

Form **990**

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

# 1998

Department of the Treasury  
Internal Revenue Service

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

This Form is Open  
to Public Inspection

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

A For the 1998 calendar year, OR tax year period beginning 6/1, 1998, and ending 5/31, 1999

- B Check if:
- Change of address
  - Initial return
  - Final return
  - Amended return (required also for state reporting)

Please use IRS label or print or type. See Specific Instructions.

C Name of organization  
**MULTIDISCIPLINARY ASSOCIATION FOR PSYCHEDELIC STUDIES, INC.**

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**C/O P.O. BOX 3319**

City or town, state or country, and ZIP+4  
**SARASOTA, FL 34230**

D Employer identification number  
**59-2751953**

E Telephone number  
**(941) 924-6277**

F Check  if exemption application is pending

G Type of organization  Exempt under 501(c) ( 3 ) (insert number) OR  section 4947(a)(1) nonexempt charitable trust

Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

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

(b) If "Yes," enter the number of affiliates for which this return is filed: 0

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

I If either box in H is checked "Yes," enter four-digit group exemption number (GEN) \_\_\_\_\_

J Accounting method:  Cash  Accrual  Other (specify) \_\_\_\_\_

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 it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

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

SCANNED OCT 15 1999

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	268,046.65		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c			
	d	Total (add lines 1a through 1c) (attach schedule of contributors) (cash \$ <u>208,159.74</u> noncash \$ <u>59,886.91</u> )		STMT 1	1d	268,046.65
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		2	16,502.26
	3	Membership dues and assessments	3		3	
	4	Interest on savings and temporary cash investments	4		4	
	5	Dividends and interest from securities	5		5	21,260.72
	6a	Gross rents	6a			
	6b	Less: rental expenses	6b			
	6c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe _____)	7				
8a	Gross amount from sale of assets other than inventory	(A) Securities	8a	135,644.40		
		(B) Other	8b			
		Less: cost or other basis and sales expenses	8b	133,113.65		
		Gain or (loss) (attach schedule)	8c	2,530.75		
8d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	STMT 2		2,530.75	
9	Special events and activities (attach schedule):	a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a		
		b	Less: direct expenses other than fundraising expenses	9b		
		c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		
10	Gross sales of inventory, less returns and allowances	10a				
		b	Less: cost of goods sold	10b		
		c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
11	Other revenue (from Part VII, line 103)	11				
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			308,340.38	
Expenses	13	Program services (from line 44, column (B))	13		165,590.54	
	14	Management and general (from line 44, column (C))	14		100,549.30	
	15	Fundraising (from line 44, column (D))	15		14,487.23	
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17		280,627.07	
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18			27,713.31	
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		332,114.31	
	20	Other changes in net assets or fund balances (attach explanation)	20		0.00	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			359,827.62

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MULTIDISCIPLINARY ASSOCIATION FOR  
PSYCHEDELIC STUDIES, INC.

Form 990 (1998)

59-2751953

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**Part I 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.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program Services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) .....				
cash \$ _____ noncash \$ _____	22			
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	36,000.00	20,500.00	15,500.00
26 Other salaries and wages .....	26	52,684.65	29,500.00	23,184.65
27 Pension plan contributions .....	27			
28 Other employee benefits .....	28	4,342.11		4,342.11
29 Payroll taxes .....	29	7,107.88		7,107.88
30 Professional fundraising fees .....	30			
31 Accounting fees .....	31	1,562.50		1,562.50
32 Legal fees .....	32			
33 Supplies .....	33	2,075.82		2,075.82
34 Telephone .....	34	10,599.12		10,599.12
35 Postage and shipping .....	35	8,760.57		8,760.57
36 Occupancy .....	36	6,947.14		6,947.14
37 Equipment rental and maintenance .....	37			
38 Printing and publications .....	38	69,405.40	56,457.40	12,948.00
39 Travel .....	39	9,855.02		9,855.02
40 Conferences, conventions, and meetings .....	40	2,756.96		2,756.96
41 Interest .....	41			
42 Depreciation, depletion, etc. (attach schedule) ...	42	3,856.08		3,856.08
43 Other expenses (itemize):				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e SEE STATEMENT 3	43e	64,673.82	59,133.14	4,001.45
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	280,627.07	165,590.54	100,549.30
				14,487.23

Reporting of Joint Costs. - Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation?  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 II Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? <b>MEDICAL RESEARCH AND EDUCATION</b>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a NEWSLETTER: PUBLISHED 12,500 COPIES OF THE MAPS BULLETIN, WHICH HAS BEEN GETTING LONGER AND WIDELY PRAISED (Grants and allocations \$ _____)	23,496.51
b WWW BIBLIOGRAPHY OF RESEARCH PAPERS-FUNDED THE COMPLETION OF AN ON-LINE ELECTRONIC BIBLIOGRAPHY OF ALL THE PAPERS PUBLISHED IN SCIENTIFIC JOURNALS ON LSD AND PSILOCYBIN (Grants and allocations \$ _____)	13,946.35
c JANIGER-LSD FOLLOW-UP: COMPLETED A 45 YR+ FOLLOW UP STUDY TO THE PIONEERING LSD RESEARCH OF DR. OSCAR JANIGER & PUBLISHED A MAJOR PAPER ABOUT THE RESULTS (Grants and allocations \$ _____)	11,276.88
d MANAGEMENT SPENT ON IMPLEMENTING VARIOUS EDUCATIONAL PROGRAM SERVICES. (Grants and allocations \$ _____)	50,000.00
e Other program services (attach schedule) STATEMENT 4 (Grants and allocations \$ _____)	66,870.80
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	165,590.54

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**Part IV Balance Sheets**

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

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing		45	
	46 Savings and temporary cash investments	94,863.26	46	73,106.82
	47 a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	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 (attach schedule)		50	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities (attach schedule) STMT 5	206,549.57	54	255,594.81
	55 a Investments - land, buildings, and equipment: basis	55a 23,000.00		
b Less: accumulated depreciation (attach schedule)	55b	55c	23,000.00	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	57a 16,496.27			
b Less: accumulated depreciation STMT 6	57b 8,370.28	30,701.48	57c	8,125.99
58 Other assets (describe ▶)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	332,114.31	59	359,827.62	
Liabilities	60 Accounts payable and accrued expenses		60	
	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)	0.00	66	0.00	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds	0.00	70	0.00
	71 Paid-in or capital surplus, or land, building, and equipment fund	0.00	71	0.00
	72 Retained earnings, endowment, accumulated income, or other funds	332,114.31	72	359,827.62
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	332,114.31	73	359,827.62	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	332,114.31	74	359,827.62	

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.



MULTIDISCIPLINARY ASSOCIATION FOR  
PSYCHEDELIC STUDIES, INC.

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**Part VI Other Information**

Yes No

76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	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? N/A	78b		
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 the amount of political expenditures, direct or indirect, as described in the instructions for line 81	81a	0.00	
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 for reporting in Part III)	82b	N/A	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a		
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		
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	85c	N/A	
d	Section 162(e) lobbying and political expenditures	85d	N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g		
h	If section 6033(e)(1)(A) dues notice were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) organizations. - Enter:			
a	Initiation fees and capital contributions included on line 12	86a	N/A	
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A	
87	501(c)(12) organizations. - Enter: a Gross income from members or shareholders	87a	N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations. - Enter: Amount of tax imposed during the year under: section 4911 <u>0.00</u> ; section 4912 <u>0.00</u> ; section 4955 <u>0.00</u>			
b	501(c)(3) and 501(c)(4) organizations. - Did the organization engage in any section 4958 excess benefit transaction during the 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			0.00
d	Enter: Amount of tax in 89c, above, reimbursed by the organization			0.00
90 a	List the states with which a copy of this return is filed		N/A	
b	Number of employees employed in the pay period that includes March 12, 1998	90b		3
91	The books are in care of <u>RICHARD DOBLIN</u> Telephone no. <u>617/484-9509</u>			
	Located at <u>3 FRANCIS STREET, BELMONT, MA.</u> ZIP +4 <u>02478</u>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041. - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92		N/A

**Part VII Analysis of Income-Producing Activities**

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) Exclu- sion code	(D) Amount	
93 Program service revenue:					
(a) BOOKS & TAPES SALES					16,502.26
(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		21,260.72			
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					2,530.75
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))		21,260.72		0.00	19,033.01
105 TOTAL (add line 104, columns (B), (D), and (E))					40,293.73

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**

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).

SALE OF EDUCATIONAL MATERIALS TO MEMBERS

**Part IX Information Regarding Taxable Subsidiaries (Complete this Part if the "Yes" box on 88 is checked.)**

Name, address, and employer identification number of corporation or partnership	Percentage of ownership interest	Nature of business activities	Total income	End-of-year assets
N/A	%			
	%			
	%			
	%			

I am preparing this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, and I am not aware of any information of which preparer has any knowledge.

9/30/99 Richard Doshin President  
Type or print name and title

**SCHEDULE A  
(Form 990)**

**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

**1998**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **MULTIDISCIPLINARY ASSOCIATION FOR  
PSYCHEDELIC STUDIES, INC.** Employer identification number  
**59 2751953**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See 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 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	

LHA For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990) 1998

**Part III Statement About Activities**

	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. ► \$ ..... Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2. During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its 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:		
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)? <u>SEE PART V, FORM 990</u> .....	2d	X
e Transfer of any part of its income or assets? ..... If the answer to any question is "Yes," attach a detailed statement explaining the transactions.	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? .....	3	X
4 a Do you have a section 403(b) annuity plan for your employees? .....	4a	X
b 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. (See instructions.)		
		<b>SEE STATEMENT 7</b>

**Part IV Reason for Non-Private Foundation Status** (See 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, page 4.)
- 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 instructions on page 4.)

(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 instructions on page 4.)

MULTIDISCIPLINARY ASSOCIATION FOR  
PSYCHEDELIC STUDIES, INC.

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12 above.) 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) 1997	(b) 1996	(c) 1995	(d) 1994	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) .....	206,754.19	540,100.62	197,842.30	105,277.17	1,049,974.28
16 Membership fees received .....					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose .....			2,400.00		2,400.00
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 .....	19,226.48				19,226.48
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 .....					
23 Total of lines 15 through 22 .....	225,980.67	540,100.62	200,242.30	105,277.17	1,071,600.76
24 Line 23 minus line 17 .....	225,980.67	540,100.62	197,842.30	105,277.17	1,069,200.76
25 Enter 1% of line 23 .....	2,259.81	5,401.01	2,002.42	1,052.77	
26 Organizations described in lines 10 or 11: a Enter 2% of amount in column (e), line 24 .....					26a N/A
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1994 through 1997 exceeded the amount shown in line 26a. 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 _____					26d N/A
22 _____ 26b _____					
e Public support (line 26c minus line 26d total) .....					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) .....					26f N/A %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year. (1997) 0.00 (1996) 0.00 (1995) 0.00 (1994) 0.00					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list 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.) 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: (1997) 0.00 (1996) 0.00 (1995) 0.00 (1994) 0.00					
c Add: Amounts from column (e) for lines: 15 1,049,974.28 16 _____					27c 1,052,374.28
17 2,400.00 20 _____ 21 _____					
d Add: Line 27a total 0.00 and line 27b total 0.00 .....					27d 0.00
e Public support (line 27c, total minus line 27d total) .....					27e 1,052,374.28
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) .....					27f 1,071,600.76
g Public support percentage (line 27e (numerator) divided by line 27f, (denominator)) .....					27g 98.2058%
h Investment income percentage (line 18 column (e) (numerator) divided by line 27f (denominator)) .....					27h 1.7942%

28 Unusual Grants: For an organization described in line 10, 11, or 12, that received any unusual grants during 1994 through 1997, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See instructions.)

NONE

**Part V Private School Questionnaire**

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

N/A

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

N/A

Check here  a  If the organization belongs to an affiliated group.  
Check here  b  If you checked "a" above 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 .....
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.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
45	Lobbying nontaxable amount .....				0.00
46	Lobbying ceiling amount (150% of line 45(e)) .....				0.00
47	Total lobbying expenditures .....				0.00
48	Grassroots nontaxable amount .....				0.00
49	Grassroots ceiling amount (150% of line 48(e)) .....				0.00
50	Grassroots lobbying expenditures .....				0.00

**Part VI-B Lobbying Activity by Nonelecting Public Charities**  
(For reporting only by organizations that did not complete Part VI-A)

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) .....			0.00

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



FORM 990

CASH CONTRIBUTIONS OF \$5000 OR MORE  
INCLUDED ON PART I, LINE 1D

STATEMENT 1

\*\*\* NOT OPEN TO PUBLIC INSPECTION \*\*\*

CONTRIBUTOR'S NAMECONTRIBUTOR'S ADDRESSAMOUNT

18,500.00

9,511.05

10,351.11

10,000.00

5,000.00

39,371.77

10,000.00

5,000.00

12,000.00

21,500.00

6,500.00

5,000.00



FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 2

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
SUN MICROSYSTEMS-212 SHS	10,351.11	10,560.25	0.00	<209.14>
PORT-MCMORAN-305 SHS	4,553.17	5,013.44	0.00	<460.27>
ZIONS BANCORP-50 SHS	2,577.79	2,603.12	0.00	<25.33>
ZIONS BANCORP-193 SHS	8,371.38	7,406.37	0.00	965.01
FREEPORT-MCMORAN-375 SHS	4,951.58	4,921.87	0.00	29.71
NATIONSBANK-400 SHS	33,446.07	30,200.00	0.00	3,246.07
ENTERGY 8.75%	50,993.30	51,126.00	0.00	<132.70>
LA COUNTY 9.2% BOND	20,400.00	21,282.60	0.00	<882.60>
TO FORM 990, PART I, LINE 8	135,644.40	133,113.65	0.00	2,530.75

FORM 990 OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
BOOKS AND TAPES FOR ORDER	1,539.23			1,539.23
NON-ACCOUNTING PROFESSIONAL SRVCS	2,150.00		2,150.00	
BANK FEES	591.45		591.45	
RESEARCH PROJECTS	43,818.34	43,818.34		
EDUCATIONAL PROJECTS	15,314.80	15,314.80		
MISCELLANEOUS/ADMIN. XPENSES	1,260.00		1,260.00	
TOTAL TO FM 990; LN 43	64,673.82	59,133.14	4,001.45	1,539.23

FORM 990

OTHER PROGRAM SERVICES

STATEMENT 4

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
- FUNDED THE COMPLETION OF DR KRUPITSKY'S 3 YR STUDY OF THE USE OF KETAMINE-ASSISTED PSYCHOTHERAPY OF HEROINE ADDICTION, ST.PETERSBURG REGIONAL CTR FOR ALCOHOLISM & DRUG ADDICTION		8,857.19
- SUPPORTED THE EFFORTS OF DR KOTLER, BEN-GURION U OF NEGEV, TO DESIGN & OBTAIN APPROVAL FOR A PILOT STUDY INTO THE USE OF MDMA IN THE TREATMENT OF PATIENTS WITH PTS DISORDER		6,726.14
- FUNDED DR VOLLENWEIDER'S STUDY IN USING PET TECHNOLOGY TO MEASURE THE NEUROTOXIC EFFECTS OF A SINGLE DOSE OF MDMA, U OF ZURICH.		6,000.00
- SUPPORTED THE ON-GOING EFFORTS OF DR GROB, HARBOR-UCLA MEDICAL CTR, TO OBTAIN FDA PERMISSION FOR A STUDY OF THE USE OF MDMA IN TREATING ANXIETY & DEPRESSION IN TERMINAL CANCER PATIENTS		4,460.16
- FUNDED A FOLLOW-UP STUDY BY NICOLE MAALSTE & HANS OSSEBAARD, UTRECHT UNIVERSITY, INTO DR. JAN BASTIANS' USE OF LSD-ASSISTED PSYCHOTHERAPY IN THE TREATMENT OF CONCENTRATION CAMP SURVIVORS		2,500.00
- FUNDED A STUDY BY IAN SOUTER INTO THE USE OF PLANT SALVIA DIVINORUM IN AIDING MEDITATION		1,500.00
- FUNDED EFFORTS BY ROGER MARSDEN TO STUDY THE RELIGIOUS USE OF AYAHUASCA IN S.AMERICA		1,500.00
- FUNDED EFFORTS BY ADELE GETTY TO STUDY DRUG USE PATTERNS OF CHILDREN WHOSE PARENTS USED PSYCHEDELICS.		540.75
- FUNDED A STUDY ANALYZING THE POTENCY OF MEDICAL MARIJUANA USED BY PATIENTS AT BUYER'S CLUBS AROUND THE U.S.		400.00
- PURCHASED RESOURCE MATERIAL TO AID DR.YENSEN DESIGN A PROTOCOL TO EXAMINE THE USE OF LSD-ASSISTED PSYCHOTHERAPY IN THE TREATMENT OF CANCER PATIENTS		57.22
- SUPPORTED THE EFFORTS OF DR.STRASSMAN TO WRITE A BOOK REVIEWING HIS EXPERIENCE CONDUCTED FDA-APPROVED RESEARCH WITH DMT		6,000.00
- FUNDED AN INT'L CONF ON THE CLINICAL USE OF MDMA, TO TAKE PLACE IN ISRAEL 8/31-9/1/99 BRINGING TOGETHER SCIENTISTS FROM 7 COUNTRIES		5,348.80
- COMPLETED PAYING FOR EXPENSES INVOLVED IN PUBLISHING & MKTING MAPS' 1ST BOOK, THE SECRET CHEF		4,194.99

- DISTRIBUTED NUMEROUS COPIES OF PAPERS, ARTICLES TO MEMBERS, MEDIA & RESEARCHERS - SUPPORTED THE EFFORTS OF CHRIS CONRAD & MIKKI NORRIS TO COMPLETE THEIR BOOK, SHATTERED LIVES - FUNDED AN ON-LINE ELECTRONIC DISCUSSION GRP, THE MAPS FORUM, W/ 200 PARTICIPANTS - PURCHASED BASIC INFORMATION MATERIALS & MADE THEIR CONTENTS AVAILABLE TO MEMBERS, MEDIA & RESEARCHERS - WORKED WITH THE INSTITUTE OF NOETIC SCIENCES TO ORGANIZE A CONFERENCE OF PSYCHEDELIC ELDERS TO REVIEW THEIR LIFE'S WORK	2,858.28  2,500.00 1,900.00 1,561.27  9,966.00
TOTAL TO FORM 990, PART III, LINE E	66,870.80

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 5

DESCRIPTION	VALUE METHOD	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
SECURITIES	COST			255,594.81		255,594.81
TO FM 990, LN 54 COL B						
				255,594.81		255,594.81

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 6

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
MACHINERY & OTHER EQUIPMENT	16,496.27	8,370.28	8,125.99
TOTAL TO FORM 990, PART IV, LN 57	16,496.27	8,370.28	8,125.99

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS PART III, LINE 4 STATEMENT 7

RESEARCHERS ARE CHOSEN WHO: 1) HOLD SOME FORM OF DEGREE OR CERTIFICATION, 2) HOLD EXCELLENT PROFESSIONAL REPUTATIONS, AND 3) ARE AFFILIATED WITH ACADEMIC INSTITUTIONS.  
 RESEARCHERS RECEIVE PAYMENTS FOR COMPILING DATA & STATISTICAL SUMMARIES.

**Depreciation and Amortization**  
(Including Information on Listed Property) 990

▶ See separate instructions. ▶ Attach this form to your return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

MULTIDISCIPLINARY ASSOCIATION FOR  
PSYCHEDELIC STUDIES, INC.

FORM 990 PAGE 2

59-2751953

**Part I Election To Expense Certain Tangible Property (Section 179)** (Note: If you have any "listed property," complete Part V before you complete Part I.)

1	Maximum dollar limitation. If an enterprise zone business, see instructions	1	18,500.00
2	Total cost of section 179 property placed in service	2	
3	Threshold cost of section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter amount from line 27	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from 1997	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 1999. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.

**Part II MACRS Depreciation For Assets Placed in Service ONLY During Your 1998 Tax Year (Do Not Include Listed Property.)**

**Section A - General Asset Account Election**

14 If you are making the election under section 168(l)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See instructions

**Section B - General Depreciation System (GDS) (See instructions.)**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
15 a 3-year property						
b 5-year property		4,683.76	5 YRS.	HY	200DB	936.76
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		27.5 yrs.	MM	S/L	
	/		39 yrs.	MM	S/L	
	/			MM	S/L	

**Section C - Alternative Depreciation System (ADS) (See instructions.)**

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

**Part III Other Depreciation (Do Not Include Listed Property.) (See instructions.)**

17	GDS and ADS deductions for assets placed in service in tax years beginning before 1998	17	2,919.32
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	

**Part IV Summary (See instructions.)**

20	Listed property. Enter amount from line 26	20	
21	Total. Add deductions on line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	21	3,856.08
22	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	22	

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 4562 (1998)

**Part V** Listed Property - 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 23a, 23b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See instructions for limits for passenger automobiles.)**

23a Do you have evidence to support the business/investment use claimed?  Yes  No 23b If "Yes," is the evidence written?  Yes  No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------	---	----------------------------	--	------------------------	--------------------------	-------------------------------	---------------------------------

24 Property used more than 50% in a qualified business use:

	:	:	%					
	:	:	%					
	:	:	%					

25 Property used 50% or less in a qualified business use:

	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		

26 Add amounts in column (h). Enter the total here and on line 20, page 1 26

27 Add amounts in column (i). Enter the total here and on line 7, page 1 27

**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.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
28 Total business/investment miles driven during the year (DO NOT include commuting miles) .....												
29 Total commuting miles driven during the year .....												
30 Total other personal (noncommuting) miles driven .....												
31 Total miles driven during the year. Add lines 28 through 30 .....												
32 Was the vehicle available for personal use during off-duty hours? .....												
33 Was the vehicle used primarily by a more than 5% owner or related person? .....												
34 Is another vehicle available for personal use? .....												

**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.

	Yes	No
35 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....		
36 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
37 Do you treat all use of vehicles by employees as personal use? .....		
38 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
39 Do you meet the requirements concerning qualified automobile demonstration use? .....		

Note: If your answer to 35, 36, 37, 38, or 39 is "Yes," you need not complete Section B for the covered vehicles.

**Part VI** Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
40 Amortization of costs that begins during your 1998 tax year:					
41 Amortization of costs that began before 1998 .....					41
42 Total. Enter here and on "Other Deductions" or "Other Expenses" line of your return .....					42