

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)

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 2004 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions. C Name of organization SOCIETY OF ENVIRONMENTAL JOURNALISTS, INC.	D Employer identification number 52-0194031
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 2492	E Telephone number 215-884-8174
	City or town, state or country, and ZIP + 4 JENKINTOWN, PA 19046	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

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

Hand I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? N/A Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number ▶

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: WWW.SEJ.ORG

J Organization type (check only one) 501(c) (3) (insert no.) 4947(a)(1) or 527

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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 904,976.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	463,474.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ 463,474. noncash \$)	1d	463,474.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	377,748.	
	3	Membership dues and assessments	3	30,686.	
	4	Interest on savings and temporary cash investments	4	10,454.	
	5	Dividends and interest from securities	5		
	6a	Gross rents	6a		
	b	Less: rental expenses	6b		
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		
7	Other investment income (describe)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
		4,948.	8a		
		Less: cost or other basis and sales expenses	8b	7,576.	
		Gain or (loss) (attach schedule)	8c	<2,628.>	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	STMT 1	<2,628.>	
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ of contributions reported on line 1a)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11	17,666.		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	897,400.		
Expenses	13	Program services (from line 44, column (B))	13	696,676.	
	14	Management and general (from line 44, column (C))	14	57,976.	
	15	Fundraising (from line 44, column (D))	15	38,449.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses (add lines 16 and 44, column (A))	17	793,101.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	104,299.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	670,868.	
	20	Other changes in net assets or fund balances (attach explanation)	20	SEE STATEMENT 2	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	775,185.	

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. Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	(cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	77,341.	46,404.	6,187.	24,750.
26	Other salaries and wages	167,274.	146,273.	19,829.	1,172.
27	Pension plan contributions	9,278.	7,308.	987.	983.
28	Other employee benefits	46,547.	36,664.	4,950.	4,933.
29	Payroll taxes	20,254.	15,953.	2,155.	2,146.
30	Professional fundraising fees				
31	Accounting fees	4,898.		4,898.	
32	Legal fees	1,370.		1,370.	
33	Supplies	15,658.	14,595.	532.	531.
34	Telephone	8,801.	8,113.	345.	343.
35	Postage and shipping	21,210.	19,966.	623.	621.
36	Occupancy	32,948.	29,653.	1,650.	1,645.
37	Equipment rental and maintenance				
38	Printing and publications	26,922.	26,922.		
39	Travel	50,304.	48,616.	846.	842.
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	6,081.		6,081.	
43	Other expenses not covered above (itemize):				
a	_____				
b	_____				
c	_____				
d	_____				
e	SEE STATEMENT 3	304,215.	296,209.	7,523.	483.
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	793,101.	696,676.	57,976.	38,449.

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? EDUCATING JOURNALISTS WHO REPORT ON ENVIRONMENTAL ISSUES	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a SPONSORSHIP OF AN ANNUAL CONFERENCE TO EDUCATE JOURNALISTS ENGAGED IN REPORTING ON THE ENVIRONMENT (Grants and allocations \$ _____)	327,620.
b SPONSORSHIP OF VARIOUS REGIONAL CONFERENCES, FELLOWSHIPS, AND DIVERSITY AWARDS TO EDUCATE JOURNALISTS ENGAGED IN REPORTING ON THE ENVIRONMENT, AND FREEDOM OF INFORMATION INITIATIVE PROGRAM (Grants and allocations \$ _____)	160,673.
c DATABASE MANAGEMENT OF MEMBER AND NONMEMBER INFORMATION ON JOURNALISTS STUDENTS AND OTHERS WHO HAVE AN INTEREST IN ENVIRONMENTAL ISSUES, USE OF WHICH IS MADE AVAILABLE TO MEMBERS AND NON-MEMBERS. (Grants and allocations \$ _____)	66,775.
d PUBLICATION OF PRINTED NEWSLETTER, EMAIL NEWSLETTERS, WEBSITE FEATURES ADDRESS ON ISSUES RELEVANT TO ENVIRONMENTAL JOURNALIST FOR DISTRIBUTION TO JOURNALIST, ACADEMICS AND THE PUBLIC. (Grants and allocations \$ _____)	141,608.
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	696,676.

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Part IV Balance Sheets

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

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	46,936.	45	49,366.
	46 Savings and temporary cash investments	334,241.	46	671,431.
	47 a Accounts receivable	47a 53,328.		
	b Less: allowance for doubtful accounts	47b	2,570.	47c 53,328.
	48 a Pledges receivable	48a 27,184.		
	b Less: allowance for doubtful accounts	48b	267,435.	48c 27,184.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		7,944.	53 8,226.
	54 Investments - securities STMT 4 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		5,167.	54 430.
	55 a Investments - land, buildings, and equipment basis	55a 88,551.		
	b Less: accumulated depreciation	55b 70,965.	15,033.	55c 17,586.
56 Investments - other		0.	56 0.	
57 a Land, buildings, and equipment basis	57a			
b Less: accumulated depreciation	57b		57c	
58 Other assets (describe SEE STATEMENT 5)		92.	58 3,180.	
59 Total assets (add lines 45 through 58) (must equal line 74)		679,418.	59 830,731.	
Liabilities	60 Accounts payable and accrued expenses	8,550.	60	15,546.
	61 Grants payable		61	
	62 Deferred revenue		62	40,000.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe)		65	
66 Total liabilities (add lines 60 through 65)		8,550.	66 55,546.	
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	376,406.	67	518,067.
	68 Temporarily restricted	269,125.	68	224,684.
	69 Permanently restricted	25,337.	69	32,434.
	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)		670,868.	73 775,185.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		679,418.	74 830,731.	

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.

**SOCIETY OF ENVIRONMENTAL JOURNALISTS,
INC.**

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Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		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.		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
b	If "Yes," enter the name of the organization ▶ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	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 		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A		
85	<i>501(c)(4), (5), or (6) organizations.</i> a Were substantially all dues nondeductible by members? N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A		
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? N/A		
86	<i>501(c)(7) organizations.</i> 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	<i>501(c)(12) organizations.</i> 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		X
89 a	<i>501(c)(3) organizations.</i> Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.		
b	<i>501(c)(3) and 501(c)(4) organizations.</i> 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		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0.		
90 a	List the states with which a copy of this return is filed ▶ PENNSYLVANIA		
b	Number of employees employed in the pay period that includes March 12, 2004 90b 6		
91	The books are in care of ▶ MANAGEMENT Telephone no. ▶ 215-844-8174		
Located at ▶ 321 OLD YORK ROAD SUITE 200 JENKINTOWN, PA ZIP + 4 ▶ 19046			
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		

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01-13-05

Form 990 (2004)

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a <u>SUBSCRIPTIONS</u>					4,140.
b <u>CONFERENCE REVENUES</u>					373,608.
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					30,686.
95 Interest on savings and temporary cash investments ...			14	10,454.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	<2,628.>	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>MAILING LIST</u>			13	14,973.	
b <u>MISCELLANEOUS INCOME</u>					2,693.
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		22,799.	411,127.
105 Total (add line 104, columns (B), (D), and (E))					433,926.

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 34 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).
▼	SEE STATEMENT 7

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 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
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 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 8870 and Form 4720 (see instructions).

Please Sign Here 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.

Signature of officer _____ Date _____ Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature: FISHBEIN & COMPANY, P.C. Date _____ Check if self-employed Preparer's SSN or PTIN _____
 Firm's name (or yours if self-employed), address, and ZIP + 4: 110 GIBRALTAR ROAD, SUITE 116
HORSHAM, PA 19044 EIN _____
 Phone no. (215) 259-1000

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2004

Name of the organization **SOCIETY OF ENVIRONMENTAL JOURNALISTS, INC.** Employer identification number **52 0194031**

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
CHRIS RIGEL ----- 340 EUCLID AVENUE AMBLER, PA 19002	ASSOC DIR. 40+	58,680.	2,934.	

Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -----		

Total number of others receiving over \$50,000 for professional services ▶	0	

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **▶** _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

**SOCIETY OF ENVIRONMENTAL JOURNALISTS,
INC.**

Schedule A (Form 990 or 990-EZ) 2004

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Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	416,811.	502,729.	438,457.	1,013,177.	2,371,174.
16 Membership fees received	33,028.	35,508.	34,703.	28,852.	132,091.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	253,516.	241,371.	224,192.	24,770.	743,849.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	5,266.	12,280.	19,518.	15,202.	52,266.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	28,260.	19,266.	SEE STATEMENT 8 18,075.		65,601.
23 Total of lines 15 through 22	736,881.	811,154.	734,945.	1,082,001.	3,364,981.
24 Line 23 minus line 17	483,365.	569,783.	510,753.	1,057,231.	2,621,132.
25 Enter 1% of line 23	7,369.	8,112.	7,349.	10,820.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c N/A
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total)					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f N/A %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2003) 0. (2002) 0. (2001) 0. (2000) 0.					
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: (2003) 0. (2002) 0. (2001) 0. (2000) 0.					
c Add: Amounts from column (e) for lines: 15 2,371,174. 16 132,091. 17 743,849. 20 _____ 21 _____					27c 3,247,114.
d Add: Line 27a total 0. and line 27b total 0.					27d 0.
e Public support (line 27c total minus line 27d total)					27e 3,247,114.
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f 3,364,981.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 96.4972%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 1.5532%

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

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

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
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?		
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.)			

32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			

33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	If the amount on line 40 is -		
	The lobbying nontaxable amount is -		
	Not over \$500,000		20% of the amount on line 40
	Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000
	Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000
	Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000
	Over \$17,000,000		\$1,000,000
41	Grassroots nontaxable amount (enter 25% of line 41)	41	
42	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	42	
43	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

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

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
CD MERRILL LYNCH	0.	0.	0.	0.
CD PROVIDIAN N.B. TILTO	0.	0.	0.	0.
CD BANCO POPULAR NOR AMERICA	0.	0.	0.	0.
CD BANCO POPULAR NOR AMERICA	0.	0.	0.	0.
CD FREMONT IN & LOAN	0.	0.	0.	0.
CD BANCO POPULAR NOR AMERICA	0.	0.	0.	0.
130 SHRS ALLIANCE BERNSTEIN PREM	2,068.	3,912.	0.	<1,844.>
45 SHRS MUNDER INDEX 500	1,083.	1,228.	0.	<145.>
207 SHRS ALLIANCE BERNSTEIN GLOBAL	1,797.	2,436.	0.	<639.>
TO FORM 990, PART I, LINE 8	4,948.	7,576.	0.	<2,628.>

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

DESCRIPTION	AMOUNT
NET UNREALIZED GAINS ON INVESTMENTS	18.
TOTAL TO FORM 990, PART I, LINE 20	18.

FORM 990 OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
AUDIO-VISUAL SERVICES	3,090.	3,090.		
BANK/CREDIT CARD CHARGES	7,037.		7,037.	
CATERING AND FACILITIES	49,641.	49,641.		
CONFERENCE MANAGEMENT AND MARKETING	2,960.	2,960.		
CONSULTANTS	86,909.	86,909.		
INSURANCE	5,248.	4,723.	263.	262.
MEMBERSHIP MAILING LIST	263.	263.		

MINORITY AND FELLOWSHIPS	18,767.	18,767.		
REGIONAL CONFERENCE EXPENSES	3,577.	3,577.		
REGISTRATION SERVICES	13,321.	13,321.		
REPAIRS AND MAINTENANCE	2,049.	1,844.	103.	102.
STAFF AND BOARD DEVELOPMENT	1,126.	887.	120.	119.
TRANSPORTATION AND TOUR FEES	32,896.	32,896.		
WEBSITE MAINTENANCE	48,924.	48,924.		
FREEDOM OF INFORMATION INITIATIVES	28,407.	28,407.		
TOTAL TO FM 990, LN 43	304,215.	296,209.	7,523.	483.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 4

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
INVESTMENTS	FMV	430.			430.
TO FORM 990, LINE 54, COL B		430.			430.

FORM 990 OTHER ASSETS STATEMENT 5

DESCRIPTION	AMOUNT
INVESTMENT INCOME RECEIVABLE	3,180.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	3,180.

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 6

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT
DAN FAGIN 49 GLEN AVENUE SEA CLIFF, NY 11579	MEMBER 5	0.	0. 0.
PERRY BEEMAN 715 LOCUST STREET DES MOINES, IA 50309	FIRST VP/PROGRAM COMMITTEE 5	0.	0. 0.
PETER FAIRLEY 1749 LILLIAN ROAD VICTORIA BC V8S 1L2	2ND VP/MEMBERSHIP COMMITTEE 5	0.	0. 0.
CAROLYN WHETZEL P.O. BOX 1893 REDLANDS, CA 92373-0621	SECRETARY 5	0.	0. 0.
PETER P. THOMSON 85 REVERE STREET #B BOSTON, MA 02114	TREASURER 5	0.	0. 0.
JAMES BRUGGERS 186 NORTH BELLAIRE AVENUE LOUISVILLE, KY 40206	MEMBER 5	0.	0. 0.
KEVIN P. CARMODY P.O. BOX 670 AUSTIN, TX 78767	MEMBER 5	0.	0. 0.
CHRISTY GEORGE 7140 SW MACADAM AVENUE PORTLAND, OR 97219	MEMBER 5	0.	0. 0.
MARK SCHLEIFSTEIN 3800 HOWARD AVENUE NEW ORLEANS, LA 70140-1097	2ND VP/MEMBERSHIP COMMITTEE 5	0.	0. 0.
TIMOTHY WHEELER 21 DUTTON AVENUE CATONSVILLE, MD 21228	FIRST VP/PROGRAM COMMITTEE 5	0.	0. 0.
JIM DETJEN 382 COMMUNICATION ARTS BUILDING EAST LANSING, MI 48824-1212	MEMBER 5	0.	0. 0.

ROBERT MCCLURE 720 NORTH 42ND STREET SEATTLE, WA 98103-7215	MEMBER 5	0.	0.	0.
DON HOPEY 34 BOULEVARD OF THE ALLIES PITTSBURGH, PA 15222	MEMBER 5	0.	0.	0.
BETH PARKE 7932 HEATHER RD ELKINS PARK, PA 19046	EXECUTIVE DIRECTOR 40+	77,341.	3,867.	0.
CHERYL HOGUE 1820 SANFORD ROAD WHEATON, MD 20902	MEMBER 5	0.	0.	0.
BILL KOVARIK P.O. BOX 6929 RADFORD UNIVERSITY RADFORD, VA 24142	MEMBER 5	0.	0.	0.
REBECCA DAUGHERTY 1101 WILSON BOULEVARD SUITE 1100 ARLINGTON, VA 22209	MEMBER 5	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		77,341.	3,867.	0.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO STATEMENT 7
ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	PROVIDES SERVICE TO BOTH MEMBER AND NON-MEMBERS WHICH IN TURN PROVIDES
AND	FOR THE CONTRIBUTIONS THAT ARE MADE WHICH PROMOTE THE EXCHANGE OF
94	INFORMATION ON CURRENT ENVIRONMENTAL ISSUES
93B	NATIONAL AND REGIONAL CONFERENCES HELD TO BUILD A STRONGER, BETTER
	EDUCATED, AND MORE CLOSELY CONNECTED NETWORK OF JOURNALIST AND EDITORS
	IN ALL MEDIA WHO COVER ENVIRONMENTAL-RELATED ISSUES, AND THROUGH THAT
	NETWORK, TO IMPROVE AND INCREASE NEWS COVERAGE OF CRITICALLY IMPORTANT
	ENVIRONMENTAL ISSUES THROUGH PROGRAMS AND SERVICES DESIGNED BY AND FOR
	JOURNALISTS.

SCHEDULE A	OTHER INCOME			STATEMENT	8
DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT	
MAILING LIST	24,002.	19,266.	18,075.		0.
MISCELLANEOUS INCOME	4,258.	0.	0.		0.
TOTAL TO SCHEDULE A, LINE 22	28,260.	19,266.	18,075.		0.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

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

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.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print	Name of Exempt Organization SOCIETY OF ENVIRONMENTAL JOURNALISTS, INC.	Employer identification number 52-0194031
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 2492	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. JENKINTOWN, PA 19046	

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 |

- The books are in the care of ▶ MANAGEMENT
 Telephone No. ▶ 215-844-8174 FAX No. ▶ _____
- 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-months for a **Form 990-T corporation**) extension of time until AUGUST 15, 2005 to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year 2004 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 \$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.