

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)

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 2002 calendar year, or tax year beginning 2002, and ending

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

C Name of organization: DIRECT RELIEF INTERNATIONAL. Address: 27 SOUTH LA PATERA LANE, SANTA BARBARA, CA 93117-3251

D Employer identification number: 95-1831116. E Telephone number: (805) 964-4767. F Accounting method: Accrual

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

G Web site: WWW.DIRECTRELIEF.ORG

J Organization type (check only one) [X] 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.

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? [] Yes [X] No. H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? [] Yes [X] No. H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [X] 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).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 67,319,630.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include contributions, program service revenue, membership dues, interest on savings, dividends, gross rents, net rental income, other investment income, gross amount from sales of assets, special events, gross sales of inventory, other revenue, total revenue, program services, management and general, fundraising, payments to affiliates, total expenses, excess or deficit, net assets at beginning, other changes, and net assets at end of year.

For Paperwork Reduction Act Notice, see the separate instructions.

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 page 21 of the instructions.)

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include: 22 Grants and allocations (68,111,688), 23 Specific assistance, 24 Benefits, 25 Compensation (146,799), 26 Other salaries (971,309), 27 Pension (36,968), 28 Other benefits (125,959), 29 Payroll taxes (87,417), 30 Professional fees, 31 Accounting fees (18,089), 32 Legal fees, 33 Supplies (18,846), 34 Telephone, 35 Postage (17,243), 36 Occupancy, 37 Equipment (84,139), 38 Printing (37,790), 39 Travel (37,790), 40 Conferences (5,820), 41 Interest (105,518), 42 Depreciation (76,782), 43 Other expenses (483,131), 44 Total functional expenses (70,327,498).

Joint Costs. Check [X] 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 [X] 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 page 24 of the instructions.)

What is the organization's primary exempt purpose? SEE ATTACHED STATEMENT

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.)

Table with 2 columns: Description, Program Service Expenses. Row a: SEE ATTACHED STATEMENT (69,585,569). Row b: (Grants and allocations \$ 68,111,688). Row c: (Grants and allocations \$). Row d: (Grants and allocations \$). Row e: Other program services (attach schedule) (Grants and allocations \$). Row f: Total of Program Service Expenses (should equal line 44, column (B), Program services) 69,585,569.

Part IV Balance Sheets (See page 24 of the instructions.)

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

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash - non-interest-bearing	1,017,491.	45	823,179.
	46 Savings and temporary cash investments		46	
	47a Accounts receivable		NONE	
	b Less: allowance for doubtful accounts	56,613.	47c	NONE
	48a Pledges receivable		48a	
	b Less: allowance for doubtful accounts		48b	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)		51a	
	b Less: allowance for doubtful accounts		51b	
	52 Inventories for sale or use	18,098,032.	52	12,571,138.
	53 Prepaid expenses and deferred charges	123,694.	53	31,043.
	54 Investments - securities (attach schedule) STMT 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	1,531,508.	54	2,991,948.
	55a Investments - land, buildings, and equipment: basis		55a	
	b Less: accumulated depreciation (attach schedule)		55b	
56 Investments - other (attach schedule) STMT 8	733,293.	56	530,000.	
57a Land, buildings, and equipment: basis	3,534,507.	57a		
b Less: accumulated depreciation (attach schedule)	497,966.	57b		
58 Other assets (describe STMT 9)	834,108.	58	267,691.	
59 Total assets (add lines 45 through 58) (must equal line 74)	25,462,802.	59	20,251,540.	
Liabilities	60 Accounts payable and accrued expenses	70,482.	60	35,576.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule) STMT 10	1,694,171.	64b	1,665,109.
	65 Other liabilities (describe STMT 11)	110,182.	65	161,884.
66 Total liabilities (add lines 60 through 65)	1,874,835.	66	1,862,569.	
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	19,735,764.	67	18,328,290.
	68 Temporarily restricted	3,852,203.	68	60,681.
	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)	23,587,967.	73	18,388,971.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	25,462,802.	74	20,251,540.	

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 VI Other Information (See page 27 of 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
78a	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?	78b	X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80a	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.		
81a	Enter direct or indirect political expenditures. See line 81 instructions	81a	
	b Did the organization file Form 1120-POL for this year?	81b	X
82a	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	397,277.
83a	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
84a	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?	84b	X
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	X
	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.	85b	X
	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 on line 85f?	85g	X
	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?	85h	X
86	501(c)(7) orgs. 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) orgs. 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
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> N/A; section 4912 <input type="checkbox"/> N/A; section 4955 <input type="checkbox"/> N/A		
	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	89b	X
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization		N/A
90a	List the states with which a copy of this return is filed	CALIFORNIA	
	b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	25
91	The books are in care of	CHRISTIAN WHITE - DRI	
	Located at	27 S. LA PATERA LN, S.B., CA	
	Telephone no.	805-964-4767	
	ZIP + 4	93117-3251	
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	92	N/A

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

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) Exclusion 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					
96 Dividends and interest from securities			14	121,236.	
97 Net rental income or (loss) from real estate:					
a debt-financed property			30	16,571.	
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			14	-41,909.	
101 Net income or (loss) from special events			18		377,836.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b OTHER INCOME _____			18	23,989.	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				119,887.	377,836.
105 Total (add line 104, columns (B), (D), and (E))					497,723.

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 page 32 of 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).
101	FUNDRAISING EVENTS PROVIDE FOR SHIPMENTS OF MEDICAL SUPPLIES TO MEDICALLY INDIGENT AREAS.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions.)

(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
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions.)

- (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 8670 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: Thomas Tighe Date: 8-28-03

Type or print name and title: _____

Paid Preparer's Use Only

Preparer's signature: _____ Date: 8/22/2003 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: LARSON & RIDGE LLP
P.O. BOX 92021
SANTA BARBARA, CA 93190-2021

Preparer's SSN or PTIN (See Gen. Inst. W): P00071142 EIN: 77-0476103 Phone no.: 805-682-5001

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

2002

Name of the organization

DIRECT RELIEF INTERNATIONAL

Employer identification number

95-1831116

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
<u>CHRISTIAN WHITE</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	CONTROLLER 40 HRS	65,024.	2,712.	
<u>SUSAN FOWLER</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	DIR OF PROGRAMS 40 HRS	56,708.	5,103.	
<u>ANTHOULA RANDOPOULOS</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	DIR OF FDTN RELATION 40 HRS	62,283.	6,559.	
<u>DAN SMITH</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	SR. PROGRAM OFFICER 40 HRS	53,529.	5,251.	
<u>LANNY LAKE</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	DIR OF OPERATIONS 40 HRS	51,867.	4,606.	
Total number of other employees paid over \$50,000 ▶	NONE			

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
<u>NONE</u>		
Total number of others receiving over \$50,000 for professional services ▶	NONE	

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

Schedule A (Form 990 or 990-EZ) 2002

Part III Statements About Activities (See page 2 of the instructions.)

Table with 3 columns: Question, Yes, No. Rows include: 1. During the year, has the organization attempted to influence national, state, or local legislation...; 2. During the year, has the organization, either directly or indirectly, engaged in any of the following acts...; 3. Does the organization make grants for scholarships, fellowships, student loans, etc.?; 4. Do you have a section 403(b) annuity plan for your employees?; 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 5 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.)
11 a 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.)
11 b 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.)

Table with 2 columns: (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 5 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.

Table with columns: Calendar year (or fiscal year beginning in), (a) 2001, (b) 2000, (c) 1999, (d) 1998, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends, amounts received from payments on securities loans; 19 Net income from unrelated business activities not included in line 18; 20 Tax revenues levied for the organization's benefit; 21 The value of services or facilities furnished to the organization by a governmental unit 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; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24; b Prepare a list for your records to show the name of and amount contributed by each person; c Total support for section 509(a)(1) test; d Add: Amounts from column (e) for lines; e Public support (line 26c minus line 26d total); f Public support percentage; 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; 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; c Add: Amounts from column (e) for lines; d Add: Line 27a total and line 27b total; e Public support (line 27c total minus line 27d total); f Total support for section 509(a)(2) test; g Public support percentage; h Investment income percentage; 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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 V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	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	
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.) ----- ----- -----		
34a 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? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

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 - if the amount on line 40 is - The lobbying nontaxable amount is -	41	
	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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
Grassroots nontaxable					
48 amount					
Grassroots ceiling amount					
49 (150% of line 48(e))					
Grassroots lobbying					
50 expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities **NOT APPLICABLE**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the 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:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h.)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
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.

Name of organization DIRECT RELIEF INTERNATIONAL	Employer identification number 95-1831116
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Part II Noncash Property (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	<u>MEDICAL SUPPLIES & PHARMACEUTICALS</u> _____ _____	<u>15,691,040.</u>	_____
<u>2</u>	<u>MEDICAL SUPPLIES & PHARMACEUTICALS</u> _____ _____	<u>2,145,494.</u>	_____
<u>3</u>	<u>MEDICAL SUPPLIES & PHARMACEUTICALS</u> _____ _____	<u>13,153,546.</u>	_____
<u>5</u>	<u>MEDICAL SUPPLIES & PHARMACEUTICALS</u> _____ _____	<u>3,763,069.</u>	_____
<u>6</u>	<u>MEDICAL SUPPLIES & PHARMACEUTICALS</u> _____ _____	<u>8,224,139.</u>	_____
<u>8</u>	<u>MEDICAL SUPPLIES & PHARMACEUTICALS</u> _____ _____	<u>2,760,734.</u>	_____

Name of organization DIRECT RELIEF INTERNATIONAL	Employer identification number 95-1831116
--	---

Part II Noncash Property (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9	<u>MEDICAL SUPPLIES & PHARMACEUTICALS</u> _____ _____	<u>2,256,895.</u>	_____
10	<u>MEDICAL SUPPLIES & PHARMACEUTICALS</u> _____ _____	<u>1,928,167.</u>	_____
12	<u>MEDICAL SUPPLIES, EQUIPMENT & PHARMACEUTICALS</u> _____ _____	<u>12,323,433.</u>	_____
_____	_____ _____ _____	_____	_____
_____	_____ _____ _____	_____	_____
_____	_____ _____ _____	_____	_____

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SEATTLE DINNER	221,300.	40,704.	180,596.
S.B. COUNTY VINTNERS FDTN	172,625.	3,085.	169,540.
ART WALK	30,503.	6,207.	24,296.
CLINIC VISIT	10,440.	6,620.	3,820.
FABULOUS FIVE TRIBUTE-03 EVENT		416.	-416.
TOTALS	434,868.	57,032.	377,836.

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

=====

DESCRIPTION

AMOUNT

CHANGE IN VALUE OF SPLIT INTEREST
AGREEMENTS

85,741.

TOTAL

85,741.

=====

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

DESCRIPTION -----	AMOUNT -----
DECREASE IN UNREALIZED APPRECIATION OF INVESTMENTS	94,424.
TOTAL	----- 94,424. =====

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
ADVERTISING	5,856.	219.	325.	5,312.
BANK CHARGES & BROKERAGE FEES	16,777.	144.	16,633.	
BUILDING EXPENSES	648.	623.	14.	11.
CONTRACT SERVICES	106,293.	23,598.	71,218.	11,477.
DEVELOPMENT EDUCATION	9,861.	533.		9,328.
DUES & SUBSCRIPTIONS	6,845.	4,380.	2,185.	280.
FREIGHT & PROCESSING CHARGES	233,887.	233,720.	16.	151.
INSURANCE	23,594.	22,694.	495.	405.
MISCELLANEOUS	3,029.	3,007.	22.	
PUBLIC RELATIONS	7,888.			7,888.
PUBLICATIONS	1,343.	699.	553.	91.
REPAIRS & MAINTENANCE	18,669.	7,749.	8,417.	2,503.
TAXES, LICENSES & FEES	13,101.	978.	12,003.	120.
UTILITIES & TELEPHONE	32,255.	26,434.	5,008.	813.
WAREHOUSE OPERATIONS	3,085.	3,085.		
TOTALS	483,131.	327,863.	116,889.	38,379.

FORM 990, PART IV - INVESTMENTS - SECURITIES

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
MARKETABLE SECURITIES	1,531,508.	2,991,948.
	-----	-----
TOTALS	1,531,508.	2,991,948.
	=====	=====

FORM 990, PART IV - INVESTMENTS - OTHER

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
INVESTMENT IN REAL ESTATE	530,000.	530,000.
OTHER INVESTMENTS	203,293.	NONE
	-----	-----
TOTALS	733,293.	530,000.
	=====	=====

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
CONTRIBUTIONS RECEIVABLE	777,016.	246,800.
OTHER ASSETS	57,092.	20,891.
	-----	-----
TOTALS	834,108.	267,691.
	=====	=====

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE
=====

LENDER: SANTA BARBARA BANK & TRUST
ORIGINAL AMOUNT: 1,800,000.
INTEREST RATE: 0.055000
DATE OF NOTE: 10/01/1997
MATURITY DATE: 10/01/2007
REPAYMENT TERMS: MONTHLY
SECURITY PROVIDED: LAND & BUILDING
PURPOSE OF LOAN: PURCHASE LAND & BUILDING

BEGINNING BALANCE DUE 1,204,595.
ENDING BALANCE DUE 1,185,090.

LENDER: HUTTON FOUNDATION
ORIGINAL AMOUNT: 500,000.
INTEREST RATE: 0.060000
DATE OF NOTE: 11/01/2000
MATURITY DATE: 11/01/2007
REPAYMENT TERMS: MONTHLY
SECURITY PROVIDED: LAND & BUILDING
PURPOSE OF LOAN: REFINANCE PART OF ORIGINAL LAND & BUILDING LOAN

BEGINNING BALANCE DUE 489,563.
ENDING BALANCE DUE 480,019.

LENDER: SBB&T - LINE OF CREDIT
INTEREST RATE: 0.047500
DATE OF NOTE: 01/01/2001
MATURITY DATE: 05/01/2003
REPAYMENT TERMS: MONTHLY
SECURITY PROVIDED: UNSECURED
PURPOSE OF LOAN: WORKING CAPITAL LOAN

BEGINNING BALANCE DUE 13.
ENDING BALANCE DUE NONE

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 1,694,171.
=====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 1,665,109.
=====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
OTHER CURRENT LIABILITIES	110,182.	124,738.
DIST PAYABLE - SPLIT INTEREST AGREEMENTS	NONE	37,146.
TOTALS	----- 110,182. =====	----- 161,884. =====

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN

=====

DESCRIPTION -----	AMOUNT -----
FUNDRAISING EXPENSES	57,032.
RENTAL EXPENSES	23,553.
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	85,741.

TOTAL	166,326.
	=====

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

DESCRIPTION	AMOUNT
FUNDRAISING EXPENSES	57,032.
RENTAL EXPENSES	23,553.

TOTAL	80,585.
	=====

SCHEDULE A, PART III - EXPLANATION FOR LINE 2C

=====

THE ORGANIZATION CURRENTLY MAINTAINS A PARTIAL EQUITY INTEREST IN THE
PRESIDENT'S HOME.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

=====

SEE ATTACHED LIST OF BOARD OFFICERS AND MEMBERS

SCHEDULE A, PART III - EXPLANATION FOR LINE 4

=====

THE COMPANY AWARDS GRANTS TO OTHER ORGANIZATIONS ON A DISCRETIONARY BASIS. THE MOST SIGNIFICANT CRITERIA USED TO DETERMINE AN AWARD IS WHETHER THE AWARD WILL FURTHER THE MISSION OF DIRECT RELIEF INTERNATIONAL AS FOLLOWS:

THE MISSION OF DIRECT RELIEF INTERNATIONAL IS TO PROVIDE APPROPRIATE ASSISTANCE TO HEALTH INSTITUTIONS AND PROJECTS WHICH SERVE THE POOR AND VICTIMS OF NATURAL AND CIVIL DISASTERS WITHOUT REGARD TO POLITICAL AFFILIATIONS, RELIGIOUS BELIEFS, ETHNIC IDENTITY, OR ABILITY TO PAY.

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2001	2000	1999	1998	TOTAL
MISC. OPERATING INCOME	81,768.	52,616.	41,263.	33,040.	208,687.
TOTALS	81,768.	52,616.	41,263.	33,040.	208,687.

Direct Relief International				
2002				
Form 990, Part V - List of Board Officers and members				
Name and Address	Title and Time	Compensation	Contributions to	Expense Acct.
	devoted to position		Employee	& Other
	(per week)		Benefit Plans	Allowances
Thomas E Tighe 27 So. La Patera Lane Santa Barbara, CA 93117	CEO/President 50+	\$ 146,799	\$ 15,326	\$ 10,800
Dorothy Adams 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	\$0.00	\$0.00	\$0.00
Carolyn Amory 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Gilbert Ashor, M.D. 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Robert L. Bletcher, Esq. 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Jayne Brechwald, MPH 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
William Burtness 27 So. La Patera Lane Santa Barbara, CA 93117	Treasurer 5	0.00	0.00	0.00
Andrea Capachietti, Ph. D 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Morgan Clendenen 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Wilton Doane, M.D. 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
James Eiting 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Catherine Firestone 27 So. La Patera Lane Santa Barbara, CA 93117	Secretary 5	0.00	0.00	0.00
Louise Gaylord 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Richard D. Godfrey 27 So. La Patera Lane Santa Barbara, CA 93117	Chair 10	0.00	0.00	0.00
Patricia Halloran 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Joseph Hardin, Jr. 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
Melville Haskell, M.D. 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00
James H. Jackson 27 So. La Patera Lane Santa Barbara, CA 93117	Director 5	0.00	0.00	0.00

Direct Relief International
 Calendar Year 2002
 Statement of Program Service Accomplishments
 Form 990, Part III

Program Service Accomplishments:

Direct Relief's mission is to improve the health of people living in developing countries and those who are victims of natural disasters, war, and civil unrest. We work to strengthen indigenous health efforts of our international partners by providing essential material resources – medicines, supplies and equipment.

People served is calculated based on the courses of treatment provided in an assistance shipment to a partner organization. A course of treatment is the recommended regimen by a manufacturer; for medicines treating a chronic condition or for an ongoing therapy (such as birth control), a one year supply is considered one course of treatment.

Grants and Allocations - By region:

	Weight (lbs)	Value (\$)	People Served
Africa	116,691	\$ 6,359,293	1,232,463
Americas & the Caribbean	386,895	\$ 46,067,567	5,831,596
Asia	382,361	\$ 12,522,680	2,054,345
Other	40,871	\$ 2,934,145	658,585
Total Grants and Allocations	926,818	\$ 67,883,685	9,776,989

Other Program Expenses

\$ 1,701,884

Total Program Service Expense

\$ 69,585,569

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3137	Jabe Hospital and Rohero Clinic	Burundi	Africa	4,814	\$ 204,707	107,102
3001	Boma Ophthalmic Hospital	Congo, D.R.	Africa	11,806	\$ 228,699	54,413
3023	Diocese of Mweka	Congo, D.R.	Africa	5,620	\$ 587,217	56,463
3093	The People of Goma	Congo, D.R.	Africa	2,390	\$ 128,849	57,821
3290	Boma Ophthalmic Hospital	Congo, D.R.	Africa	3,000	\$ 57,500	0
3021	EOC-CFAO Migbare Senay Clinic	Ethiopia	Africa	1,197	\$ 165,664	11,278
2843	Tema General Hospital	Ghana	Africa	1,752	\$ 13,518	26,396
3063	Atuba Community Health Clinic	Ghana	Africa	791	\$ 34,544	27,217
3096	Koforidua Midwife Training Center	Ghana	Africa	16	\$ 9,183	182
3128	Dr. J.C. Sam's Children's Clinic	Ghana	Africa	86	\$ 8,015	1,169
3132	Jehovah Rapha Healthcare Foundation	Ghana	Africa	8,057	\$ 346,143	93,632
3167	Kofie-Bu Teaching Hospital	Ghana	Africa	130	\$ 25,548	2,847
3227	Dr. J.C. Sam's Children's Clinic	Ghana	Africa	105	\$ 19,788	1,658
3232	Maranatha Maternity & Clinic	Ghana	Africa	1,570	\$ 110,907	24,331
3253	Abura Clinic	Ghana	Africa	2,209	\$ 84,250	19,488
2954	Holy Family Dispensary - Offlessos	Kenya	Africa	474	\$ 32,166	6,994

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3007	Nyumbani Orphanage	Kenya	Africa	1,125 \$	38,692	10,848
3018	Alice Nursing Home	Kenya	Africa	1,284 \$	220,021	28,138
3181	Waso Medical Services	Kenya	Africa	2,246 \$	393,254	34,088
3207	AMREF	Kenya	Africa	5,716 \$	312,312	102,293
3275	Immaculate Heart of Mary Hospital	Kenya	Africa	974 \$	87,777	21,839
3312	Waso Medical Services	Kenya	Africa	124 \$	2,621	2,454
3226	Phebe Hospital	Liberia	Africa	53 \$	24,163	1,753
3339	Christian Aid Ministries	Liberia	Africa	1,756 \$	822,461	12,853
3256	Queen Elizabeth Central Hospital	Malawi	Africa	1,240 \$	27,033	11,325
3257	Montfort Hospital	Malawi	Africa	4,851 \$	286,833	57,239
3258	Trinity Hospital	Malawi	Africa	3,272 \$	140,383	49,052
3087	Our Lord's Hospital	Nigeria	Africa	678 \$	47,732	8,006
3298	Our Lord's Hospital	Nigeria	Africa	76 \$	45,541	510
3163	Ndegbornei Development Organization	Sierra Leone	Africa	14,722 \$	508,706	86,894
3194	Norway-Sierra Leone Health Project (NSLHP)	Sierra Leone	Africa	10,362 \$	325,628	110,157
3352	Kalafong Hospital	South Africa	Africa	16 \$	8,663	483
3273	Sudan Future Care Health Clinics	Sudan	Africa	368 \$	31,000	4,276
3071	Kagera Salient Dispensary	Tanzania	Africa	1,288 \$	96,194	7,830
3142	Jambo Health Clinic	Tanzania	Africa	95 \$	11,809	570
3204	Health Department - KADERES	Tanzania	Africa	2,329 \$	192,322	44,022
2956	Rugendebara Foundation for Health	Uganda	Africa	687 \$	244,709	15,669
3121	Aids Orphans Education Trust (AOET)	Uganda	Africa	44 \$	6,120	494
3135	Mulago Hospital	Uganda	Africa	6 \$	1,395	1,240
3265	HOSO UNHCR/kawambwa Hospital	Uganda	Africa	4,864 \$	214,728	81,209
3144	J.F. Kapnek Charitable Trust-PMTCT Program	Zimbabwe	Africa	14,518 \$	212,499	48,230
	Subtotal - Africa			116,691 \$	6,359,293	1,232,463
3113	George Town Clinic	Bahamas	Americas & the Caribbean	100 \$	3,600	0
3289	George Town Clinic	Bahamas	Americas & the Caribbean	154 \$	3,645	5,052
3276	Mercy Care Center	Belize	Americas & the Caribbean	939 \$	205,377	53,691
3123	Proyecto de Salud del Rio Beni	Bolivia	Americas & the Caribbean	1,603 \$	215,081	21,714
3197	Proyecto de Salud del Rio Beni	Bolivia	Americas & the Caribbean	1 \$	20	0
3242	Proyecto de Salud del Rio Beni	Bolivia	Americas & the Caribbean	66 \$	28,503	660
3068	Santa Casa de Misericordia Campos Altos	Brazil	Americas & the Caribbean	569 \$	20,470	500
3083	Keckler Medical Missions	Brazil	Americas & the Caribbean	105 \$	3,200	0
3141	Aracaju Hospital	Brazil	Americas & the Caribbean	8,154 \$	20,635	2,084
3173	Operation U.S.A.	Brazil	Americas & the Caribbean	13 \$	2,741	240
3186	Keckler Medical Missions	Brazil	Americas & the Caribbean	200 \$	7,200	0
3188	Aracaju Hospital	Brazil	Americas & the Caribbean	470 \$	79,513	5,128
3224	Keckler Medical Missions	Brazil	Americas & the Caribbean	575 \$	17,800	0
3245	Asociación Obras Social Irma Dulce	Brazil	Americas & the Caribbean	550 \$	122,929	17,544
3110	Health Care Education Partnership	Dominican Republic	Americas & the Caribbean	231 \$	19,299	2,243
3155	Servicio Social de Iglesias Dominicanas	Dominican Republic	Americas & the Caribbean	12,980 \$	2,359,664	188,126
3156	BRA Dominicana / Batey Relief Alliance	Dominican Republic	Americas & the Caribbean	9,069 \$	367,841	89,819
3306	BRA Dominicana / Batey Relief Alliance	Dominican Republic	Americas & the Caribbean	3,341 \$	136,905	39,391

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3330	J.C. Hispaniola Fund, Inc.	Dominican Republic	Americas & the Caribbean	1,055 \$	138,278	65,981
3174	Project Perfect World	Ecuador	Americas & the Caribbean	552 \$	43,041	12,833
3195	Centro del Muchacho Trabajador	Ecuador	Americas & the Caribbean	939 \$	53,576	22,165
3210	Medical Aid to the Ecuador Amazon	Ecuador	Americas & the Caribbean	136 \$	23,229	2,005
3214	Pastaza Health Programs	Ecuador	Americas & the Caribbean	129 \$	16,687	3,055
3252	Fundacion de Proteccion	Ecuador	Americas & the Caribbean	71 \$	855	918
3149	O.E.F. de El Salvador	El Salvador	Americas & the Caribbean	8,951 \$	3,205,538	46,199
3159	Clinica Maria Madre de los Pobres	El Salvador	Americas & the Caribbean	47 \$	9,888	1,283
3250	AJWS Projects in El Salvador	El Salvador	Americas & the Caribbean	148 \$	30,672	1,553
3301	Fundacion Salvadorena (FUSAL)	El Salvador	Americas & the Caribbean	1,890 \$	158,584	67,557
3092	St. Vincent De Paul Society	Grenada	Americas & the Caribbean	19,229 \$	5,881,330	172,978
3015	Unidas Para Vivir Mejor - UPAVIM	Guatemala	Americas & the Caribbean	1,815 \$	80,592	20,662
3111	Santa Rosa Medical Clinic	Guatemala	Americas & the Caribbean	813 \$	79,560	6,323
3157	Light Ministries	Guatemala	Americas & the Caribbean	538 \$	25,726	3,119
3233	Order of Malta	Guatemala	Americas & the Caribbean	12,641 \$	1,665,676	148,829
3244	Santa Rosa Medical Clinic	Guatemala	Americas & the Caribbean	491 \$	55,450	4,200
3261	Caritas de Guatemala	Guatemala	Americas & the Caribbean	596 \$	52,329	4,696
3294	A Tomorrow for Children Foundation	Guatemala	Americas & the Caribbean	423 \$	1,017,547	2,873
3297	Hospital Santa Elena	Guatemala	Americas & the Caribbean	24 \$	1,199	5
3043	Port Mourant Hospital	Guyana	Americas & the Caribbean	1,291 \$	108,238	16,687
3045	New Amsterdam Hospital	Guyana	Americas & the Caribbean	1,689 \$	170,552	13,447
3046	Bartica Hospital	Guyana	Americas & the Caribbean	1,866 \$	103,814	29,317
3047	Mahaicony District Hospital	Guyana	Americas & the Caribbean	1,792 \$	146,819	18,730
3048	Linden Hospital	Guyana	Americas & the Caribbean	2,587 \$	136,705	32,447
3049	Suddie Hospital	Guyana	Americas & the Caribbean	1,987 \$	130,818	27,736
3050	St. Joseph's Mercy Hospital	Guyana	Americas & the Caribbean	1,251 \$	43,164	19,718
3051	Davis Memorial Hospital	Guyana	Americas & the Caribbean	1,135 \$	37,214	35,900
3119	Berbice River Healthcare Project	Guyana	Americas & the Caribbean	93 \$	76,612	5,143
3175	Food For the Poor	Guyana	Americas & the Caribbean	236 \$	34,045	976
3267	St. Joseph's Mercy Hospital	Guyana	Americas & the Caribbean	879 \$	260,300	118,936
3268	Davis Memorial Hospital	Guyana	Americas & the Caribbean	784 \$	165,836	67,726
3269	Port Mourant Hospital	Guyana	Americas & the Caribbean	1,354 \$	205,859	127,170
3270	New Amsterdam Hospital	Guyana	Americas & the Caribbean	1,704 \$	381,458	126,786
3271	Bartica Hospital	Guyana	Americas & the Caribbean	1,572 \$	253,890	127,746
3272	Linden Hospital	Guyana	Americas & the Caribbean	1,718 \$	98,093	37,838
3311	Berbice River Healthcare Project	Guyana	Americas & the Caribbean	45 \$	62,104	9,489
3091	St. Ignatius Medical Mission	Haiti	Americas & the Caribbean	73 \$	2,535	426
3105	Project Haiti	Haiti	Americas & the Caribbean	375 \$	26,179	7,828
3124	Arcachon Hospital	Haiti	Americas & the Caribbean	15,296 \$	3,532,620	157,339
3198	New Hope Ministries	Haiti	Americas & the Caribbean	288 \$	66,287	3,532
3236	New Hope Ministries	Haiti	Americas & the Caribbean	375 \$	68,368	4,248
3295	Arcachon Hospital	Haiti	Americas & the Caribbean	11,737 \$	2,322,772	821,815
2998	Honduran Health Exchange	Honduras	Americas & the Caribbean	6,946 \$	271,926	101,332
3097	Uhsan Clinic	Honduras	Americas & the Caribbean	115 \$	18,394	451
3118	COHAPAZ	Honduras	Americas & the Caribbean	988 \$	149,707	21,316
3125	Brigada de Salud / Honduras Relief Effort	Honduras	Americas & the Caribbean	68 \$	14,113	4,674

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3133	Hacienda Cristo Salva	Honduras	Americas & the Caribbean	61 \$	5,106	184
3205	Hacienda Cristo Salva	Honduras	Americas & the Caribbean	90 \$	6,730	672
3219	ESCUELA AGRICOLA PANAMERICANA / PROYECTO PROMESA	Honduras	Americas & the Caribbean	3,133 \$	127,162	36,326
3299	Honduran Health Exchange	Honduras	Americas & the Caribbean	5,107 \$	378,068	99,438
3323	Comite de Emergencia Garifuna	Honduras	Americas & the Caribbean	1,172 \$	96,072	35,090
3337	Dr. Polo Galindo Clinic	Honduras	Americas & the Caribbean	1,208 \$	119,133	32,505
3341	Hacienda Cristo Salva	Honduras	Americas & the Caribbean	39 \$	579	868
3066	Cornwall Regional Hospital	Jamaica	Americas & the Caribbean	718 \$	113,020	4,216
3082	Missionaries of the Poor	Jamaica	Americas & the Caribbean	72 \$	1,739	366
3104	Missionaries of the Poor	Jamaica	Americas & the Caribbean	72 \$	34,207	1,429
3211	Jamaica Humanitarian Dental Mission	Jamaica	Americas & the Caribbean	1,849 \$	43,119	35,561
3241	Jamaica Humanitarian Dental Mission	Jamaica	Americas & the Caribbean	296 \$	9,541	7,900
3249	Food for the Poor, Jamaica	Jamaica	Americas & the Caribbean	10,436 \$	798,580	376,562
3260	Missionaries of the Poor	Jamaica	Americas & the Caribbean	33 \$	11,231	552
3340	Food for the Poor, Jamaica	Jamaica	Americas & the Caribbean	7,026 \$	4,666,662	62,501
3358	Missionaries of the Poor	Jamaica	Americas & the Caribbean	143 \$	9,410	249
3057	PVO Mexico, A.C.	Mexico	Americas & the Caribbean	5,950 \$	130,465	67,767
3062	Fundacion Justicia y Amor, I.A.P.	Mexico	Americas & the Caribbean	5,520 \$	5,100	0
3081	AeroMedicos of Santa Barbara	Mexico	Americas & the Caribbean	1,844 \$	675,711	143,003
3108	Club Rotario de Tecate	Mexico	Americas & the Caribbean	11,040 \$	10,200	0
3109	Fundacion Rotaria de La Laguna	Mexico	Americas & the Caribbean	11,040 \$	10,200	0
3115	Juarez Eye Center	Mexico	Americas & the Caribbean	1,494 \$	113,881	22,777
3116	Potter's Clay	Mexico	Americas & the Caribbean	912 \$	65,513	6,228
3151	Hendido del Club Rotario	Mexico	Americas & the Caribbean	14 \$	3,346	126
3161	LIGA International	Mexico	Americas & the Caribbean	388 \$	46,629	3,197
3171	Casa Clinica Convivencia Campesina	Mexico	Americas & the Caribbean	560 \$	125,646	3,481
3190	Mexican Medical	Mexico	Americas & the Caribbean	150 \$	15,000	1,500
3208	Fundacion Justicia y Amor, I.A.P.	Mexico	Americas & the Caribbean	1,191 \$	98,563	19,303
3291	Secretaria de Salud	Mexico	Americas & the Caribbean	2,371 \$	213,094	68,379
3292	LDS Humanitarian Services	Mexico	Americas & the Caribbean	2,000 \$	12,000	0
3348	LIGA International	Mexico	Americas & the Caribbean	770 \$	609,464	4,180
3058	Companeros de las Americas	Nicaragua	Americas & the Caribbean	541 \$	9,796	206,000
3090	Nicaraguan Children's Fund	Nicaragua	Americas & the Caribbean	929 \$	83,042	12,509
3117	American Nicaraguan Foundation	Nicaragua	Americas & the Caribbean	19,371 \$	3,718,163	184,938
3147	Companeros de las Americas	Nicaragua	Americas & the Caribbean	479 \$	8,250	165,000
3176	American Nicaraguan Foundation	Nicaragua	Americas & the Caribbean	17,576 \$	3,279,639	200,374
3185	Lions Club Distrito D-5	Nicaragua	Americas & the Caribbean	2,572 \$	190,150	93,572
3192	Nicaraguan Children's Fund	Nicaragua	Americas & the Caribbean	1,993 \$	293,728	32,585
3218	Companeros de las Americas	Nicaragua	Americas & the Caribbean	86 \$	1,530	0
3305	American Nicaraguan Foundation	Nicaragua	Americas & the Caribbean	12,760 \$	1,644,824	313,270
3084	Ministerio de Salud	Peru	Americas & the Caribbean	1,763 \$	42,602	14,072
3094	Hospital de Apoyo Departamental Cuzco	Peru	Americas & the Caribbean	9,049 \$	328,317	97,083
3127	Hospital Regional de Ayacucho	Peru	Americas & the Caribbean	10,193 \$	346,923	37,220
3184	Valley Baptist Church Mission Team	Peru	Americas & the Caribbean	50 \$	11,210	1,294
3206	Ciudad de Dios Medical Mission	Peru	Americas & the Caribbean	36 \$	13,206	1,067
3240	Instituto Nacional de Defensa Civil (INDECI)	Peru	Americas & the Caribbean	736 \$	88,107	5,804

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3300	Hospital Regional de Ayacucho	Peru	Americas & the Caribbean	6,979 \$	464,724	151,624
3309	Dispensario de Salud de Pomata	Peru	Americas & the Caribbean	3,442 \$	102,187	57,733
3279	Cyril Ross Nursery	Trinidad and Tobago	Americas & the Caribbean	23 \$	1,481	2,136
3076	Marian Medical Center	USA	Americas & the Caribbean	279 \$	6,439	1,436
3088	St. Paul's Chapel	USA	Americas & the Caribbean	167 \$	6,350	768
3098	Healthy Start - Santa Maria	USA	Americas & the Caribbean	197 \$	3,256	1,992
3099	Summer & Santa Packs	USA	Americas & the Caribbean	9,514 \$	78,043	94,979
3100	Healthy Smiles Program	USA	Americas & the Caribbean	179 \$	2,781	1,806
3101	Carrillo Family Dental Clinic	USA	Americas & the Caribbean	319 \$	5,297	3,036
3102	St. Francis Parish Nurses	USA	Americas & the Caribbean	128 \$	2,079	1,040
3130	Santa Barbara County Fire Department	USA	Americas & the Caribbean	201 \$	2,200	1,000
3134	Santa Barbara Food Bank	USA	Americas & the Caribbean	27,729 \$	85,306	1,422
3145	Santa Barbara Food Bank	USA	Americas & the Caribbean	3,316 \$	55,846	0
3146	American Indian Health & Services	USA	Americas & the Caribbean	34 \$	735	6
3150	Victory Outreach Lompoc	USA	Americas & the Caribbean	29 \$	259	232
3153	Operation USA	USA	Americas & the Caribbean	266 \$	58,575	874
3164	American Indian Health & Services	USA	Americas & the Caribbean	1,184 \$	24,497	6,957
3165	Santa Barbara Food Bank	USA	Americas & the Caribbean	6,863 \$	8,638	0
3199	Santa Barbara Food Bank	USA	Americas & the Caribbean	20,189 \$	451,678	161,515
3200	Santa Barbara Neighborhood Clinics	USA	Americas & the Caribbean	54 \$	9,394	1,408
3201	Planned Parenthood of SB	USA	Americas & the Caribbean	60 \$	8,508	1,200
3202	Santa Barbara Public Health Department	USA	Americas & the Caribbean	107 \$	17,444	2,059
3203	People Assisting the Homeless (PATH)	USA	Americas & the Caribbean	175 \$	4,724	21
3220	Migrant Education Program	USA	Americas & the Caribbean	793 \$	9,572	2,936
3259	White Mountain Lake Fire Dist.	USA	Americas & the Caribbean	34 \$	788	1,124
3262	Salvation Army - Oxnard	USA	Americas & the Caribbean	168 \$	640	504
3303	Maine's Worldwide Missions Outreach, Inc.	USA	Americas & the Caribbean	1,387 \$	105,619	36
3317	Women's Community Clinic	USA	Americas & the Caribbean	14 \$	2,421	266
3318	Santa Barbara Hematology Oncology	USA	Americas & the Caribbean	12 \$	20,779	120
3319	Health Linkages Program	USA	Americas & the Caribbean	40 \$	152	120
3320	Santa Barbara Cancer Foundation	USA	Americas & the Caribbean	12 \$	20,779	120
3321	SB Day & Winter Shelter	USA	Americas & the Caribbean	80 \$	305	240
3353	Venice Family Clinic	USA	Americas & the Caribbean	169 \$	3,384	90
	Dreamweaver Medical Foundation	USA	Americas & the Caribbean		832,781	
3212	Turimquire Foundation	Venezuela	Americas & the Caribbean	32 \$	4,059	653
3282	Municipio del Alto Orinoco	Venezuela	Americas & the Caribbean	35 \$	8,586	816
	Subtotal - Americas & the Caribbean			386,895 \$	46,067,567	5,831,596
3086	Kart-e-Seh Hospital	Afghanistan	Asia	6,158 \$	1,766,284	32,265
3089	Samaritan's Purse Hospital	Afghanistan	Asia	52 \$	4,005	4,100
3138	Kart-e-Seh Hospital	Afghanistan	Asia	2,121 \$	213,678	18,982
3154	Kart-e-Seh Hospital	Afghanistan	Asia	5,939 \$	379,936	50,313
3160	Wafia Education Center for Orphans	Afghanistan	Asia	64 \$	3,743	803
3172	Afghan Women's Development Center	Afghanistan	Asia	68 \$	11,311	2,668
3189	Chak-e-Wadak Hospital, ALL Clinics	Afghanistan	Asia		2,843,821	69,216

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3351	Chake-e-Wadak Hospital, AIL Clinics	Afghanistan	Asia	10,435 \$	55,427	45,196
3213	Health Ministry of Armenia	Armenia	Asia	2,022 \$	68,023	1,278
3327	Angioneurology Clinic & Research Center	Armenia	Asia	1,230 \$	18,478	10,226
3169	Sihanouk Hospital Center	Cambodia	Asia	1,988 \$	569,218	27,300
3221	Sihanouk Hospital Center	Cambodia	Asia	12,700 \$	1,217,015	221,954
3310	Sihanouk Hospital Center	Cambodia	Asia	3,637 \$	836,956	10,060
3286	Tibet Child Health/Nutrition Project	China	Asia	1,527 \$	151,958	14,561
3177	A Call to Serve (ACTS) Georgia	Georgia	Asia	649 \$	4,185	405
3095	Wanless Hospital	India	Asia	16 \$	2,632	189
3103	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	10,800 \$	10,200	0
3122	Rajkot Voluntary Blood Bank	India	Asia	7,964 \$	227,855	42,400
3129	Rajkot Voluntary Blood Bank	India	Asia	57,040 \$	52,700	0
3131	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	676 \$	24,311	0
3139	Society For Service To Voluntary Agencies	India	Asia	13,104 \$	212,488	300,568
3140	Hyderabad Eye Institute	India	Asia	354 \$	57,000	0
3158	Hyderabad Eye Institute	India	Asia	581 \$	14,060	0
3179	Venu Charitable Society	India	Asia	178 \$	21,050	0
3180	Venu Charitable Society	India	Asia	1,020 \$	10,136	0
3183	Venu Charitable Society	India	Asia	225 \$	4,439	0
3187	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	3,664 \$	243,894	139,225
3228	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	11,040 \$	10,200	0
3235	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	18,000 \$	3,500	0
3285	Rajkot Voluntary Blood Bank	India	Asia	168 \$	3,600	32,160
3287	Rajkot Voluntary Blood Bank	India	Asia	11,040 \$	10,200	0
3296	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	149,126 \$	37,497	431,000
3222	Red Crescent Society of Mazandaran Province	Iran	Asia	1,457 \$	28,613	445
3223	Dr. Seyed Samad Aghamiri, Director	Iran	Asia	755 \$	58,128	5,243
3280	Relief International - Kurdistan	Iraq	Asia	69 \$	20,074	1,284
3338	Saint Raphael Hospital	Iraq	Asia	229 \$	28,705	2,084
3080	Muang Sing Hospital	Laos	Asia	57 \$	5,229	563
3230	Mahosot Hospital	Laos	Asia	18 \$	3,442	4,380
3325	Riverside Hospital & Rescue	Nepal	Asia	81 \$	8,435	2,848
3085	Overseas Korean Welcoming Committee	North Korea	Asia	4,291 \$	543,124	44,713
3191	Overseas Korean Welcoming Committee	North Korea	Asia	5,832 \$	722,822	41,741
3215	Overseas Korean Welcoming Committee	North Korea	Asia	8,665 \$	1,044,974	24,264
3217	Sariwon Orphanage	North Korea	Asia	3,744 \$	36,504	312
2894	Medical Outreach Clinic & Abulug Hospital	Philippines	Asia	92 \$	44,299	1,506
2999	Dr. Jose Locsin Memorial Hospital	Philippines	Asia	8,649 \$	110,117	218,756
3152	Medical Outreach Clinic & Abulug Hospital	Philippines	Asia	272 \$	47,743	4,192
3331	Medical Outreach Clinic & Abulug Hospital	Philippines	Asia	84 \$	2,474	612
3136	St. John of God Clinic	South Korea	Asia	654 \$	4,195	1,456
3247	St. John of God Clinic	South Korea	Asia	299 \$	3,610	3,348
3231	Grace Church Care Center	South Korea	Asia	182 \$	5,125	8,537
3074	Global Health Access Program	Sri Lanka	Asia	700 \$	140,528	15,362
3314	Hill Tribe Clinics	Thailand	Asia	475 \$	41,134	6,387
3143	ANERA	West Bank/Gaza	Asia	5,270 \$	221,345	149,767

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3170	AMERA	West Bank/Gaza	Asia	1,413 \$	24,976	1,180
3196	Rafidia Hospital	West Bank/Gaza	Asia	15 \$	14,342	1,508
3274	West Bank/Gaza Health Facilities	West Bank/Gaza	Asia	5,474 \$	270,943	58,998
	Subtotal - Asia			382,361 \$	12,522,680	2,054,345
3266	Caritas biskupije Banja Luka u Bihacu	Bosnia-Herzegovina	Other	971 \$	110,787	67,257
3054	Specialized Hosp. for Active Treatment- Tran	Bulgaria	Other	2,556 \$	106,397	20,100
3055	MBAL-EOOD - Samokov	Bulgaria	Other	2,454 \$	402,811	33,337
3077	Hospital "Christo Botev"-Vratza	Bulgaria	Other	2,185 \$	125,662	13,792
3078	Hospital Asenovgrad	Bulgaria	Other	2,296 \$	82,631	22,236
3079	Multiprofile Hospital - Targovishte	Bulgaria	Other	3,421 \$	146,733	31,090
3237	Dr. A. Dafovski Multi-Profile Hospital-Kardzhali	Bulgaria	Other	3,407 \$	155,111	54,625
3238	MBAL - EOOD Cherven Briag	Bulgaria	Other	1,928 \$	159,560	66,270
3239	MBAL Hosp. Dr. T. Vitanov - Tryavna	Bulgaria	Other	2,105 \$	100,527	47,884
3243	Agency for International Aid	Bulgaria	Other	1,247 \$	526,752	2,743
3162	Nursing Home Consortium	Estonia	Other	10,833 \$	662,646	137,778
3005	Ebeve Hospital	Marshall Islands	Other	9 \$	150	3,000
3075	Wewak General Hospital Outreach Boat	Papua New Guinea	Other	56 \$	2,559	1,176
3281	Kimbe Hospital	Papua New Guinea	Other	77 \$	15,509	902
3120	World Opportunities International	Romania	Other	366 \$	98,442	19,696
3326	Central Clinic Pediatric Hospital	Romania	Other	63 \$	2,067	175
3017	Metropolitan Andrew Sheptytsky Hospital	Ukraine	Other	1,286 \$	32,261	5,018
3106	L'viv Regional Specialized Children's Clinic	Ukraine	Other	619 \$	67,610	1,642
3193	Children's Hospital #7	Ukraine	Other	4,992 \$	135,929	129,864
	Subtotal - Other			40,871 \$	2,934,145	658,585
	Total Program Grants and Allocations			926,818 \$	67,883,685	9,776,989

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041 (or Form 5227). See the separate instructions for Form 1041 (or Form 5227).

OMB No. 1545-0092

2002

Name of estate or trust

Employer identification number

DIRECT RELIEF INTERNATIONAL

95-1831116

Note: Form 5227 filers need to complete *only* Parts I and II.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example, 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 31)	(f) Gain or (Loss) (col. (d) less col. (e))
1 SEE STATEMENT 1			420,295.	459,249.	-38,954.
2	Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				
3	Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				
4	Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2001 Capital Loss Carryover Worksheet				
5	Net short-term gain or (loss). Combine lines 1 through 4 in column (f). Enter here and on line 14 below ▶				
					-38,954.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example, 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 31)	(f) Gain or (Loss) (col. (d) less col. (e))	(g) 28% Rate Gain or (Loss) *(see instr. below)
6 SEE STATEMENT 2			1,639,656.	1,642,611.	-2,955.	NONE
7	Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824					
8	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts					
9	Capital gain distributions					
10	Gain from Form 4797, Part I					
11	Long-term capital loss carryover. Enter in both columns (f) and (g) the amount, if any, from line 14, of the 2001 Capital Loss Carryover Worksheet					
12	Combine lines 6 through 11 in column (g).					
13	Net long-term gain or (loss). Combine lines 6 through 11 in column (f). Enter here and on line 15 below ▶					
					-2,955.	

*28% rate gain or loss includes all "collectibles gains and losses" (as defined on page 31 of the instructions) and up to 50% of the eligible gain on qualified small business stock (see page 30 of the instructions).

Part III Summary of Parts I and II		(1) Beneficiaries' (see page 32)	(2) Estate's or trust's	(3) Total
14	Net short-term gain or (loss) (from line 5 above)			-38,954.
15	Net long-term gain or (loss):			
a	Total for year (from line 13 above)			-2,955.
b	28% rate gain or (loss) (from line 12 above)			
c	Qualified 5 - year gain			
d	Unrecaptured section 1250 gain (see line 17 of the worksheet on page 33)			
16	Total net gain or (loss). Combine lines 14 and 15a ▶			-41,909.

Note: If line 16, column (3), is a net gain, enter the gain on Form 1041, line 4. If lines 15a and 16, column (2), are net gains, go to Part V, and do not complete Part IV. If line 16, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2002

Part IV Capital Loss Limitation

<p>17 Enter here and enter as a (loss) on Form 1041, line 4, the smaller of:</p> <p>a The loss on line 16, column (3) or</p> <p>b \$3,000</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">17</td> <td style="width:10%;"></td> <td style="width:80%; text-align: right;">(3,000)</td> </tr> </table>	17		(3,000)
17		(3,000)		

If the loss on line 16, column (3), is more than \$3,000, or if Form 1041, page 1, line 22, is a loss, complete the Capital Loss Carryover Worksheet on page 34 of the instructions to determine your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates (Complete this part **only** if both lines 15a and 16 in column (2) are gains, and Form 1041, line 22 is more than zero.)

Note: If line 15b, column (2) or line 15d, column (2) is more than zero, complete the worksheet on page 35 of the instructions to figure the amount to enter on lines 20 and 38 below and skip all other lines below. Otherwise, go to line 18.

<p>18 Enter taxable income from Form 1041, line 22</p>	18		
<p>19 Enter the smaller of line 15a or 16 in column (2)</p>	19		
<p>20 If the estate or trust is filing Form 4952, enter the amount from line 4e; otherwise, enter -0-</p>	20		
<p>21 Subtract line 20 from line 19. If zero or less, enter -0-</p>	21		
<p>22 Subtract line 21 from line 18. If zero or less, enter -0-</p>	22		
<p>23 Figure the tax on the amount on line 22. Use the 2002 Tax Rate Schedule on page 21 of the instructions</p>			23
<p>24 Enter the smaller of the amount on line 18 or \$1,850</p>	24		
<p>If line 24 is greater than line 22, go to line 25. Otherwise, skip lines 25 through 31 and go to line 32.</p>			
<p>25 Enter the amount from line 22</p>	25		
<p>26 Subtract line 25 from line 24. If zero or less, enter -0- and go to line 32</p>	26		
<p>27 Enter the estate's or trust's allocable portion of qualified 5-year gain, if any, from line 15c, column (2)</p>	27		
<p>28 Enter the smaller of line 26 or line 27</p>	28		
<p>29 Multiply line 28 by 8% (.08)</p>			29
<p>30 Subtract line 28 from line 26</p>	30		
<p>31 Multiply line 30 by 10% (.10)</p>			31
<p>If the amounts on lines 21 and 26 are the same, skip lines 32 through 35 and go to line 36.</p>			
<p>32 Enter the smaller of line 18 or line 21</p>	32		
<p>33 Enter the amount, if any, from line 26</p>	33		
<p>34 Subtract line 33 from line 32</p>	34		
<p>35 Multiply line 34 by 20% (.20)</p>			35
<p>36 Add lines 23, 29, 31, and 35</p>			36
<p>37 Figure the tax on the amount on line 18. Use the 2002 Tax Rate Schedule on page 21 of the instructions</p>			37
<p>38 Tax on all taxable income (including capital gains). Enter the smaller of line 36 or line 37 here and on line 1a of Schedule G, Form 1041.</p>			38

Quantity	Security	Date Sold	Date Acquired	Sales Proceeds	Cost or Other Basis	Gain/ (Loss)
Short Term Capital Gains						
300	Biomet Inc.	11/22/02	5/8/02	8,836	8,901	(65)
150	Calpine Corporation	2/6/02	6/14/01	1,042	2,679	(1,636)
100,000	Chase Manhattan	11/22/02	3/26/02	104,326	101,489	2,837
400	Choicepoint Inc.	11/22/02	10/25/02	15,048	15,348	(300)
200	EMC Corp	2/15/02	3/14/01	2,630	2,848	(218)
150	Expeditors Intl. Wash	11/22/02	10/25/02	4,855	4,650	204
350	Federal National Mortgage Assn.	11/22/02	3/19/02	22,560	28,241	(5,680)
50,000	Household Fin. Co.	11/22/02	7/5/02	49,088	49,627	(539)
425	Invitrogen Corp	5/16/02	Various	14,726	24,906	(10,180)
1,500	MBNA Corp.	11/22/02	Various	33,659	29,739	3,920
300	Microsoft	11/22/02	5/14/02	17,185	16,635	550
750	Nokia Corp.	8/28/02	9/18/01	9,944	18,558	(8,613)
1,100	Pegasus Solutions Inc.	11/22/02	6/26/02	12,346	15,925	(3,580)
400	Quest Diagnostics	11/22/02	Various	22,606	25,510	(2,903)
300	Safeway, Inc.	9/20/02	5/14/02	6,592	12,936	(6,344)
400	Stericycle Inc.	11/22/02	10/25/02	13,576	14,060	(484)
450	Univision Communications A	11/22/02	5/14/02	13,704	18,268	(4,564)
700	Wells Fargo & Company New	11/22/02	Various	33,485	34,570	(1,085)
12	GE	1/2/02	12/27/01	484	481	3
50	Kmart	1/2/02	12/27/01	256	273	(17)
29	Telefonos de Mexico	1/2/02	12/27/01	1,007	1,016	(9)
25	Walt Disney	1/23/02	12/19/01	518	518	(0)
15	Microsoft	1/23/02	1/16/02	1,038	1,018	20
100	Principal	5/1/02	12/31/01	2,738	2,335	403
6	Coca Cola	8/6/02	7/31/02	298	300	(2)
40	Microsoft	12/3/02	11/20/02	2,280	2,307	(27)
373	GE	12/10/02	12/4/02	9,490	9,892	(402)
13	M & T BK Corp	12/10/02	12/4/02	974	1,049	(75)
103	AIG	12/19/02	12/13/02	6,086	6,077	9
90	Merck	12/19/02	12/13/02	5,113	5,181	(68)
18	Pacific Capital Bancorp	12/19/02	12/13/02	447	479	(32)
83	Pharmacia	12/19/02	12/13/02	3,360	3,436	(77)
Subtotal				420,295	459,249	(38,954)

Long Term Capital Gains

200	Adobe Systems	11/22/02	3/23/01	5,868	6,370	(502)
750	Altera Corp	11/22/02	Various	10,269	16,075	(5,806)
200	Amerada Hess	11/22/02	6/14/01	11,208	12,660	(1,452)
300	American International	11/22/02	Various	19,743	23,980	(4,237)
600	Apollo Group	11/22/02	Various	25,833	18,164	7,669
300	Automatic Data Processing	11/22/02	3/23/01	13,180	17,830	(4,650)
600	Avery Dennison	11/22/02	Various	38,482	34,078	4,404
850	Biomet Inc.	11/22/02	9/18/01	25,035	26,425	(1,390)
100,000	Cit Group Inc	7/2/02	11/7/00	100,494	107,200	(6,706)
350	CSG Systems Intl Inc.	6/26/03	9/18/00	6,645	14,318	(7,673)
600	Calpine Corporation	2/6/02	Various	4,169	10,234	(6,065)
900	Cisco Systems	11/22/02	Various	13,318	16,459	(3,141)
600	Cintas Corp.	11/22/02	Various	30,532	28,960	1,572
800	Citigroup Inc.	11/22/02	Various	31,057	40,544	(9,487)
100,000	Commercial Credit Co.	11/22/02	8/3/01	108,330	104,550	3,780
900	Concord EFS Inc.	11/22/02	9/18/01	12,607	29,662	(17,055)
100,000	Donaldson, Lufkin & Jenrette	11/22/02	8/3/01	104,871	101,520	3,351
50,000	Duke Energy Corp.	11/22/02	5/4/01	48,774	47,455	1,319
400	EMC Corp.	2/15/02	Various	5,260	5,536	(276)
900	Eco Lab	11/22/02	5/2/01	44,690	36,385	8,305
500	Emerson Electric	11/22/02	9/18/00	26,154	28,710	(2,556)
350	Expeditors Intl. Wash	11/22/02	3/23/01	11,327	10,128	1,201
750	General Electric Co.	11/22/02	Various	19,822	30,220	(10,398)
100,000	GMAC	11/22/02	8/20/01	102,414	102,280	134
1,100	General Motors CL H New	10/2/02	Various	10,571	17,155	(6,584)
700	Johnson & Johnson	11/22/02	Various	41,136	41,530	(394)
100,000	Lehman Brothers Inc.	11/22/02	9/19/00	108,383	104,410	3,973
550	Lincare Holdings, Inc.	11/22/02	8/21/01	18,753	15,918	2,836
500	Linear Technology Corp.	11/22/02	Various	16,853	19,680	(2,827)
650	Medtronic	11/22/02	9/18/00	31,481	33,447	(1,965)
400	Merck & Company	11/22/02	Various	23,667	23,680	(13)
200	Mercury Interactive Corp.	11/22/02	Various	6,723	6,956	(233)
650	Nokia Corp.	8/28/02	Various	8,618	16,105	(7,486)
400	Northern Trust	11/22/02	Various	15,747	24,248	(8,501)
700	Patterson Dental Corp.	11/22/02	9/18/00	29,537	28,811	726
750	Pfizer, Inc.	11/22/02	9/18/00	24,277	30,048	(5,771)
650	Questar Corporation	11/22/02	8/21/01	16,584	16,443	141
500	Micro Devices Inc.	9/18/02	Various	2,755	9,775	(7,020)
400	SBC Communications	10/25/02	3/23/01	9,892	15,828	(5,936)
500	Safeway, Inc.	9/20/02	1/9/01	10,987	21,035	(10,048)
900	Soletron Corp.	7/24/02	Various	3,726	10,312	(6,586)
700	State Street Corp.	11/22/02	Various	32,540	36,735	(4,195)
1,250	Sun Microsystems, Inc.	5/9/02	Various	8,312	15,535	(7,223)
550	Texas Instruments	11/22/02	Various	10,629	15,560	(4,931)
35	Travelers PPTY Casualty - A	Various	Various	536	967	(431)
71	Travelers PPTY Casualty - B	Various	Various	1,150	1,914	(764)
600	Tyco International New	1/29/02	9/18/00	20,064	35,500	(15,436)
400	Univision Communications A	11/22/02	5/2/01	12,181	16,344	(4,163)
300	Verizon Communications	10/25/02	6/14/01	10,738	14,398	(3,660)
500	Xilinx Inc.	11/22/02	Various	11,870	19,685	(7,815)
250	Amdocs	6/26/02	9/18/00	1,765	8,653	(6,888)
1,450	Flextronics Intl LTD	11/22/02	Various	15,848	34,939	(19,091)
	Smith Barney US Govt Sec Fund	Various	Various	12,500	12,263	237
	Condo Sale	12/17/02	12/1/95	301,753	125,000	176,753
Subtotal				1,639,656	1,642,611	(2,955)
Total Gain/Loss				2,059,951	2,101,860	(41,909)

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

OTHER INCOME

40,124.

40,124.

=====

OTHER DEDUCTIONS

DEPRECIATION - RENTAL PORTION OF BLDG-10.13%

3,896.

DEPRECIATION - RENTAL PORTION OF IMPR-80.00%

2,403.

6,299.

=====

RENT AND ROYALTY SUMMARY

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET INCOME
WAREHOUSE RENTAL	40,124.		23,553.	16,571.
TOTALS	40,124.		23,553.	16,571.

Depreciation and Amortization
(Including Information on Listed Property)

2002

Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

▶ Attach to your tax return.

Attachment
Sequence No. **67**

Name(s) shown on return

Identifying number

DIRECT RELIEF INTERNATIONAL

95-1831116

Business or activity to which this form relates

GENERAL DEPRECIATION

Part I Election To Expense Certain Tangible Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See page 2 of the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see page 2 of the instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 2 of the instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2001 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2003. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see page 3 of the instructions)	14	
15	Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16	Other depreciation (including ACRS) (see page 4 of the instructions)	16	82,985.

Part III MACRS Depreciation (Do not include listed property.) (See page 4 of the instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2002	17	
18	If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B - Assets Placed in Service During 2002 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2002 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see page 6 of the instructions)

21	Listed property. Enter amount from line 28	21	96.
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	83,081.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See page 8 of the instructions for limits for passenger automobiles.)

Table with columns for property type, date placed in service, business/investment use percentage, cost or other basis, basis for depreciation, recovery period, method/convention, depreciation deduction, and elected section 179 cost. Includes rows 25-29 for special depreciation allowance and business use percentages.

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns for miles driven (30-33) and availability for personal use (34-36) for up to six vehicles.

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

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see page 8 of the instructions).

Table with questions 37-41 regarding vehicle policies and requirements, with Yes/No columns.

Part VI Amortization

Table for Section C with columns for description of costs, date amortization begins, amortizable amount, code section, amortization period or percentage, and amortization for this year. Includes rows 42-44.

DIRECT RELIEF INTERNATIONAL

Description of Property
GENERAL DEPRECIATION
DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus. %	179 exp. reduction in basis	30% & ITC Reduction in basis	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Method	Conv.	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
DONATED FURNITURE	10/01/1991	40,000.	100.000			40,000.	40,000.	40,000.	SL		10.000				
DONATED FURNITURE	11/01/1991	3,500.	100.000			3,500.	3,500.	3,500.	SL		10.000				
DONATED FURNITURE	11/01/1991	3,000.	100.000			3,000.	3,000.	3,000.	SL		10.000				
FURNITURE	11/01/1991	500.	100.000			500.	500.	500.	SL		10.000				
FURNITURE	10/01/1991	531.	100.000			531.	531.	531.	SL		10.000				
FURNITURE	11/01/1991	128.	100.000			128.	128.	128.	SL		10.000				
FURNITURE	12/01/1991	321.	100.000			321.	321.	321.	SL		10.000				
OFFICE FURNITURE	12/01/1991	1,592.	100.000			1,592.	1,592.	1,592.	SL		10.000				
TELEPHONE	03/01/1992	12,000.	100.000			12,000.	11,800.	12,000.	SL		10.000				200.
SHELVES	10/01/1991	2,726.	100.000			2,726.	2,726.	2,726.	SL		10.000				
SHELVING	10/01/1991	3,028.	100.000			3,028.	3,028.	3,028.	SL		10.000				
PHARMACY SHELVING	01/01/1992	984.	100.000			984.	984.	984.	SL		10.000				
CHEVY VAN	07/01/1991	18,435.	100.000			18,435.	18,435.	18,435.	SL		5.000				8.
PLUMBING	12/01/1991	163.	100.000			163.	81.	89.	SL		20.000				138.
ALARM SYSTEM	12/01/1991	2,765.	100.000			2,765.	1,392.	1,530.	SL		20.000				32.
LSHLD IMPROV	10/01/1991	645.	100.000			645.	329.	361.	SL		20.000				382.
CARPETING	10/01/1991	7,644.	100.000			7,644.	3,916.	4,298.	SL		20.000				100.
TELEPHONE WIRING	11/01/1991	2,000.	100.000			2,000.	1,017.	1,117.	SL		20.000				10.
PLUMBING	10/01/1991	200.	100.000			200.	103.	113.	SL		20.000				
Less: Retired Assets															
Subtotals															

Listed Property

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
Less: Retired Assets							
Subtotals							
TOTALS							

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
Asset description							
TOTALS							

*Assets Retired
JSA
2X9024 1.000

DIRECT RELIEF INTERNATIONAL

Description of Property
GENERAL DEPRECIATION
DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus. %	179 exp. reduction in basis	30% & ITC Reduction in basis	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me-thod	Conv.	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
12 32MB SDRAM DIMM	05/01/1999	916.	100.000			916.	488.	671.	SL		5.000				183.
2 32MB EDO DIMM	06/01/1999	135.	100.000			135.	70.	97.	SL		5.000				27.
SEAGATE BARR 7200	06/01/1999	209.	100.000			209.	108.	150.	SL		5.000				42.
POWERMAC G3-300	06/01/1999	1,508.	100.000			1,508.	780.	1,082.	SL		5.000				302.
PANASONIC WC7502	06/01/1999	213.	100.000			213.	111.	154.	SL		5.000				43.
17IN/16V DISPLAY	06/01/1999	535.	100.000			535.	276.	383.	SL		5.000				107.
MISC COMPUTER PART	06/01/1999	269.	100.000			269.	139.	193.	SL		5.000				54.
SUPRAEXPRESS 56K U	07/01/1999	169.	100.000			169.	85.	119.	SL		5.000				34.
SOLO 2500 LS	10/01/1999	2,303.	100.000			2,303.	1,037.	1,498.	SL		5.000				461.
DIRECTPC DISH, MOD	10/01/1999	293.	100.000			293.	133.	192.	SL		5.000				59.
MICRON PENTIUM	06/01/1999	250.	100.000			250.	129.	179.	SL		5.000				50.
SONNY DCR-PC-1	02/01/1999	1,857.	100.000			1,857.	542.	728.	SL		10.000				186.
FOLDING CHAIRS (GR	02/01/1999	246.	100.000			246.	73.	98.	SL		10.000				25.
FOLDING CHAIRS (GR	03/01/1999	368.	100.000			368.	105.	142.	SL		10.000				37.
VCR JVC HRVP6730	04/01/1999	164.	100.000			164.	44.	60.	SL		10.000				16.
VIDEO PROJ SYSTEM	06/01/1999	10,000.	100.000			10,000.	2,583.	3,583.	SL		10.000				1,000.
RICOH MULT COPIER	06/01/1999	750.	100.000			750.	194.	269.	SL		10.000				75.
12 PCS FURN/18 CHA	08/01/1999	3,500.	100.000			3,500.	846.	1,196.	SL		10.000				350.
USED MITA DC-6090	08/01/1999	1,000.	100.000			1,000.	242.	342.	SL		10.000				100.
Less: Retired Assets															
Subtotals															

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
Less: Retired Assets							
Subtotals							
TOTALS							

*Assets Retired
JSA
2X9024 1.000

DIRECT RELIEF INTERNATIONAL

Description of Property
GENERAL DEPRECIATION
DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus. %	179 exp. reduction in basis	30% & ITC Reduction in basis	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me-thod	Conv.	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
FLOOR SCALE 48X48	01/01/1999	2,144.	100.000			2,144.	642.	856.	SL		10.000				214.
27' VAN TRAILER BR	06/01/1999	1,575.	100.000			1,575.	408.	566.	SL		10.000				158.
27' VAN TRAILER FR	06/01/1999	1,575.	100.000			1,575.	408.	566.	SL		10.000				158.
45 FT STOR TRAILER	06/01/1999	2,500.	100.000			2,500.	646.	896.	SL		10.000				250.
3-12X8 STEEL STRUC	11/01/1999	1,500.	100.000			1,500.	325.	475.	SL		10.000				150.
MIG WELDER	11/01/1999	650.	100.000			650.	141.	206.	SL		10.000				65.
PALLET JACK	10/01/1999	500.	100.000			500.	113.	163.	SL		10.000				50.
STEAM CLEANER	11/01/1999	2,200.	100.000			2,200.	477.	697.	SL		10.000				220.
DOCK LEVELER W/INS	11/01/1999	10,690.	100.000			10,690.	2,316.	3,385.	SL		10.000				1,069.
LHI - LIGHTING	08/01/2000	5,190.	100.000			5,190.	184.	314.	SL		40.000				130.
RCA TV	01/01/2000	539.	100.000			539.	108.	162.	SL		10.000				54.
KYOCERA FAX	06/01/2000	557.	100.000			557.	176.	287.	SL		5.000				111.
PHONE SYSTEM	07/01/2000	37,400.	100.000			37,400.	5,610.	9,350.	SL		10.000				3,740.
ETHERNET CONVERTER	06/01/2000	1,703.	100.000			1,703.	540.	881.	SL		5.000				341.
CABLE METER/TESTER	03/27/2000	595.	100.000			595.	105.	165.	SL		10.000				60.
TEST EQUIPMENT	03/09/2000	7,711.	100.000			7,711.	1,414.	2,185.	SL		10.000				771.
SANDBLASTER	03/16/2000	815.	100.000			815.	143.	225.	SL		10.000				82.
DIGITAL CAMERA	01/31/2001	709.	100.000			709.	65.	136.	SL		10.000				71.
CHAIR-SUE FOWLER	04/10/2001	740.	100.000			740.	49.	123.	SL		10.000				74.
Less: Retired Assets															
Subtotals															

Listed Property

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
Less: Retired Assets							
Subtotals							
TOTALS							

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
Less: Retired Assets							
Subtotals							
TOTALS							

*Assets Retired
JSA
ZX9024 1.000

DIRECT RELIEF INTERNATIONAL

Description of Property

GENERAL DEPRECIATION

DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus. %	179 exp. reduction in basis	30% & ITC Reduction in basis	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me-thod	Conv.	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
CHAIRS-8	03/30/2001	2,800.	100.000			2,800.	210.	490.	SL		10.000				280.
CISCO ROUTER	02/28/2001	800.	100.000			800.	133.	293.	SL		5.000				160.
INSTALL CTS-CISCO	02/27/2001	330.	100.000			330.	55.	121.	SL		5.000				66.
30 MICRON PC'S	02/01/2002	9,600.	100.000			9,600.		1,760.	SL		5.000				1,760.
2 DELL SERVERS	11/01/2002	5,000.	100.000			5,000.		167.	SL		5.000				167.
2 LEVEL RACK SYS	01/17/2001	30,000.	100.000			30,000.	2,750.	5,750.	SL		10.000				3,000.
ELECTRIC FORKLIFT	01/17/2001	1,000.	100.000			1,000.	92.	192.	SL		10.000				100.
FREIGHT TRAILER	09/10/2001	4,500.	100.000			4,500.	113.	563.	SL		10.000				450.
NOVELL SMALL BSNs	12/31/2001	13,676.	100.000			13,676.		2,735.	SL		5.000				2,735.
5 HP JETDIRECT PRI	02/18/2002	1,112.	100.000			1,112.		204.	SL		5.000				204.
POWERMAC DUAL 1GHZ	02/21/2002	3,768.	100.000			3,768.		691.	SL		5.000				691.
2 HP VECTRA 500	04/01/2002	800.	100.000			800.		120.	SL		5.000				120.
DELL INSPIRON LAP	05/31/2002	450.	100.000			450.		60.	SL		5.000				60.
1 300MHZ LAPTOP	07/22/2002	360.	100.000			360.		36.	SL		5.000				36.
9 366-400 MHZ LAPT	07/22/2002	3,953.	100.000			3,953.		395.	SL		5.000				395.
1 LASERJET III SI	07/22/2002	200.	100.000			200.		20.	SL		5.000				20.
17 17" MONITORS	07/22/2002	1,105.	100.000			1,105.		111.	SL		5.000				111.
6 21" MONITORS	07/22/2002	1,200.	100.000			1,200.		120.	SL		5.000				120.
HP SURESTORE TAPED	08/01/2002	1,765.	100.000			1,765.		147.	SL		5.000				147.
Less: Retired Assets															
Subtotals															

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
Less: Retired Assets							
Subtotals							
TOTALS							

*Assets Retired
JSA
2X9024 1.000

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization DIRECT RELIEF INTERNATIONAL	Employer identification number 95-1831116
	Number, street, and room or suite no. If a P.O. box, see instructions. 27 SOUTH LA PATERA LANE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SANTA BARBARA, CA 93117-3251	

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

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T(sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- 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 will cover.

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until 08/15, 2003, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► calendar year 2002 or
► tax year beginning _____, _____, and ending _____, _____.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

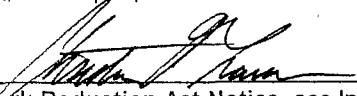
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c Balance Due. Subtract line 3b from line 3a. 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 \$ _____

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 ► CPA P00071142 Date ► 05/08/2003

For Paperwork Reduction Act Notice, see Instruction Form **8868** (12-2000)

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

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.

Name of Exempt Organization: DIRECT RELIEF INTERNATIONAL
Employer identification number: 95-1831116
Number, street, and room or suite no.: 27 SOUTH LA PATERA LANE
City, town or post office, state, and ZIP code: SANTA BARBARA, CA 93117-3251

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

Form 990 [X] 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 11/17/2003
5 For calendar year 2002, or other tax year beginning and ending
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 IS STILL IN THE PROCESS OF GATHERING ADDITIONAL INFORMATION. TAXPAYER REQUESTS ADDITIONAL TIME TO FILE IN ORDER TO FILE A COMPLETE 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 \$

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 [Handwritten Signature] Title CPA P00071142 Date 08/10/2003

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 a 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.

Name: LARSON & RIDGE LLP
Number and street (include suite, room, or apt. no.) Or a P.O. box number: P.O. BOX 92021
City or town, province or state, and country (including postal or ZIP code): SANTA BARBARA, CA 93190-2021