equipment fund					86
87 Endowment funds					87
88 Restricted by donor	2,406				88
89 Unrestricted (General) Fund	91,755		42,552		89
90 Total fund balances (Sum of lines 86 through 89)—complete Schedule D below	94,161		42,552		90
91 Total liabilities and fund balances (Line 85 plus 90, should equal line 79)	498,550		386,851		91

92 Total market value of securities on lines 68, 69 and 70 at end of year—from Schedule I, page 7	Unknown		92
93 Total market value of depreciable assets held for investment—from Schedule K, page 8	Unknown		93

Schedule D—Schedule of Changes in Fund Balances	UNRESTRICTED (LINE 89)	RESTRICTED (LINE 88)	ENDOWMENT (LINE 87)	LAND, BUILDINGS AND EQUIPMENT (LINE 86)
Fund Balances, Beginning of Year. (Must agree with ending balances on prior report)	94,161	2,406		
Changes (Describe) Disbursed		(2,406)		
Changes in accounting system	4,539			
Loss 1980 - Operating	(71,937)			
Over deduction deferred revenue	15,789			
Fund Balances, End of Year	42,552	0		

Schedule E—Other Revenue

Public Relations	\$ 11,412
Subscriptions	10,743
Conventions	210,340
Literature & Tapes	42,133
Advertising	74,693
Miscellaneous	670
Deferred Income	30,486
Total—enter here and on line 37	\$ 380,477

Schedule F—Other Liabilities

[illegible]**Schedule G—Contributions, Grants, Etc., Made During Year or Approved for Future Payment**

DONOR'S NAME AND ADDRESS	RELATIONSHIP TO ANY TRUSTEE, OFFICER OR SUBSTANTIAL CONTRIBUTOR	CONCISE STATEMENT OF PURPOSE OF CONTRIBUTION OR GRANT *	AMOUNT
Made during year:			
1. [Illegible]			
2. [Illegible]			
3. [Illegible]			
4. [Illegible]			
5. [Illegible]			
6. [Illegible]			
7. [Illegible]			
8. [Illegible]			
9. [Illegible]			
10. [Illegible]			
11. [Illegible]			
12. [Illegible]		Total—enter here and on line 61	
Approved for future payment:			

*IF GRANT WAS MADE FOR THE GENERAL PURPOSES OF THE DONEE WITHOUT RESTRICTION, THEN ENTER "GENERAL." IF GRANT WAS FOR SPECIFIED PURPOSES, I.E. BUILDING FUNDS, STAFF DEVELOPMENT, TRAVEL, THEN STATE THAT SPECIFIC PURPOSE.

Schedule H—Notes Receivable

	NOTE 1	NOTE 2	NOTE 3
Name of maker:			
Relationship to any trustee, officer or substantial contributor			
Original amount:			
Balance due:			
Date of note:			
Maturity date:			
Repayment terms:			
Interest rate:			
Security:			
Purpose of loan:			
Was a non-cash asset exchanged for the note?			
Was this note received as a donation?			

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NATIONAL HEALTH FEDERATION

CT-2 1980

D-0297032

94-1294934

Line ⁶~~56~~ - Page 4

Insurance	3,314
Fund Raising	27,311
Data Processing	41,135
Conventions	107,202
Equipment Rental	12,315
Supplies	31,272
Office Supplies	45,239
Postage	90,586
Public Relations & Advertising	8,691
Printing	92,014
Bulletin	53,614
Dues and Subscriptions	2,457
Other	11,710
Freight Out	<u>14,559</u>
	<u>541,419</u>