

# Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2004**

**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 2004 calendar year, or tax year beginning** \_\_\_\_\_ **and ending** \_\_\_\_\_

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

Please use IRS label or print or type. See Specific Instructions.	<b>C Name of organization</b> Remnant Publications, Inc		<b>D Employer identification number</b> 38-2810502	
	Number and street (or P O box if mail is not delivered to street address) Room/suite		<b>E Telephone number</b>	
	649 E Chicago Road			
	City or town	State or country	ZIP + 4	<b>F Accounting method</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
Coldwater		MI	49036	

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

**H and I are not applicable to section 527 organizations**

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

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

**H(c)** Are all affiliates included?  Yes  No (If "No," attach a list. See instructions.)

**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** ▶ N/A

**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 ▶ **2,205,073**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 18 of the instructions)

Revenue	1	Contributions, gifts, grants, and similar amounts received			
		a Direct public support	1a	194,944	
		b Indirect public support	1b		
		c Government contributions (grants)	1c		
		d Total (add lines 1a through 1c) (cash \$ 153,424 noncash \$ 41,520)	1d	194,944	
		2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	2,009,825	
		3 Membership dues and assessments	3	0	
		4 Interest on savings and temporary cash investments	4	0	
		5 Dividends and interest from securities	5	304	
		6 a Gross rents	6a		
		b Less rental expenses	6b		
		c Net rental income or (loss) (subtract line 6b from line 6a)	6c	0	
	7 Other investment income (describe )	7	0		
	8 a Gross amount from sales of assets other than inventory	(A) Securities	8a	0	
		(B) Other			
	b Less cost or other basis and sales expenses	8b	0		
	c Gain or (loss) (attach schedule)	8c	0		
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	0		
	9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ 194,944 of contributions reported on line 1a)	9a	0		
	b Less direct expenses other than fundraising expenses	9b	0		
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9c	0		
	10 a 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	0		
	11 Other revenue (from Part VII, line 103)	11	0		
	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	2,205,073		
Expenses	13	Program services (from line 44, column (B))	13	911,317	
	14	Management and general (from line 44, column (C))	14	677,329	
	15	Fundraising (from line 44, column (D))	15	35,715	
	16	Payments to affiliates (attach schedule)	16	0	
	17	Total expenses (add lines 16 and 44, column (A))	17	1,624,361	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	580,712	
	19	Net assets or fund balances at beginning of year (from line 17, column (A))	19	18,141	
	20	Other changes in net assets or fund balances (attach explanation)	20	-82,881	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	515,972	

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**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 22 of the instructions.)

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 \$ 0 noncash \$ 0)	0	0		
23	Specific assistance to individuals (attach schedule)	0			
24	Benefits paid to or for members (attach schedule)	0			
25	Compensation of officers, directors, etc.	0			
26	Other salaries and wages	353,827	35,383	304,291	14,153
27	Pension plan contributions	0			
28	Other employee benefits	0			
29	Payroll taxes	33,291	3,329	28,830	1,132
30	Professional fundraising fees	0			
31	Accounting fees	5,035		5,035	
32	Legal fees	1,024		1,024	
33	Supplies	24,929	13,788	11,141	
34	Telephone	28,664		28,664	
35	Postage and shipping	152,734	152,734		
36	Occupancy	60,000		60,000	
37	Equipment rental and maintenance	52,806		52,806	
38	Printing and publications	592,153	592,153		
39	Travel	61,462		55,316	6,146
40	Conferences, conventions, and meetings	0			
41	Interest	45,285		45,285	
42	Depreciation, depletion, etc. (attach schedule)	121,286	113,930	7,356	
43	Other expenses not covered above (itemize) a Sales rep	12,326			12,326
	b Advertising	5,934		3,976	1,958
	c Insurance & workers compensation	22,700		22,700	
	d Royalty	26,178		26,178	
	e Tithe & transfers	15,677		15,677	
	f Website, miscellaneous, bank fees	9,050		9,050	
44	<b>Total functional expenses</b> (add lines 22 through 43). <i>Organizations completing columns (B)-(D), carry these totals to lines 13-15.</i>	1,624,361	911,317	677,329	35,715

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 \$ 0, (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 25 of the instructions.)

What is the organization's primary exempt purpose? <input checked="" type="checkbox"/> Dissemination of church literature	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others.)
a Dissemination of church literature  (Grants and allocations \$ )	911,317
b  (Grants and allocations \$ )	
c  (Grants and allocations \$ )	
d  (Grants and allocations \$ )	
e Other program services (attach schedule) (Grants and allocations \$ )	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	911,317

**Part IV Balance Sheets** (See page 25 of the instructions.)

Note		(A)		(B)		
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year		
Assets	45	Cash—non-interest-bearing	210,900	45	116,450	
	46	Savings and temporary cash investments		46		
	47 a	Accounts receivable	47a 364,730			
	b	Less allowance for doubtful accounts	47b 0	156,110	47c 364,730	
	48 a	Pledges receivable	48a 0			
	b	Less allowance for doubtful accounts	48b 0	0	48c 0	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		0	50 0	
	51 a	Other notes and loans receivable (attach schedule)	51a 0			
	b	Less allowance for doubtful accounts	51b 0	0	51c 0	
	52	Inventories for sale or use		209,551	52 299,572	
	53	Prepaid expenses and deferred charges			53	
	54	Investments—securities (attach schedule)		0	54 0	
	55 a	Investments—land, buildings, and equipment basis	55a 1,306,155			
	b	Less accumulated depreciation (attach schedule)	55b 931,664	286,977	55c 374,491	
56	Investments—other (attach schedule)		0	56 0		
57 a	Land, buildings, and equipment basis	57a 0				
b	Less accumulated depreciation (attach schedule)	57b 0	0	57c 0		
58	Other assets (describe _____ )		0	58 0		
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)		863,538	59 1,155,243		
Liabilities	60	Accounts payable and accrued expenses	88,659	60 76,013		
	61	Grants payable		61		
	62	Deferred revenue		62		
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		0	63 0	
	64 a	Tax-exempt bond liabilities (attach schedule)		0	64a 0	
	b	Mortgages and other notes payable (attach schedule)		756,914	64b 562,756	
65	Other liabilities (describe _____ )		-176	65 502		
66	<b>Total liabilities</b> (add lines 60 through 65)		845,397	66 639,271		
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	-177,770	67 458,333		
	68	Temporarily restricted	195,911	68 57,639		
	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	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		18,141	73 515,972		
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		863,538	74 1,155,243		

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See page 27 of the instructions.)

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

<b>a</b>	Total revenue, gains, and other support per audited financial statements	<b>a</b>	
<b>b</b>	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify) \$		
	----- \$		
	----- \$		
	Add amounts on lines (1) through (4)	<b>b</b>	0
<b>c</b>	Line a minus line b	<b>c</b>	0
<b>d</b>	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify) \$		
	----- \$		
	----- \$		
	Add amounts on lines (1) and (2)	<b>d</b>	0
<b>e</b>	Total revenue per line 12, Form 990 (line c plus line d)	<b>e</b>	0

<b>a</b>	Total expenses and losses per audited financial statements	<b>a</b>	
<b>b</b>	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify): \$		
	----- \$		
	----- \$		
	Add amounts on lines (1) through (4)	<b>b</b>	0
<b>c</b>	Line a minus line b	<b>c</b>	0
<b>d</b>	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify): \$		
	----- \$		
	----- \$		
	Add amounts on lines (1) and (2)	<b>d</b>	0
<b>e</b>	Total expenses per line 17, Form 990 (line c plus line d)	<b>e</b>	0

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated, see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Name Dwight Hall Str 378 S Fremont Rd City Coldwater ST MI ZIP 49036	Title President Hr/WK 2	25,000	0	0
Name Daniel Hall Str 310 Dayburg Rd City Coldwater ST MI ZIP 49036	Title VP/Sec/Treas Hr/WK 2	23,000	0	0
Name Rudy W Hall Str 398 Rugged Mounta City Cullowhee ST NC ZIP 28723	Title Director Hr/WK 2	0	0	0
Name C Darwin Hall str 308 Dayburg Rd City Coldwater ST MI ZIP 49036	Title Director Hr/WK 2	0	0	0
Name ----- Str ----- City ----- ST ----- ZIP -----	Title ----- Hr/WK -----			
Name ----- Str ----- City ----- ST ----- ZIP -----	Title ----- Hr/WK -----			
Name ----- Str ----- City ----- ST ----- ZIP -----	Title ----- Hr/WK -----			
Name ----- Str ----- City ----- ST ----- ZIP -----	Title ----- Hr/WK -----			
Name ----- Str ----- City ----- ST ----- ZIP -----	Title ----- Hr/WK -----			

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?  Yes  No  
If "Yes," attach schedule—see page 28 of the instructions.

Part VI Other Information (See page 28 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
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct and indirect political expenditures. See line 81 instructions <input type="checkbox"/> 81a None		
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) <input type="checkbox"/> 82b		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	
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	
c	Dues, assessments, and similar amounts from members <input type="checkbox"/> 85c		
d	Section 162(e) lobbying and political expenditures <input type="checkbox"/> 85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices <input type="checkbox"/> 85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) <input type="checkbox"/> 85f 0		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
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	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 <input type="checkbox"/> 86a		
b	Gross receipts, included on line 12, for public use of club facilities <input type="checkbox"/> 86b		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders <input type="checkbox"/> 87a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) <input type="checkbox"/> 87b		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> _____, section 4912 <input type="checkbox"/> _____; section 4955 <input type="checkbox"/> _____		
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 <input type="checkbox"/> None		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/> None		
90 a	List the states with which a copy of this return is filed <input type="checkbox"/> _____		
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions) <input type="checkbox"/> 90b 18		
91	The books are in care of <input type="checkbox"/> Name Dan Hall Telephone no <input type="checkbox"/> (517) 279-1304 Located at <input type="checkbox"/> Coldwater, MI City _____ ST _____ ZIP + 4 <input type="checkbox"/> 49036		
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 <input type="checkbox"/> 92 N/A		

**Part VII Analysis of Income-Producing Activities** (See page 33 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 Sales of literature					2,009,825
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	304	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		304	2,009,825
105 Total (add line 104, columns (B), (D), and (E))					2,010,129

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)
93A	Dissemination of church literature

**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	%		0	0
	%		0	0
	%		0	0
	%		0	0

**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).

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: *Daniel Hall* Signature of officer | 6-9-05 Date

Daniel Hall, Secretary / Treasurer  
Type or print name and title

Paid Preparer's Use Only: Preparer's signature: *James W Gordon* Date: 5/17/2005 Check if self-employed:  Preparer's SSN or PTIN (See Gen. Inst. W): P00053843

Firm's name (or yours if self-employed), address, and ZIP + 4: James W Gordon, CPA, P.C., 373 Western Ave, Coldwater, MI 49036 EIN: 38-3548727 Phone no: 517-278-6100

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Organization Exempt Under Section 501(c)(3)**

OMB No 1545-0047

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

**2004**

**Supplementary Information—(See separate instructions.)**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

Employer identification number

Remnant Publications, Inc.

38-2810502

**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
Name Str None ----- City ST Zip Country	Title Avg hr/wk			
Name Str ----- City ST Zip Country	Title Avg hr/wk			
Name Str ----- City ST Zip Country	Title Avg hr/wk			
Name Str ----- City ST Zip Country	Title Avg hr/wk			
Name Str ----- City ST Zip Country	Title Avg hr/wk			
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
Name None Check here if a business <input type="checkbox"/> Str ----- City ST ZIP Country		
Name Check here if a business <input type="checkbox"/> Str ----- City ST ZIP Country		
Name Check here if a business <input type="checkbox"/> Str ----- City ST ZIP Country		
Name Check here if a business <input type="checkbox"/> Str ----- City ST ZIP Country		
Name Check here if a business <input type="checkbox"/> Str ----- City ST ZIP Country		
Total number of others receiving over \$50,000 for professional services	0	

<b>Part III Statements About Activities (See page 2 of the instructions.)</b>		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 ▶ \$ _____ 0 (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		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)? . . . See Part V, Form 990	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 ▶ \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Country \_\_\_\_\_
  - 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 )

(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.

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.)	328,388	184,841	111,752	345,875	970,856
16	Membership fees received					0
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	888,844	743,348	570,894	721,476	2,924,562
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	781	382	0	424	1,587
19	Net income from unrelated business activities not included in line 18					0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
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.					0
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					0
23	Total of lines 15 through 22	1,218,013	928,571	682,646	1,067,775	3,897,005
24	Line 23 minus line 17	329,169	185,223	111,752	346,299	972,443
25	Enter 1% of line 23	12,180	9,286	6,826	10,678	
26	Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 0
	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
	c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 0
	d Add: Amounts from column (e) for lines 18 _____ 0 19 _____ 0					26d 0
	22 _____ 0 26b _____ 0					26e 0
	e Public support (line 26c minus line 26d total)					26f 0.00%
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
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 _____ 970,856 16 _____ 0					27c 3,895,418
	17 _____ 2,924,562 20 _____ 0 21 _____ 0					27d 0
	d Add: Line 27a total _____ 0 and line 27b total _____ 0					27e 3,895,418
	e Public support (line 27c total minus line 27d total)					
	f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					27f 3,897,005
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 99.96%
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 0.04%
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.					

**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? . . . . .		
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? . . . . .		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .		
d Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .  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? . . . . .		
b Admissions policies? . . . . .		
c Employment of faculty or administrative staff? . . . . .		
d Scholarships or other financial assistance? . . . . .		
e Educational policies? . . . . .		
f Use of facilities? . . . . .		
g Athletic programs? . . . . .		
h Other extracurricular activities? . . . . .  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? . . . . .		
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.		
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 . . . . .		

**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)

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
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)		
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		
38	Total lobbying expenditures (add lines 36 and 37)	0	0
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39)	0	0
41	Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is—      The lobbying nontaxable amount is— Not over \$500,000      20% of the amount on line 40 Over \$500,000 but not over \$1,000,000      \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000      \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000      \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000      \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	0	0
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	0	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	0	0

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				
	(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 )

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

- 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.)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0

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

**Part VII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 11 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

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

(i) Cash

(ii) Other assets

b Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Yes  No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

# Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury  
Internal Revenue Service

▶ See separate instructions.      ▶ Attach to your tax return.

Attachment  
Sequence No 67

Name(s) shown on return Remnant Publications, Inc.	Business or activity to which this form relates	Identifying number 38-2810502
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**Part I Election To Expense Certain 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	102,000
2 Total cost of section 179 property placed in service (see page 3 of the instructions)	2	0
3 Threshold cost of section 179 property before reduction in limitation	3	410,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see page 3 of the instructions	5	102,000

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7 Listed property. Enter the amount from line 29	7	0
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	0
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	0
10 Carryover of disallowed deduction from line 13 of your 2003 Form 4562.	10	0
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	0
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	0
13 Carryover of disallowed deduction to 2005. Add lines 9 and 10, less line 12	13	0

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	0
15 Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	0
16 Other depreciation (including ACRS) (see page 4 of the instructions)	16	0

**Part III MACRS Depreciation (Do not include listed property.) (See page 5 of the instructions)**

**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2004	17	91,460
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"/>	18	

**Section B - Assets Placed in Service During 2004 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property		3,694	HY	200DB		738
c 7-year property		203,558	HY	200DB		29,088
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			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

**Section C - Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System**

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

**Part IV Summary (see page 8 of the instructions)**

21 Listed property. Enter amount from line 28	21	0
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	121,286
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	0

For Paperwork Reduction Act Notice, see separate instructions.

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 9 of the instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes rows 25-29 for depreciation calculations.

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 with 6 main columns for vehicles (a-f) and sub-columns for personal use (Yes/No). Rows 30-36 cover business/investment miles, commuting miles, and personal use availability.

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 10 of the instructions)

Table with 2 columns: Question (37-41) and Yes/No response columns. Questions relate to written policies and requirements for vehicle use.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44 for amortization calculations.

**Line 65 (990) - Other liabilities**

		Beginning	End
1	.....		
2	.....		
3	Accrued tax liabilities	-176	502
4	.....		
5	.....		
6	.....		
7	.....		
8	.....		
9	.....		
10	.....		
11	Total other liabilities	-176	502

Form 4562 Statement - 990

Remnant Publications, Inc

38-2810502

Item No	Description of Property	Date Placed In Service	Asset Code	Bus Use %	Cost or Other Basis	Sec 179 Deduction	Special Allowance	Recovery Basis	Recovery Period	Method	Conv Code	Prior Accum Deprec 179, Bonus	2004 Deprec	2004 Accum Deprec
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Depreciation Detail

MACRS deductions for prior years (Line 17)

7	Press cutter	1/1/1997	F-10	100.00%	22,500	0	0	22,500	7	200DB	HY	17,277	1,004	18,281
8	Binder	1/3/1997	F-10	100.00%	199,800	0	0	199,800	7	200DB	HY	190,888	8,911	199,799
9	Pallet jack	2/9/1997	F-10	100.00%	410	0	0	410	7	200DB	HY	393	17	410
10	Laminator	3/17/1997	F-10	100.00%	21,450	0	0	21,450	7	200DB	HY	20,492	957	21,449
11	Platemaker	3/20/1997	F-10	100.00%	3,250	0	0	3,250	7	200DB	HY	3,104	145	3,249
13	Light table #1	3/20/1997	F-10	100.00%	200	0	0	200	7	200DB	HY	192	8	200
14	Light table #2	4/18/1997	F-10	100.00%	350	0	0	350	7	200DB	HY	334	16	350
15	Folder	5/13/1997	F-10	100.00%	56,100	0	0	56,100	7	200DB	HY	31,118	2,502	33,620
17	Electrical improvement	6/15/1997	R-4	100.00%	10,365	0	0	10,365	15	150DB	HY	5,163	612	5,775
16	3 knife trimmer	10/1/1997	F-10	100.00%	30,000	0	0	30,000	7	200DB	HY	28,662	1,338	30,000
21	Storage racks	2/26/1998	F-10	100.00%	1,190	0	0	1,190	7	200DB	HY	1,030	106	1,136
18	Ring binder	3/31/1998	F-10	100.00%	3,543	0	0	3,543	7	200DB	HY	3,069	316	3,385
20	Racks	4/1/1998	F-10	100.00%	1,290	0	0	1,290	7	200DB	HY	1,117	115	1,232
23	Racks	4/3/1998	F-10	100.00%	236	0	0	236	7	200DB	HY	204	21	225
19	Shrink wrap conveyor	10/26/1998	F-10	100.00%	3,400	0	0	3,400	7	200DB	HY	2,946	304	3,250
22	Time clock	12/10/1998	F-10	100.00%	762	0	0	762	7	200DB	HY	660	68	728
28	Conference table	1/14/1999	F-10	100.00%	550	0	0	550	7	200DB	HY	428	49	477
30	Conference chairs	1/21/1999	F-10	100.00%	756	0	0	756	7	200DB	HY	587	67	654
31	Conference chairs	1/25/1999	F-10	100.00%	360	0	0	360	7	200DB	HY	279	32	311
25	CD recorder	2/15/1999	F-6	100.00%	427	0	0	427	5	200DB	HY	402	25	427
26	Canon BJC-80 printer	2/15/1999	F-6	100.00%	443	0	0	443	5	200DB	HY	418	25	443
27	Quantex 450 computer	4/12/1999	F-6	100.00%	2,396	0	0	2,396	5	200DB	HY	2,258	138	2,396
32	5 color press	4/14/1999	F-10	100.00%	340,145	0	0	340,145	7	200DB	HY	264,259	30,341	294,600
24	Hanagata shrink wrap	8/30/1999	F-10	100.00%	25,221	0	0	25,221	7	200DB	HY	19,594	2,250	21,844
29	Imagesetter Agfa 9800	11/9/1999	F-6	100.00%	6,800	0	0	6,800	5	200DB	HY	6,648	152	6,800
33	5 color press	1/3/2000	F-10	100.00%	60,000	0	0	60,000	7	200DB	HY	41,256	5,358	46,614
35	Laptop	1/19/2000	F-6	100.00%	2,640	0	0	2,640	5	200DB	HY	2,184	304	2,488
34	saddle stitcher	1/31/2000	F-10	100.00%	125,000	0	0	125,000	7	200DB	HY	85,952	11,163	97,115
37	Densitometer	7/20/2000	F-10	100.00%	250	0	0	250	7	200DB	HY	172	22	194
38	Phones	12/12/2000	F-10	100.00%	556	0	0	556	7	200DB	HY	381	50	431
39	Equipment	6/30/2001	F-6	100.00%	1,569	0	0	1,569	5	200DB	HY	1,117	181	1,298
40	Used plate maker	1/10/2002	F-10	100.00%	800	0	0	800	7	200DB	HY	310	140	450
41	Ink jet addresser & tab	1/24/2002	F-10	100.00%	5,000	0	0	3,500	7	200DB	HY	2,857	612	3,469
42	Dell computer (Dwight)	3/14/2002	F-6	100.00%	1,568	0	0	1,098	5	200DB	HY	1,041	211	1,252
43	7 tower CD duplicator	4/12/2002	F-6	100.00%	1,875	0	0	1,312	5	200DB	HY	1,245	252	1,497
44	Rimage CD thermal pr	4/12/2002	F-6	100.00%	2,800	0	0	1,960	5	200DB	HY	1,859	376	2,235
45	Samsung 950p 19" mc	4/16/2002	F-6	100.00%	225	0	0	157	5	200DB	HY	149	30	179
46	Agfa Select set 7000 ir	5/2/2002	F-10	100.00%	7,500	0	0	5,250	7	200DB	HY	4,286	918	5,204
47	Open rip	6/11/2002	F-10	100.00%	5,250	0	0	3,675	7	200DB	HY	3,000	643	3,643
48	Dell 17 computer	8/8/2002	F-6	100.00%	436	0	0	305	5	200DB	HY	290	59	349
49	28" film processor	8/12/2002	F-10	100.00%	3,700	0	0	2,590	7	200DB	HY	2,114	453	2,567
50	Conon PC425 copy ma	8/19/2002	F-10	100.00%	212	0	0	148	7	200DB	HY	121	26	147
51	Mac computer	10/10/2002	F-6	100.00%	806	0	0	564	5	200DB	HY	535	108	643
52	HP 10PS printer	11/11/2002	F-6	100.00%	899	0	0	629	5	200DB	HY	597	121	718
54	HP 1200 laser printer	12/9/2002	F-6	100.00%	395	0	0	276	5	200DB	HY	262	53	315
57	KDS 17" monitor	2/12/2003	F-6	100.00%	127	0	0	127	5	200DB	MQ1	44	33	77
58	Laptop printer	3/12/2003	F-6	100.00%	275	0	0	275	5	200DB	MQ1	96	72	168
59	8 blk phones	3/12/2003	F-6	100.00%	370	0	0	370	5	200DB	MQ1	130	96	226
61	HP 2500 laser printer	5/23/2003	F-6	100.00%	300	0	0	300	5	200DB	MQ2	75	90	165
62	2 Dell 253 computers	6/9/2003	F-6	100.00%	1,309	0	0	1,309	5	200DB	MQ2	327	393	720



**Form 4562 Statement - 990**

Remnant Publications, Inc

38-2810502

Item No	Description of Property	Date Placed In Service	Asset Code	Bus Use %	Cost or Other Basis	Sec 179 Deduction	Special Allowance	Recovery Basis	Recovery Period	Method	Conv Code	Prior Accum Deprec. 179, Bonus	2004 Deprec	2004 Accum Deprec
69	28" film processor	6/30/2003	F-10	100.00%	719	0	0	719	7	200DB	MQ4	26	198	224
65	MBO 40" folder	11/12/2003	F-10	100.00%	68,832	0	0	68,832	7	200DB	MQ4	2,457	18,963	21,420
64	200 mhz computer	12/2/2003	F-6	100.00%	200	0	0	200	5	200DB	MQ4	10	76	86
67	Office computer	12/12/2003	F-6	100.00%	676	0	0	676	5	200DB	MQ4	34	257	291
66	Penny's laptop	12/15/2003	F-6	100.00%	1,356	0	0	1,356	5	200DB	MQ4	68	515	583
68	Office computer	12/15/2003	F-6	100.00%	443	0	0	443	5	200DB	MQ4	22	168	190
<b>Total MACRS deductions for prior years (Line 17)</b>					<b>1,028,032</b>	<b>0</b>	<b>0</b>	<b>1,018,830</b>				<b>754,539</b>	<b>91,460</b>	<b>845,999</b>
<b>GDS 5-year property (Line 19b)</b>														
71	Dwights 2.8 home corr	2/9/2004	F-5	100.00%	755		0	755	5	200DB	HY		151	151
75	Dan's LCD monitor	5/4/2004	F-5	100.00%	477		0	477	5	200DB	HY		95	95
78	Dell 4100MP projector	6/10/2004	F-5	100.00%	1,799		0	1,799	5	200DB	HY		360	360
79	Microtec i900 flat scan	9/10/2004	F-5	100.00%	557		0	557	5	200DB	HY		111	111
80	Penny's Epson C84	10/6/2004	F-5	100.00%	106		0	106	5	200DB	HY		21	21
<b>Total GDS 5-year property (Line 19b)</b>					<b>3,694</b>	<b>0</b>	<b>0</b>	<b>3,694</b>				<b>0</b>	<b>738</b>	<b>738</b>
<b>GDS 7-year property (Line 19c)</b>														
70	Shinohara 40" press	1/27/2004	F-10	100.00%	141,643		0	141,643	7	200DB	HY		20,241	20,241
73	Glass table & chairs - I	2/25/2004	F-10	100.00%	817		0	817	7	200DB	HY		117	117
74	45" Wohlenburg single	4/4/2004	F-10	100.00%	56,368		0	56,368	7	200DB	HY		8,055	8,055
76	Office chairs	5/12/2004	F-10	100.00%	450		0	450	7	200DB	HY		64	64
77	2 two drawer file cabin	5/17/2004	F-10	100.00%	150		0	150	7	200DB	HY		21	21
72	28" film processor	6/19/2004	F-10	100.00%	642		0	642	7	200DB	HY		92	92
81	Husqvana lawn tractor	12/7/2004	F-10	100.00%	400		0	400	7	200DB	HY		57	57
82	Bavari sofa - Dwight	12/31/2004	F-11	100.00%	1,685		0	1,685	7	200DB	HY		241	241
83	Bavari chair - Dwight	12/31/2004	F-11	100.00%	1,401		0	1,401	7	200DB	HY		200	200
<b>Total GDS 7-year property (Line 19c)</b>					<b>203,556</b>	<b>0</b>	<b>0</b>	<b>203,556</b>				<b>0</b>	<b>29,088</b>	<b>29,088</b>
<b>Subtotal</b>					<b>1,235,282</b>	<b>0</b>	<b>0</b>	<b>1,226,080</b>				<b>754,539</b>	<b>121,286</b>	<b>875,825</b>
<b>Total Amortization (Line 44)</b>														
56	Software	6/30/2001	Z-9	100.00%	190	0	0	190	3	SL	FM	158	26	184
53	HP 10PS software drv	11/11/2002	Z-9	100.00%	695	0	0	695	3	SL	FM	271	232	503
60	Quickbooks Pro	5/13/2003	Z-9	100.00%	541	0	0	541	3	SL	FM	120	180	300
63	Mailing software	7/17/2003	Z-9	100.00%	1,298	0	0	1,298	3	SL	FM	216	433	649
<b>Total Total Amortization (Line 44)</b>					<b>2,724</b>	<b>0</b>	<b>0</b>	<b>2,724</b>				<b>765</b>	<b>871</b>	<b>1,636</b>
					<b>1,238,006</b>	<b>0</b>	<b>0</b>	<b>1,228,804</b>				<b>755,304</b>	<b>122,157</b>	<b>877,461</b>

**Form 4562 Reconciliation**

Annual depreciation and amortization	122,157
Special allowance except listed property (Line 14)	0
Listed property special allowance (Line 25)	0
Section 179 deduction claimed (includes prior year disallowed)	0
Section 179 deduction carried forward to future year	0
Section 179 deduction (Line 12)	0
Less amortization included in total annual depreciation and amortization (Line 44)	871

**Form 4562 Statement - 990**

Remnant Publications, Inc

38-2810502

Item No	Description of Property	Date Placed In Service	Asset Code	Bus Use %	Cost or Other Basis	Sec 179 Deduction	Special Allowance	Recovery Basis	Recovery Period	Method	Conv Code	Prior Accum Deprec. 179, Bonus	2004 Deprec	2004 Accum Deprec
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Form 4562, Line 22

121,286

**Elections Statement (4562)**

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Remnant Publications, Inc  
38-2810502

**Election to Not Claim Special Depreciation Allowance - 3 Yr Property**

Pursuant to IRC section 168(k), the taxpayer elects out of the first-year special depreciation for all 3-year depreciable property placed in service during the current tax year.

**Election to Not Claim Special Depreciation Allowance - 5 Yr Property**

Pursuant to IRC section 168(k), the taxpayer elects out of the first-year special depreciation for all 5-year depreciable property placed in service during the current tax year.

**Election to Not Claim Special Depreciation Allowance - 7 Yr Property**

Pursuant to IRC section 168(k), the taxpayer elects out of the first-year special depreciation for all 7-year depreciable property placed in service during the current tax year.

**Election to Not Claim Special Depreciation Allowance - 10 Yr Property**

Pursuant to IRC section 168(k), the taxpayer elects out of the first-year special depreciation for all 10-year depreciable property placed in service during the current tax year.

**Election to Not Claim Special Depreciation Allowance - 15 Yr Property**

Pursuant to IRC section 168(k), the taxpayer elects out of the first-year special depreciation for all 15-year depreciable property placed in service during the current tax year.

**Election to Not Claim Special Depreciation Allowance - 20 Yr Property**

Pursuant to IRC section 168(k), the taxpayer elects out of the first-year special depreciation for all 20-year depreciable property placed in service during the current tax year.