

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
 (except black lung benefit trust or private foundation)

Department of the Treasury
 Internal Revenue Service

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.
 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 **SEP 01, 2004**, and ending **AUG 31, 2005**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization, number and street, city, town, street, and ZIP code TEXAS JEWELERS ASSOCIATION 8317 CROSS PARK DRIVE STE 150 AUSTIN TX 78754	D Employer identification number 74-6064608
		E Telephone number 512-454-8626	F Group Exemption Number

G Accounting method: Cash Accrual
 Other (specify) ▶

I Website: ▶ TEXASJEWELERS.ORG
H Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

J Organization type (check only one) - 501(c)(6) (Insert no.) 4947(a)(1) or 527

K Check 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 Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **89,238.**

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

		Revenue	
1	Contributions, gifts, grants, and similar amounts received	1	45,093.
2	Program service revenue including government fees and contracts	2	43,610.
3	Membership dues and assessments	3	
4	Investment income	4	523.
5 a	Gross amount from sale of assets other than inventory	5 a	
5 b	Less: cost or other basis and sales expenses	5 b	
5 c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5 c	
6	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		
6 a	Gross revenue (not including \$ of contributions reported on line 1)	6 a	
6 b	Less: direct expenses other than fundraising expenses	6 b	
6 c	Net income or (loss) from special events and activities (line 6a less line 6b)	6 c	
7 a	Gross sales of inventory, less returns and allowances	7 a	
7 b	Less: cost of goods sold	7 b	
7 c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7 c	
8	Other revenue (describe ▶ MISC)	8	12.
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	89,238.
		Expenses	
10	Grants and similar amounts paid (attach schedule)	10	
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	28,278.
14	Occupancy, rent, utilities, and maintenance	14	550.
15	Printing, publications, postage, and shipping	15	17,983.
16	Other expenses (describe ▶ SEE SCHEDULE 1)	16	33,355.
17	Total expenses (add lines 10 through 16)	17	80,166.
		Net Assets	
18	Excess or (deficit) for the year (line 9 less line 17)	18	9,072.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	47,730.
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year (combine lines 18 through 20)	21	56,802.

Part II Balance Sheets - If total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

		(A) Beginning of year		(B) End of year	
22	Cash, savings, and investments	44,401.	22	46,462.	
23	Land and buildings		23		
24	Other assets (describe ▶ PREPAIDS AND RECEIVABLE)	3,929.	24	14,230.	
25	Total assets	48,330.	25	60,692.	
26	Total liabilities (describe ▶ ACCOUNTS PAYABLE)	600.	26	3,889.	
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	47,730.	27	56,803.	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments (See instructions.)		Expenses (Required for 501(c)(3) & (4) organizations and 4947(a)(1) trusts; optional for others.)
What is the organization's primary exempt purpose? EDUCATION AND INFORMATION		
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.		
28	THE ANNUAL CONVENTION UPDATES MEMBERS ON CURRENT TRENDS AND METHODOLOGY IN DESIGN AND FABRICATION TO ADD VALUE TO THE PRODUCT FOR THE CUSTOMER (Grants \$)	28a
29	(Grants \$)	29a
30	(Grants \$)	30a
31	Other program services (attach schedule) (Grants \$)	31a
32	Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See instr.)				
(A) Name and address	(B) Title & average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred comp	(E) Expense account and other allowances
SEE ATTACHED LIST OF OFFICERS AND DIRECTORS ALL SERVE WITHOUT BENEFITS ALLOWANCES OR COMPENSATION		0		
		0		
		0		

Part V Other Information (Note the attachment requirement in General Instruction V.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b	Did the organization file Form 1120-POL for this year?		
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee? If "Yes," attach a statement.		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved. 38b		
39 a	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
b	501(c)(3) and (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 an explanation.		
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, & 4958 ▶		
d	Enter: Amount of tax on line 40c, above, reimbursed by the organization ▶		
41	List the states with which a copy of this return is filed. ▶		
42	The books are in care of ▶ A. S. M. I. Telephone no. ▶ 512-545-8626 Located at ▶ 8317 CROSS PARK DR, STE. 150, AUSTIN TX ZIP + 4 ▶ 78754		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ▶ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____

Type or print name and title _____

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed	Preparer's SSN or PTIN (See Gen. Inst. W)
	Firm's name (or yours if self-employed), address, and ZIP + 4	10/25/2005	<input type="checkbox"/>	EIN ▶ 74-2320099 Phone no ▶ 512-346-9522

R LAWRENCE MECK & CO CPAS
7718 WOOD HOLLOW DR STE G-18
AUSTIN TX 78731-

