

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2002

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2002 calendar year, or tax year period beginning _____ and ending _____

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

C Name of organization: **HELP THEM GROW, INC.**
 Formerly known as: **FORMERLY KNOWN AS CHILD RELIEF & YOU, INC**
 Number and street (or P O box if mail is not delivered to street address): **P.O. BOX 372**
 Room/suite: _____
 City or town, state or country, and ZIP + 4: **BERKLEY HEIGHTS, NJ 07922**

D Employer identification number: **22-3122761**

E Telephone number: **(908) 464-9191**

F Accounting method: Cash Accrual
 Other (specify): _____

G Web site: _____

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: **733957.**

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

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

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	368179.		
b	Indirect public support	1b	101835.		
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ 470014. noncash \$ _____)	1d			470014.
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2			
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			
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: Interest Income)	7			10841.
8a	Gross amount from sale of assets other than inventory	(A) Securities	5118.	(B) Other	
b	Less cost or other basis and sales expenses	8a		8b	
c	Gain or (loss) (attach schedule)	8c	5118.		
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) Stmt 1	8d			5118.
9	Special events and activities (attach schedule)				
a	Gross revenue (not including \$ 0. of contributions reported on line 1a)	9a	236790.		
b	Less direct expenses other than fundraising expenses	9b	88856.		
c	Net income or (loss) from special events (subtract line 9b from line 9a) See Statement 2	9c			147934.
10a	Gross sales of inventory, less returns and allowances	10a	11194.		
b	Less cost of goods sold	10b	594.		
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) Stmt 3	10c			10600.
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			644507.
13	Program services (from line 44, column (B))	13			83145.
14	Management and general (from line 44, column (C))	14			238867.
15	Fundraising (from line 44, column (D))	15			1793.
16	Payments to affiliates (attach schedule)	16			289183.
17	Total expenses (add lines 16 and 44, column (A))	17			612988.
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18			31519.
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19			1468124.
20	Other changes in net assets or fund balances (attach explanation) See Statement 5	20			-299407.
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			1200236.

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HELP THEM GROW, INC.

FORMERLY KNOWN AS CHILD RELIEF & YOU, INC

22-3122761

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 \$ 30300 • noncash \$	22 30300.	30300.	Statement 7	
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25 0.	0.	0.	0.
26	Other salaries and wages	26 60083.	25000.	35083.	
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29 6788.	3714.	3074.	
30	Professional fundraising fees	30			
31	Accounting fees	31 6680.		6680.	
32	Legal fees	32 171324.		171324.	
33	Supplies	33 4374.	2187.	2187.	
34	Telephone	34 5583.	2792.	2791.	
35	Postage and shipping	35 1996.	1043.	953.	
36	Occupancy	36 5670.		5670.	
37	Equipment rental and maintenance	37			
38	Printing and publications	38 562.		562.	
39	Travel	39 1703.		1703.	
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42			
43	Other expenses not covered above (itemize)				
a		43a			
b		43b			
c		43c			
d		43d			
e	See Statement 6	43e 28742.	18109.	8840.	1793.
44	Total functional expenses (also lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 323805.	83145.	238867.	1793.

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? ▶	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others.)
a Supporting small medium sized projects in India and United States that work towards child welfare programs that focus on education, training, illiteracy, ill health and oppression of children. (Grants and allocations \$ 83145.)	83145.
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) ▶	83145.

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	131304.	45	545632.	
	46 Savings and temporary cash investments	1088380.	46	582805.	
	47 a Accounts receivable	47a 18517.			
	b Less allowance for doubtful accounts	47b	47c	18517.	
	48 a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b	48c		
	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	30753.	52	30753.	
	53 Prepaid expenses and deferred charges	3144.	53		
	54 Investments - securities Stmt 8	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	111549.	54	64303.
	55 a Investments - land, buildings, and equipment basis	55a			
	b Less accumulated depreciation	55b	55c		
56 Investments - other		56			
57 a Land, buildings, and equipment, basis	57a				
b Less accumulated depreciation	57b	57c			
58 Other assets (describe Security Deposits)		420.	58	420.	
59 Total assets (add lines 45 through 58) (must equal line 74)		1506467.	59	1242430.	
Liabilities	60 Accounts payable and accrued expenses	38343.	60	42194.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities		64a		
	b Mortgages and other notes payable		64b		
	65 Other liabilities (describe)		65		
66 Total liabilities (add lines 60 through 65)		38343.	66	42194.	
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	817324.	67	800069.	
	68 Temporarily restricted	650800.	68	400167.	
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		1468124.	73	1200236.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)		1506467.	74	1242430.

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

a Total revenue, gains, and other support per audited financial statements	a 644507.
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 0.
c Line a minus line b	c 644507.
d 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)	d 0.
e Total revenue per line 12, Form 990 (line c plus line d)	e 644507.

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

a Total expenses and losses per audited financial statements	a 612988.
b Amounts included on line a but not on line 17, Form 990	
(1) Donated services and use of facilities \$	
(2) Prior year adjustments reported on line 20, Form 990 \$	
(3) Losses reported on line 20, Form 990 \$	
(4) Other (specify) \$	
Add amounts on lines (1) through (4)	b 0.
c Line a minus line b	c 612988.
d Amounts included on line 17, Form 990 but not on line a	
(1) Investment expenses not included on line 6b, Form 990 \$	
(2) Other (specify) \$	
Add amounts on lines (1) and (2)	d 0.
e Total expenses per line 17, Form 990 (line c plus line d)	e 612988.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)

(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
Dr. Chaitanya Divgi Sloan-Kettering Cancer Center, 1275 Y New York, NY 10021	President 2 hrs.	0.	0.	0.
Mrs. Seema Chetal 983 Sladky Ave Mountain View, CA 95030	Treasurer 2 hrs.	0.	0.	0.
Mr. Ronald Victor 39 B Reservoir Road Los Gatos, CA 95030	Secretary 2 hrs.	0.	0.	0.
Mr. Sabeer Bhatia 41688 Christy St. Fremont, CA 94538	Trustee 2 hrs.	0.	0.	0.

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? If "Yes," attach schedule Yes No Form 990 (2002)

HELP THEM GROW, INC.
FORMERLY KNOWN AS CHILD RELIEF & YOU, INC

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 81 a 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) 82 b N/A		
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	501(c)(4), (5), or (6) organizations 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 85 c N/A		
d	Section 162(e) lobbying and political expenditures 85 d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85 e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85 f 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	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 86 a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86 b N/A		
87	501(c)(12) organizations Enter a Gross income from members or shareholders 87 a 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) 87 b 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	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 0. , section 4912 0. , section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		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 ALL FIFTY STATES		
b	Number of employees employed in the pay period that includes March 12, 2002 90 b 2		
91	The books are in care of ORGANIZATION Telephone no (908) 464-9191		
Located at SPRINGFIELD AVENUE, BERKELEY HEIGHTS, NJ			
			ZIP + 4 07922
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here 92 N/A and enter the amount of tax-exempt interest received or accrued during the tax year		

HELP THEM GROW, INC.

FORMERLY KNOWN AS CHILD RELIEF & YOU, INC

22-3122761

Page 8

Form 990 (2002)

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

Table with 5 columns: (A) Business Code, (B) Amount, (C) Exclusion Code, (D) Amount, (E) Related or exempt function income. Rows include 93 Program services revenue, 94 Membership dues and assessments, 95 Interest on savings and temporary cash investments, 96 Dividends and interest from securities, 97 Net rental income or (loss) from real estate, 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, 104 Subtotal, 105 Total.

Note: Line 105 plus line 16, Part I, should equal the amount on line 32, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions.)

Table with 2 columns: 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).

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

Table with 5 columns: (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 9941s.

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

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Signature area with fields for Preparer's Signature, Date, Type of Preparer, Name and Title, Preparer's EIN, and EIN. Includes handwritten signature 'R. Venkataraman' and date '8/4/03'.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

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

OMB No 1545-0047

2002

Name of the organization **HELP THEM GROW, INC.**
FORMERLY KNOWN AS CHILD RELIEF & YOU, INC Employer identification number
22 3122761

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	0	

HELP THEM GROW, INC.

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		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?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?		X
<i>Note</i> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)

- The organization is not a private foundation because it is (Please check only ONE applicable box.)
- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
 - 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
 - 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
 - 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)
 - 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____
 - 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A.)
 - 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)

HELP THEM GROW, INC.

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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	2292824.	875193.	710192.	277537.	4155746.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	9027.				9027.
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	41025.	9056.	2341.	1946.	54368.
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.	7897.	19396.	19434.	82319.	129046.
23 Total of lines 15 through 22	2350773.	903645.	731967.	361802.	4348187.
24 Line 23 minus line 17	2341746.	903645.	731967.	361802.	4339160.
25 Enter 1% of line 23	23508.	9036.	7320.	3618.	

26 Organizations described on lines 10 or 11. 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 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum 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. 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.	(2001)	0.	(2000)	0.	(1999)	0.	(1998)	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.	(2001)	0.	(2000)	0.	(1999)	0.	(1998)	0.
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 9027. 20 _____ 21 _____	27c	4164773.						
d Add Line 27a total _____ 0. and line 27b total _____ 0.	27d	0.						
e Public support (line 27c total minus line 27d total)	27e	4164773.						
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e).	27f	4348187.						
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	95.7818%						
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	1.2504%						

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

HELP THEM GROW, INC.

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? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)	32d	

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? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)	33h	

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? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75 50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

HELP THEM GROW, INC.

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		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

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

4-Year Averaging Period Under Section 501(h)

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

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 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

N/A

(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 N/A

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

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)
Sale of Securities	5118.	0.	0.	5118.
To Form 990, Part I, line 8	5118.	0.	0.	5118.

Form 990 Special Events and Activities Statement 2

Description of Event	Gross Receipts	Contribut. Included	Gross Revenue	Direct Expenses	Net Income
VARIOUS EVENTS	236790.		236790.	88856.	147934.
To Fm 990, Part I, line 9	236790.		236790.	88856.	147934.

Form 990

Income and Cost of Goods Sold
Included on Part I, Line 10

Statement 3

Income		
1. Gross receipts	11194	
2. Returns and allowances		
3. Line 1 less line 2		11194
4. Cost of goods sold (line 13)	594	
5. Gross profit (line 3 less line 4)		10600
<hr/>		
Cost of Goods Sold		
6. Inventory at beginning of year		
7. Merchandise purchased		
8. Cost of labor		
9. Materials and supplies		
10. Other costs	594	
11. Add lines 6 through 10		594
12. Inventory at end of year		
13. Cost of goods sold (line 11 less line 12). .		594
<hr/>		

Form 990 Payments to Affiliates Statement 4

Affiliate's Name	Affiliate's Address	Amount
CHILD RELIEF & YOU INDIA	181 A SANE GURUJI MARG MUMBAI 400011	289183.
Total to Form 990, Part I, line 16		289183.

Form 990 Other Changes in Net Assets or Fund Balances Statement 5

Description	Amount
Unrealized Loss on Securities	-47247.
Grants paid to CRY India- 2001	-248306.
Prior Period Adjustment	-3854.
Total to Form 990, Part I, line 20	-299407.

Form 990 Other Expenses Statement 6

Description	(A)	(B)	(C)	(D)
	Total	Program Services	Management and General	Fundraising
Bank Charges	4961.		4961.	
Insurance	15515.	11636.	3879.	
License & Permits	3110.	3110.		
Advertising	1125.	562.		563.
Web Hosting	2460.	1230.		1230.
Miscellaneous Expense	1571.	1571.		
Total to Fm 990, ln 43	28742.	18109.	8840.	1793.

Form 990 Cash Grants and Allocations Statement 7

Classification	Donee's Name	Donee's Address	Donee's Relationship	Amount
	CHILDREN MENTAL ALLIANCE	52 E.72ST. NEW YORK, NY 10021	None	25000.
	BEECH BROOK	3737 LANDER RD. CLEVELAND OH 44124	None	300.
	CABRIUM CONNECTOR	800 N.HURON ST. CHICAGO,IL 60622	None	5000.
Total Included on Form 990, Part II, line 22				30300.

Form 990 Non-Government Securities Statement 8

Security Description	Corporate Stocks	Corporate Bonds	Other Publicly Traded Securities	Other Securities	Total Non-Gov't Securities
MERRILL LYNCH			64303.		64303.
To 990, ln 54 Col B			64303.		64303.

Schedule A Other Income Statement 9

Description	2001 Amount	2000 Amount	1999 Amount	1998 Amount
OTHER INCOME	9027.	19396.	19434.	82319.
LOSS ON SALE OF STOCK	-1130.	0.	0.	0.
Total to Schedule A, line 22	7897.	19396.	19434.	82319.