

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)

OMB No. 1545-0047

2001

Open to Public Inspection

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 **APR 1, 2001** and ending **MAR 31, 2002****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization**THE ULMAN CANCER FUND
FOR YOUNG ADULTS, INC.**

Number and street (or P.O. box if mail is not delivered to street address)

5575 STERRETT PLACE

City or town, state or country, and ZIP + 4

COLUMBIA, MD 21044**D** Employer identification number**52-2057636****E** Telephone number**410-964-0202****F** Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and **I** are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶**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).**G** Web site: **WWW.ULMANFUND.ORG****J** Organization type (check only one) ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **132,413.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	16,539.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c)			
		(cash \$ 46,539. noncash \$)	1d	46,539.	
	2	Program service revenue including government fees and contracts (from Part VII, line 9b)	2		
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	3,754.	
	5	Dividends and interest from securities	5	5,682.	
	6a	Gross rents	6a		
	6b	Less: rental expenses	6b		
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		
7	Other investment income (describe)	7			
8a	Gross amount from sale of assets other than inventory	(A) Securities	(B) Other		
		8a			
		8b			
		8c			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			
9	Special events and activities (attach schedule)				
a	Gross revenue (not including \$ 0. of contributions reported on line 1a)	9a	76,438.		
b	Less: direct expenses other than fundraising expenses	9b	11,120.		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	65,318.		
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	121,293.		
Expenses	13	Program services (from line 44, column (B))	13	87,292.	
	14	Management and general (from line 44, column (C))	14	31,754.	
	15	Fundraising (from line 44, column (D))	15	8,988.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses (add lines 13 and 14, column (A))	17	128,034.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<6,741.>	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	205,097.	
	20	Other changes in net assets or fund balances (attach explanation)	20	<1,722.>	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	196,634.	

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 39,850.	30,685.	3,187.	5,978.
26 Other salaries and wages	26 14,121.	7,060.	5,649.	1,412.
27 Pension plan contributions	27			
28 Other employee benefits	28 777.		777.	
29 Payroll taxes	29 4,187.		4,187.	
30 Professional fundraising fees	30			
31 Accounting fees	31 2,338.		2,338.	
32 Legal fees	32			
33 Supplies	33 5,358.	2,668.	2,154.	536.
34 Telephone	34 4,331.	2,165.	1,733.	433.
35 Postage and shipping	35 5,497.	4,212.	1,157.	128.
36 Occupancy	36 7,856.		7,856.	
37 Equipment rental and maintenance	37			
38 Printing and publications	38 2,729.	1,381.	1,213.	135.
39 Travel	39 1,244.	1,244.		
40 Conferences, conventions, and meetings	40 2,947.	2,581.		366.
41 Interest	41			
42 Depreciation, depletion, etc. (attach schedule) ...	42			
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e	43e 36,799.	35,296.	1,503.	
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 128,034.	87,292.	31,754.	8,988.

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 AccomplishmentsWhat is the organization's primary exempt purpose? ☐

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 <u>SPONSORED SUPPORT GROUPS LED BY MENTAL HEALTH PROFESSIONALS FREE OF CHARGE TO YOUNG ADULT AFFECTED BY CANCER</u>	(Grants and allocations \$ _____)	21,087.
b <u>PROVIDED ACCESS TO WEB SITE AND CHAT ROOMS FOR YOUNG ADULTS AND THEIR FAMILIES TO DISCUSS COPING WITH CANCER</u>	(Grants and allocations \$ _____)	13,669.
c _____	(Grants and allocations \$ _____)	48,704.
d <u>PROVIDED A SCHOLARSHIP TO A YOUNG ADULT AFFECTED BY CANCER</u>	(Grants and allocations \$ _____)	3,832.
e Other program services (attach schedule)	(Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		87,292.

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		45	
	46 Savings and temporary cash investments	129,456.	46	129,764.
	47 a Accounts receivable			
	b Less: allowance for doubtful accounts	4,135.	47c	
	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		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities STMT 6 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	75,559.	54	79,542.
	55 a Investments - land, buildings, and equipment: basis			
	b Less: accumulated depreciation		55c	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis				
b Less: accumulated depreciation		57c		
58 Other assets (describe <input type="checkbox"/>)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	209,150.	59	209,306.	
Liabilities	60 Accounts payable and accrued expenses	4,053.	60	12,672.
	61 Grants payable		61	
	62 Deferred revenue		62	
	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 <input type="checkbox"/>)		65	
66 Total liabilities (add lines 60 through 65)	4,053.	66	12,672.	
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	205,097.	67	174,315.
	68 Temporarily restricted		68	22,319.
	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)	205,097.	73	196,634.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	209,150.	74	209,306.

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-B	Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
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a	Total expenses and losses per audited financial statements	a	128,034.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and 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	0.
c	Line a minus line b	c	128,034.
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	0.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	128,034.

[illegible]☐ Yes ☒ No

**THE ULMAN CANCER FUND
FOR YOUNG ADULTS, INC.**

52-2057636

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Part VI Other Information

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b 7,856.		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	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.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed MARYLAND		
b	Number of employees employed in the pay period that includes March 12, 2001 90b 3		

91 The books are in care of BROCK YETSO Telephone no. 410-964-0202

Located at 5575 STERRETT PLACE COLUMBIA, MD ZIP + 4 21044

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

STOCK INFO: *Surge Technologies, Inc. (OTC: SRGE)*

This Company Could Grow as Fast as Broadband Internet!

As Broadband Internet continues to grow, it's NOW driving the market in the surge protection arena!
SurgeTech manufactures for the \$4 BILLION North American Outside Plant Telecom Surge Protection Market!

FACT!!!

Rate of conversion from Dial-Up to DSL is 35% to 40% per year!

All these conversions need to be protected for transient voltages.

Broadband is a generic term for DSL, ADSL, HDSL, VIDEO, VOICE, DATA and other types of non-analog signals.

OTC:
SRGE.PK

Est. Shares Outstanding:
26 MILLION

Est. Float: 3 MILLION

Current Price:
\$0.55

60-DAY Target: **\$3.00**
Investment Rating:
VERY STRONG

Attention Tech Stock Investors:

How many Internet Users do you think will eventually convert their Dial-Up Internet services over to DSL or some other type of Broadband Internet service with-in the coming years? MOST ALL, wouldn't you think?

As MORE and MORE internet users convert over to the broadband internet services, the Demand for Upgrade of existing or lets say old surge protection devices will be needed in order to accommodate today's broadband technologies. This will only DRIVE REVENUES towards companies that specialize in manufacturing these types of devices!

This is another GREAT Investment Opportunity! The Technology Investment Report believes we have found the gold at the end of the rainbow with Surge Technologies, Inc. a Public Company that trades on the "Over the Counter market" (OTC: SRGE.PK).

What are Surge Protection Devices ?

In layman's term, a surge protection device is as common as a wallet or a purse. What most people do not understand, is that each and every one of us use these devices everyday with-in our own lives. A Surge Protector is already or has to be installed in each and every household and commercial building between the outside telephone line and the inside connection, protecting our electronic devices hooked up to the telephone line, I.E. phone, fax, satellite TV and computer terminals. EVERY CONNECTION has to have its own surge protector device, Lets calculate the number of surge protectors needed to fulfill this demand!

This is an ENORMOUS MARKET and will only continue to grow as new "Surge Protection Devices" will be needed to keep up with the "Demand" that the Internet is driving into this marketplace, Upgrading is inevitable!

An example of inevitable up-grading: Do you remember what the Digital Music CD's has done for the music industry? Even though everyone already owned a music collection on vinyl records and tape cassettes. The new technology drove incredible revenues back towards the Record Companies and artists even more than before when upgrading began!

Very High Price Targets for this Stock!

- Every Commercial building and residential household in North America & Europe connected to a telephone line has a primary electrical surge protection device inserted between the outside telephone line and the inside connection to EACH phone, fax, Satellite TV and computer line.
- It is MANDATORY by building codes in North America and Europe to have a surge protection device installed at the premise of EVERY Residential or Commercial building!
- Most every single residential household or commercial building older than 8 to 10 years that convert over to DSL or other types of HIGHSPEED Broadband Internet MUST UPGRADE their current surge protection devices to accommodate today's Broadband technologies! In Most Cases, the Telecom Carriers or Broadband Internet Providers provide the new or upgraded surge protectors. A BUILT IN - REPEAT CUSTOMER!

AMAZING HUH? We believe so ourselves.

About Surge Technologies Inc.

SurgeTech designs, manufactures and sells a line of highly sophisticated electrical surge protection devices used for the telecom network industry. The surge protection devices prevent electrical surge hazards from causing systems failures, damaging expensive equipment and harming personnel.

Investment Considerations:

SurgeTech has successfully navigated through the seed and start-up stages. The Company has acquired "TELUS Corp." as its MARQUEE customer, a large Canadian Telecom Carrier, the equivalent to AT&T in the United States.

Surge Tech's impressive array of clientele also includes: Bell Canada, Sasktel, Manitoba Telephone, N.B. Tel, Island Tel, and MT&T in Canada. In the United States these companies are referred to as R.B.O.C.'s or Regional Bell Operating Companies. SurgeTech also supplies to Paradyne, Teccor Electronics, Verizon Wireless and many others in the United States.

Most of all DO THE MATH on this INCREDIBLE marketplace, as you will see, this could be the NEXT BOOM of an industry DRIVEN by the INTERNET!!

Disclaimer: The Technology Investment Report is NOT an Investment banker, Stockbroker, Printer Dealer, Financial Analyst, or a professional financial advisor of any kind. This Report is for informational purposes only and should not be construed as an offer to buy or sell any securities at all. The information provided in this document has been provided by sources believed to be reliable but cannot guarantee its accuracy. Some information comes from SEC filings, Weblogs, and other already public information and the company. Please do your own due diligence before investing in any company profiled within these reports. The Technology Investment Report is expected to receive \$20,000.00 cash for the distribution of this report by a non-affiliated third party.

If you received this fax in error, call 1-866-408-9828 to be removed.

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

Note: Enter gross amounts unless otherwise indicated.

	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	
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	3,754.	
96 Dividends and interest from securities			14	5,682.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					57,462.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		9,436.	57,462.
105 Total (add line 104, columns (B), (D), and (E))					66,898.

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).
101	RAISING MONEY TO PROVIDE SUPPORT PROGRAMS, EDUCATION, AND RESOURCES FREE OF CHARGE TO YOUNG ADULTS, THEIR FAMILIES, AND FRIENDS WHO ARE AFFECTED BY CANCER.

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 _____ Check if self-employed ☐ Preparer's SSN or PTIN _____

Firm's name (or yours if self-employed), address, and ZIP + 4

GORFINE, SCHILLER & GARDYN, PA
10045 RED RUN BLVD, SUITE 250
OWINGS MILLS, MD 21117

EIN _____ Phone no. 410-356-5900

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 **THE ULMAN CANCER FUND
FOR YOUNG ADULTS, INC.**

Employer identification number
52 2057636

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

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 ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1 X

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

- 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

a Sale, exchange, or leasing of property? _____

2a X

b Lending of money or other extension of credit? _____

2b X

c Furnishing of goods, services, or facilities? _____

2c X

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? _____

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.)	140,403.	32,654.	68,340.	67,813.	309,210.
16 Membership fees received					
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	5,868.	3,961.	2,910.	170.	12,909.
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					
23 Total of lines 15 through 22	146,271.	36,615.	71,250.	67,983.	322,119.
24 Line 23 minus line 17	146,271.	36,615.	71,250.	67,983.	322,119.
25 Enter 1% of line 23	1,463.	366.	713.	680.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 6,442.
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 322,119.
d Add: Amounts from column (e) for lines: 18 12,909. 19 22 26b					26d 12,909.
e Public support (line 26c minus line 26d total)					26e 309,210.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 95.9925%
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.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	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?	31	
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.)

N/A

(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	
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 -		
	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 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 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
		0.

- 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**.)

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

Exempt Organizations (See page 12 of the instructions.)

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

	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

51a(i)		X
--------	--	---

a(ii)		X
-------	--	---

a(ii)		X
-------	--	---

b(i)	X
------	---

b(ii)		X
-------	--	---

b(iii)		X
--------	--	---

b(iv)		X
-------	--	---

$b(v)$		X
--------	--	-----

b(vi)		X
-------	--	---

C		X
---	--	---

N/A

h, or related to, one or more tax-exempt organizations

▶ ☐ Yes ☒ No

N/A

N/A

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 1

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
COLUMBIA CURE	32,058.		32,058.	15,029.	17,029.
GOLF TOURNAMENT	21,461.		21,461.	11,300.	10,161.
THROUGH CHARLIE'S EYES	23,374.		23,374.	3,855.	19,519.
BALTIMORE MARATHON	826.		826.	289.	537.
SAN DIEGO MARATHON	10,345.		10,345.	670.	9,675.
APPLAUSE FOR A CAUSE	1,046.		1,046.	505.	541.
TO FM 990, PART I, LINE 9	89,110.		89,110.	31,648.	57,462.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 2

DESCRIPTION	AMOUNT
MARKET APPRECIATION OF INVESTMENTS	<1,722.>
TOTAL TO FORM 990, PART I, LINE 20	<1,722.>

FORM 990 OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADVERTISING	0.			
BANK CHARGES	478.		478.	
INSURANCE	878.		878.	
COMMUNITY OUTREACH	3,260.	3,260.		
MISCELLANEOUS	4,795.	4,795.		
NEWSLETTER	419.	419.		
SCHOLARSHIP	3,832.	3,832.		
WEB SITE	1,911.	1,911.		
SUPPORT GROUPS	18,407.	18,407.		
DONATIONS	2,397.	2,397.		
DUES AND SUBSCRIPTIONS	295.		295.	
TOTAL TO FM 990, LN 43	36,672.	35,021.	1,651.	

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 4

PART III

EXPLANATION

TO PROVIDE SUPPORT PROGRAMS, EDUCATION AND RESOURCES FREE OF CHARGE TO
YOUNG ADULT, THEIR FAMILIES AND FRIENDS WHO ARE AFFECTED BY CANCER

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 5

DESCRIPTION OF PROGRAM SERVICE THREE

PROVIDED EDUCATIONAL SERVICES TO VARIOUS COMMUNITIES ON
STEPS THAT CHILDREN AND YOUNG ADULTS CAN TAKE TO
LEAD MORE HEALTHY LIVES AND REDUCE THE RISK OF CANCER
AND PROVIDED PRINTED INFO TO THE PUBLIC AND CARE TAKERS

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE C		48,704.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 6

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
CORPORATE BONDS		72,975.			72,975.
STOCKS			6,567.		6,567.
TO 990, LN 54 COL B		72,975.	6,567.		79,542.

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.		
Type or print. File by the extended due date for filing the return. See instructions.	Name of Exempt Organization THE ULMAN CANCER FUND FOR YOUNG ADULTS, INC.	Employer identification number 52-2057636
	Number, street, and room or suite no. If a P.O. box, see instructions. 5575 STERRETT PLACE	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. COLUMBIA, MD 21044	

Check type of return to be filed (File a separate application for each return):

- ☒ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☐ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- If the organization does **not** have an office or place of business in the United States, check this box ☐
 • If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the **whole** group, check this box ☐. If it is for **part** of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until **FEBRUARY 18, 2003.**
 5 For calendar year _____, or other tax year beginning **APR 1, 2001** and ending **MAR 31, 2002**.
 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
 7 State in detail why you need the extension
TAXPAYER'S RECORDS ARE INCOMPLETE AND DO NOT ALLOW FOR THE FILING OF A
TIMELY AND ACCURATE RETURN.

- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____
 b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____
 c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **N/A**

Signature and Verification

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

Signature _____ Title _____ Date _____

Notice to Applicant - To Be Completed by the IRS

- ☐ We **have** approved this application. Please attach this form to the organization's return.
☐ We **have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
☐ We **have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
☐ We **cannot consider** this application because it was filed after the due date of the return for which an extension was requested.
☐ Other _____

Director _____ By: _____ Date _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name GORFINE, SCHILLER & GARDYN, PA
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 10045 RED RUN BLVD, SUITE 250
	City or town, province or state, and country (including postal or ZIP code) OWINGS MILLS, MD 21117