- 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 bequnning $07 / 01,2002$, and ending 12/31/2002


Part 1 Revenue, Expenses, and Changes In Net Assets or Fund Balances (See page 17 of the instructions)
1 Contributions, gifts, grants, and similar amounts recerved STMT 1
a Direct public support
b Indirect public support
c Government contributions (grants)
d Total (add thes la trough ic) (cash s 375,287. noncash $s$
2 Program service revenue including government fees and contracts (from Part VII, line 93).
3 Membership dues and assessments
4 Interest on savings and temporary cash investments . STMT 2
5 Dividends and interest from secunties
6 a Gross rents
b Less rental expenses
c Net rental income or (loss) (subtract line 6 b from line 6a)
7 Other investment income (describe $>$
STMT 3 • • •
8 a Gross amount from sales of assets other than inventory.
b Less cost or other basis and sales expenses
c Gain or (loss) (attach schedule)

| (A) Secunties |  | (B) Other |
| ---: | ---: | :---: |
| 49,257 | 8 a |  |
| 48,934 | 8 b |  |
| 323 | 8 c |  |

d Net gain or (loss) (combine line 8 c , oolumns ( A ) and ( $B$ )).
323
9 Special events and activities (attach schedule)
a Gross revenue (not including $\$$ $\qquad$ of
contributions reported on line 1a).
STM
b Less direct expenses other than fundraising expenses
c Net income or (loss) from special events (subtract line $9 b$ from line 9a)
10 a Gross sales of inventory, less returns and allowances
b Less cost of goods sold $\qquad$ . . . $\qquad$
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)
11 Other revenue (from Part VII, Ine 103)

- 100

375,287

| $1 d$ |
| :---: |
| 2 | $\qquad$

$\qquad$
-

Part II Statement of
Functional All organizations must complete column (A) Columns (B), (C) and (D) are required for section 501(c)(3) and (4) organizatons Functional Expenses and section $4947(a)(1)$ nonexempt chantable trusts but optional tor others (See page 21 of the instructions)


Joint Costs Check $\rightarrow$ If you are following SOP 98-2
Are any foint costs from a combined educational campaign and fundraising solictation reported in (B) Program sernces? . . . $\square$ Yes x No If "Yes," enter (1) the aggregate amount of these joint costs $\$$ , (il) the amount allocated to Program services \$
(iil) the amount allocated to Management and general $\$$, and (iv) the amount allocated to Fundrasing $\$$

## Part III Statement of Program Service Accomplishments (See page 24 of the instructions)

What is the organization's pnmary exempt purpose? - STMT 6
All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947 (a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

| Progran Service |
| :---: |
| Expenses |
| (Required for $501(c)(3)$ and <br> (4) orgs and 4947(a)(1) <br> (rusts but optional for <br> othera) |

a SEE _ATTACHED_SCHEDULE_OF_RROGRAM_ACCOMPLISHMENTS

Grants and allocations \$
b

d
(Grants and allocatoons \$
e Other program services (attach schedule)
(Grants and allocations \$

## Part IV Balance Sheets (See page 24 of the instructions)



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 descnbes, in Part III, the organization's programs and accomplishments


Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions)
a Total revenue, gains, and other support per audited financial statements
b Amounts included on line a but not on line 12, Form 990
(1) Net unrealized gans NOT APPLICABLE on investments
(2) Donated services and use of facilities
(3) Recovenes of prior year grants
(4) Other (specify)
$\qquad$
Add amounts on lines
(1) through (4)
c Line a minus line $b$
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)
$\qquad$
Add amounts on lines (1) and (2)
e Total revenue per line 12, Form 990 (line c plus line d)

```E
```

$\$$

$$
\mathbf{s}
$$



Reconciliation of Expenses_per Audited Financial Statements with Expenses per Return NOT APPLICABLE
on line 17, Form 990
(1) Donated services and use of facilties s
(2) Proor year adjustments reported on line 20,
Form $990 \quad \mathbf{s}$
(3) Losses reported on line 20, Form 990

$$
5
$$

(4) Other (specity)
$\qquad$
Add amounts on lines (1) through (4)
c Line a minus line $b$
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)

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 26 of the instructions)


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 provded by the related organizations? $\square$ Yes No If "Yes," attach schedule - see page 26 of the instructions

75 Did the organization engage in any activity not previously reported to the IRS? If 'Yes, ' attach a detailed description of each activity
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
78 a Did the organization have unrelated business gross income of $\$ 1,000$ or more dunng the year covered by this return? b if Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year If Yes, attach a statement
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?
b if "Yes," enter the name of the organization
$\qquad$ and check whether it is $\square$ exempt or $\square$ nonexempt
81 a Enter direct or indirect political expenditures See line 81 instructions
$b$ Did the organization file Form $\mathbf{1 1 2 0 - P O L}$ for this year?
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than farr rental value?
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 il (See instructions in Part III)
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
b Did the organization comply with the disclosure requirements relating to quid pro quo contnbutions?
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
b if Yes, ' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?
b Did the organization make only in-house lobbying expenditures of $\$ 2,000$ or less?
If "Yes" was answered to ether 85 a or 85 b, do not complete 85 c through 85 h below unless the organization received a waiver for proxy tax owed for the pnor year
c Dues, assessments, and simniar amounts from members
d Section 162 (e) lobbying and political expenditures
e Aggregate nondeductible amount of section $6033(e)(1)(A)$ dues notices
f Taxable amount of lobbying and political expenditures (line 85 d less 85 e ).
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
$h$ If section $6033(e)(1)(A)$ dues notices were sent, does the organization agree to add the amount on line $85 f$ to its reasonable estimate of dues allocable to nondeductuble lobbying and political expenditures for the followng tax year?
$86 \quad 501(c)(7)$ orgs Enter a Initiation fees and capital contributions included on line 12
b Gross recelpts, included on line 12, for public use of club facilities.
87 501(c)(12) args Enter a Gross income from members or shareholders
b Gross income from other sources (Do not net amounts due or pald to other sources against amounts due or received from them )
B8 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 7701-37 If "Yes," complete Part IX
89 a $501(\mathrm{c})(3)$ organizations. Enter Amount of tax imposed on the organization dunng the year under section $4911-$ N/A $\qquad$ , section 4912 ___N/A , section 4955 -
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction dunng the year or did it become aware of an excess benefit transaction from a pnor year? if "Yes," attach a statement explaining each transaction

| 85 c | $\mathrm{N} / \mathrm{A}$ |
| :---: | :---: |
| 85 d | $\mathrm{~N} / \mathrm{A}$ |
| 85 e | $\mathrm{N} / \mathrm{A}$ |
| 85 f | $\mathrm{N} / \mathrm{A}$ |


| $B 6 \mathrm{a}$ | $\mathrm{N} / \mathrm{A}$ |
| :---: | :---: |
| 86 b | $\mathrm{~N} / \mathrm{A}$ |
| 87 a | $\mathrm{N} / \mathrm{A}$ |
| $B 7 \mathrm{~b}$ |  |

c Enter Amount of tax imposed on the organization managers or disqualified persons duning the year under sections 4912, 4955, and 4958 . . . . . . . . . . . . . . . . . . . . . . . .
d Enter Amount of tax on line 89c, above, reimbursed by the organization N/A
90 a List the states with which a copy of this return is filed
b Number of employees employed in the pay period that includes March 12, 2002 (See instructions) . . . . . . . . . . . . . . 90b 8
91 The books are in care of ORGANIZATION Telephone no $\quad$ 602-462-5000 Located at ORGANIZATION'S ADDRESS ZIP $+4>85004$
92 Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041 . Check here and enter the amount of tax-exempt interest received or accrued during the tax year

## Part VII Analysis of Income-Prod Note Enter gross amounts uniess otherwise indicated indicated



104 Subtotal (add columns (B), (D), and (E))

| Unrelated business income |  | Exciuded by section 512, 513, or 514 |  |
| :---: | :---: | :---: | :---: |
| (A) <br> Bustress coce | (B) <br> Amount | $\begin{aligned} & \text { (C) } \\ & \text { Exclusion } \\ & \text { code } \end{aligned}$ | (D) <br> Amount |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  | 14 | 10.625 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  | 14 | 2,161 |
|  |  | 18 | 323 |
|  |  | 01 | $-36,298$ |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  | $-23,189$ |

105 Total (add line 104 columns (B), (D), and (E))
$-23,189$
Note Line 105 plus line 1d Partl, should equal the amount on Inne 12 Part I


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 premuums on a personal benefit contract?
Under penalties of perjury I declare that I have examined th
and beluef it is true, correct, and complete Declaration of P
Preparers
signature

JSA

SCHEDULE A
(Form 990 or $990-E Z$ )
Department of the Treasury Internal Revenue Sernce.

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 $990-E Z$
GOLDWATER INSTITUTE FOR PUBLIC POLICY RESEARCH

Employer identification number
日6-0597661
Part 1 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 ")


## Part II

Compensatıon 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 ")


For Paperwork Reductlon Act Notice, see the Instructions for Form 990 and Form $990-E Z$
Schedute A (Form 990 or 990-EZ) 2002 JSA
2E1210 1000

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

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 $>\$$ $\qquad$ (Must equal amounts on line 38. Part VI-A, or line I or 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 V-B AND attach a statement giving a detailed description of the lobbying activities
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 familes, 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 detalled statement explaining the transactions)
a Sale, exchange, or leasing of property?
b Lending of money or other extension of credit?
c Furnishing of goods, services, or facilities?
d Payment of compensation (or payment or reımbursement of expenses if more than $\$ 1,000$ )?
e Transfer of any part of its income or assets?

3 Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below ).
4 Do you have a section 403(b) annuity plan for your employees?
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants
or loans from it in furtherance of ts chartable programs "qualify" to recerve payments

## Partiv 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 $170(\mathrm{~b})(1)(\mathrm{A})(1)$
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 lical government or govemmental unit Section 170(b)(1)(A)(v)
9 A medical research cirganization operated in conjunction with a hospital Section $170(b)(1)(A)$ (III) Enter the hospital's name, city,
$10 \square$ An organization operated for the beneft of a college or university owned or operated by a governmental unit Section $170(b)(1)(A)(w)$ (Also complete the Support Schedule in Part IV-A )
11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A ) A community trust Section $170(\mathrm{~b})(1)(\mathrm{A})(\mathrm{Vi)}$ (Also complete the Support Schedule in Part IV-A )
An organization that normally receives (1) more than $331 / 3 \%$ of its support from contributions, membership fees, and gross receipts from activitics related to its charitable, etc , functions - subject to certan exceptions, and (2) no more than $\mathbf{3 3} \mathbf{1 / 3 \%}$ 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 ) 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

|  |  |
| :--- | :--- |
|  |  |

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

| Cale | endar year (or fiscal year beginning in) | (a) 2001 | (b) 2000 | (c) 1999 | (d) 1998 | (e) Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Gifts, grants, and contributions recelved (Do not include unusual grants See line 28) | 566,192 | 1,243,069 | 1,325,816 | 1,409,263 | 4,544,340 |
|  | Membership fees received |  |  |  |  |  |
|  | 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, furpose |  |  |  |  |  |
|  | Gross income from intere't, dividends, amounts received from payments on secunties 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 | 17,925 | 8,381 | 362,389 | 21,074 | 409,769 |
|  | Net income from unrelated business activities not included in line 18 . |  |  |  |  |  |
|  | Tax revenues levied for the organizations benefit and etther paid to it or expended on its behalf $\qquad$ . . |  |  |  |  |  |
|  | The value of services or facilties 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 |  |  |  |  |  |
|  | Other income Attach a schedule Do not include gain or (loss) from sale of captal assets |  |  |  |  |  |
|  | Total of lines 15 through 22 | 584, 117 | 1,251, 450 | 1,688,205 | 1,430,337 | 4,954,109 |
| $\underline{24}$ | Line 23 minus line 17. | 584,117 | 1,251, 450. | 1,688,205 | 1,430,337 | 4,954,109 |
| 25 | Enter 1\% of line 23 | 5,841 | 12,515. | 16,882 | 14,303 |  |
| 26 Organizations described on lizes 10 or 11 |  | 2\% of amount | column (e), line 24 |  | 26a | 99,082. |
| Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicl, 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 total of all these excess amounts |  |  |  |  |  | 1,694,680. |
| c Total support for section 509(a)(1) test Enter line 24, column (e) <br> d Add Amounts from column (e) for lines $18 \ldots 409,769$ |  |  |  |  | - 26 c | 4,954,109 |
|  |  |  | $1,694,$ | $30$ | 26d | 2,104,449 |
| e Public support (line 26 c minus line 26d total)i Public support percentage (line 26 e (numerator) divice |  | by line 26c (d | minator) $\quad$. . . . . . |  | - 26 e | 2,849,660 |
|  |  | ( Public support percentage (line 26e (numerator) divided by line 26c (denominator) |  |  | 575211 \% |

27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year
(2001)
(2000)
(1999)
..- NOT APPL ICABLE
(1998)
b For any amount tncluded in line 17 that was received from each persor, (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 fine 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
(200t)
(2000)
(1999)
(1998)
c Add Amounts from column (e) for lines
$\qquad$ 15 $\qquad$ 16 20 $\qquad$
Add Line 27a total and line 27b total
e Public support (line 27c total minus line 27d total)
Total support for section 509(a)(2) test Enter amount from line 23, column (e)
$g$ Pubifc support percentage (line $27 e$ (numerator) divided by line 271 (denominator)) -
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))
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

2E12211000

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 dunng 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)
$\qquad$
$\qquad$
$\qquad$
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 nondiscnminatory basis?
c Copies of all catalogues, brochures, announcements, and other written communications to the public deaing 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 facilites?
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)
$\qquad$
$\qquad$
$\qquad$
34a Does the organization receive any financial ald 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 etther 34a or b, please explain using an attached statement

35 Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

Schedule A (Form 990 or 990-EZ) 2002


## 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)

|  | Lobbyıng Expenditures During 4-Year Averaging Perıod |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Calendar year (or fiscal year beginning $\ln$ ) | $\begin{gathered} \text { (a) } \\ 2002 \end{gathered}$ | $\begin{gathered} \text { (b) } \\ 2001 \\ \hline \end{gathered}$ | $\begin{gathered} \text { (c) } \\ 2000 \end{gathered}$ | $\begin{gathered} \text { (d) } \\ 1999 \end{gathered}$ | (e) <br> Total |
| Lobbying nontaxable 45 amount . . . . . . |  |  |  |  |  |
| Lobbying ceiling amount <br> 46 ( $150 \%$ of line $45(e)\rangle$.. | : |  | , |  |  |
| 47 Total lobbyng expenditures |  |  |  |  |  |
| Grassroots nontaxable <br> 48 amount . . . . . |  |  |  |  |  |
| Grassroots celiling amount <br> 49 (150\% of line 48(e)) $\qquad$ | ' |  |  |  |  |
| Grassroots lobbying <br> 50. expenditures |  |  |  |  |  |

Part Vl-B Lobbying Activity by Nonelecting Public Charities $\quad$ NOT APPLICABLE
(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions) Ouring the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of
a Volunteers.
b Paid staff or management (Include compensation in expenses reported on lines $\mathbf{c}$ through $\mathbf{h}$ )
c Media advertisements.
d Malings to members, legislators, or the public
e Publications, or published or broadcast statements
f Grants to other organizations for lobbyng 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
1 Total lobbying expenditures (Add lines $c$ through $h$ )

| Yes | No | Amount |
| :---: | :---: | :---: |
|  | X |  |
|  | X |  |
|  | X |  |
|  | X |  |
|  | x |  |
|  | X |  |
|  | X |  |
|  | x |  |
|  |  |  |

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

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 organizatoons?
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) Reımbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solictations
c Sharing of facilities, equiprnent, maling lists, other assets, or paid employees

|  | Yes | No |
| :---: | :---: | :---: |
| $51 a(i)$ |  | $X$ |
| $a(i l)$ |  | $X$ |
| $b(i)$ |  |  |
| $b(i)$ |  | $X$ |
| $b(i l i)$ |  | $X$ |
| $b(i v)$ |  | $X$ |
| $b(i)$ |  | $X$ |
| $b(v i)$ |  | $X$ |
| $c$ |  | $X$ |

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 recerved less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services receved

| (a) Line no | (b) <br> Amount involved | (c) <br> Name of noncharitable exempt organization | (d) <br> Description of transfere uansactions, and shanigg arrangements |
| :---: | :---: | :---: | :---: |
| N/A |  |  |  |
|  |  |  |  |
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|  |  | - ${ }^{\text {_ }}$ |  |

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 ?
b If "Yes," complete the following schedule

| (a) <br> Name of organızation | (b) <br> Type of organization | (c) <br> Description of relationship |
| :---: | :---: | :---: |
| N/A |  |  |
|  |  |  |
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FORM 990，PART I－INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS


DESCRIPTION
AMOUNT
－－－ー－－－－－－－

SAVINGS AND TEMPORARY CASH INVESTMENTS $10,625$.

TOTAL

10，625．

FORM 990，PART I－OTHER INVESTMENT INCOME


## DESCRIPTION

AMOUNT
－－ー－ー－ー－ー－
－－ー－ー－

| PORTFOLIO INCOME FROM INVESTMENT IN PARTNERSHIP | $2,161$. |
| :--- | ---: |
| TOTAL | $2,161$. |
|  | $==========$ |




FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE


THE GOLDWATER INSTITUTE WAS ESTABLISHED IN 1988 AS AN INDEPENDENT,NONPARTISAN RESEARCH AND EDUCATIONAL ORGANIZATION DEDICATED TO THE STUDY OF PUBLIC POLICY. THROUGH ITS RESEARCH PAPERS, EDITORIALS, AND POLICY BRIEFINGS, THE INSTITUTE PROMOTES PUBLIC POLICY FOUNDED UPON THE PRINCIPLES OF LIMITED GOVERNMENT, ECONOMIC FREEDOM, AND INDIVIDUAL RESPONSIBILITY.
-FORM 990, PART IV - PREPAID EXPENSES AND DEFERRED CHARGES


ENDING
DESCRIPTION

PREPAID INSURANCE

TOTALS

```
FORM 990, PART IV - INVESTMENTS - OTHER
```



| DESCRIPTION |  | ENDING |
| :---: | :---: | :---: |
|  |  | BOOK VALUE |
| MARKETABLE SECURITIES |  | NONE |
| INTEREST IN PARTNERSHIP |  | 143,762. |
|  | TOTALS | 143,762. |

## FORM 990，PART IV－MORTGAGES AND OTHER NOTES PAYABLE <br> 

LENDER．NORTHERN TRUST－LOC
PURPOSE OF LOAN：LINE OF CREDIT


TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE

152，872．
＝＝＝＝＝＝＝＝＝＝＝＝＝

122，872．
＝ニニニ＝ニ＝＝＝＝＝＝＝＝
FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES
 CONTRIBUTIONS
TO EMPLOYEE
BENEFIT PLANS
-----------
2,404

$$
1,500
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148,262



## Part 1 Short-Term Capital Gans and Losses - Assets Held One Year or Less



Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

" $28 \%$ rate gain or loss includes all "collectibles gains and losses" (as defined on page 31 of the instructions) and up to $50 \%$ of the eligible gain on qualified small business stock (see page 30 of the instructons)

| Summary of Parts I and II |  |  |  |  | (1) Beneficianes' (see page 32) | (2) Estate's or trust's | (3) Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 14 | Net short-term gain or (loss) (from line 5 above) |  |  | 14 |  |  | 323 |
| 15 | Net long-term gain or (loss) |  |  |  |  |  |  |
| a | Total for year (from line 13 above) |  |  | 15a |  |  |  |
| b | 28\% rate gain or (loss) (from line 12 above). |  |  | 15b |  |  |  |
| c | Qualified 5 - year gan |  |  | 15c |  |  |  |
| $d$ | Unrecaptured section 1250 gain (see line 17 of the worksheet on page 33) |  |  | 15d |  |  |  |
| 16 | Total net galn or (loss) Combine lines 14 and 15a |  | - | 16 |  |  | 323 |

Note If line 16, column (3), is a net gam, enter the gain on Form 1041 line 4 If lines 15a and 16, column (2), are net gans, go to Part V, and do not complete Part IV If hne 16, column (3), is a net loss complete Part IV and the Capital Loss Carryover Worksheet, as necessary
For Paperwork Reduction Act Notice, see the Instructions for Form 1041.
Schedule D (Form 1041) 2002
JSA
2F1210 2000
HQHOJQ EOO2 05/13/2003 13:59:31 V02-5 GO-0390

## Part IV Capital Loss Limitation

17 Enter here and enter as a (loss) on Form 1041, line 4, the smaller of
a The loss on line 16, column (3) or
b $\$ 3,000$
.
If the loss on line 16, column (3), is more than $\$ 3,000$, or if Form 1041, page 1, line 22, is a loss complete the Capital Loss
Caryover Worksheet on page 34 of the instructions to determine your capital loss carryover
Part V Tax Computation Using Maxımum Capital Gains Rates (Complete this part only if both lines 15a and 16 in column (2) are gains, and Form 1041, line 22 is more than zero )
Note If ine 15b column (2) or line 15d column (2) is more than zero complete the worksheet on page 35 of the instructions to figure the amount to enter on lines 20 and 38 below and skip all other hnes below Otherwise go to line 18

18 Enter taxable income from Form 1041, line 22
19 Enter the smaller of line 15 a or 16 in column (2)
20 If the estate or trust is filing Form 4952, enter the amount from line $4 e$, otherwise, enter -0 -
21 Subtract line 20 from line 19 If zero or less, enter -0-
22 Subtract line 21 from line 18 If zero or less, enter -0-

| 19 |  | 18 |  |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
| 20 |  |  |  |
| $-0-$ | 21 |  |  |
| $0-$ | 22 |  |  |

23 Figure the tax on the amount on line 22 Use the 2002 Tax Rate Schedule on page 21 of the instructions
24 Enter the smaller of the amount on line 18 or $\$ 1,850$

If line 24 is greater than line 22, go to line $\mathbf{2 5}$ Otherwise, skip lines $\mathbf{2 5}$ through 31 and go to llne 32

25 Enter the amount from line 22 . . . . .
26 Subtract line 25 from line 24 If zero or less, enter -0 - and go to line 32
27 Enter the estate's or trust's allocable portion of qualified 5 -year gain, if any, from line 15 c , column (2)
28 Enter the smaller of line 26 or line 27
29 Multiply ine 28 by $8 \%$ ( 08 ).
30 Subtract line 28 from line 26
31 Multiply line 30 by $10 \%$ ( 10 )
If the amounts on lines 21 and 26 are the same, skip Ines 32 through $\mathbf{3 5}$ and go to line $\mathbf{3 6}$
32 Enter the smaller of line 18 or line 21
33 Enter the amount, if any, from line 26.
34 Subtract line 33 from line 32
35 Multiply line 34 by 20\% (20)
36 Add lines 23, 29, 31, and 35
37 Figure the tax on the amount on line 18 Use the 2002 Tax Rate Schedule on page 21 of the instructions
38 Tax on all taxable Income (including capital gains) Enter the smaller of line 36 or line 37 here and on line 1a of Schedule G, Form 1041


Schedule D (Form 1041) 2002
GOLDWATER INSTITUTE
Schedule D Detall of Short－ter
Schedule D Detail of Short－term Capıtal Gains and Losses

| Description | Date Acquired | Date Sold | Gross Sales Price | Cost or Other Basis | Short－term Gain／Loss |
| :---: | :---: | :---: | :---: | :---: | :---: |
| CAPITAL GAINS（LOSSES）EROM SECURITIES |  |  |  |  |  |
|  |  |  |  |  | － |
| 950 SHS WELLS FARGO | 08／21／2002 | 08／23／2002 | 49，257． | 48,934 | 323 |
| TOTAL CAPITAL GAINS（LOSSES）FROM SECURITI | ES |  | 49，257． | 48，934 | 323 |
| （1）EAL |  |  | 49，257． | 48，934 | 323 |
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|  |  |  |  |  |  |
| Totals |  |  | 49,257 | 48，934 | 323 |

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and other allowances
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| :--- |
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| $\vdots$ |


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GOLDWATER INSTITUTE FOR PULIC POLICY
FORM 990. PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES

Director
Execulive Committee member

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\footnotetext{
FORM 990, PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES (B)ritle and average $\quad \begin{aligned} & \text { (B)ritle and average } \\ & \text { hours per week } \\ & \text { devoted to position }\end{aligned}$
Secretary
Director
Executive Committee member
$\quad 2$


Execulive Committee member



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FORM 990, PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES

Director
Director
Director
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Director
Director



GOLDWATER INSTITUTE FOR PULIC POLICY
FORM 990. PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES





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GOLDWATER INSTITUTE FOR PULIC POLICY
FORM 990, PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES (B)Title and average
hours per week
devoted to position
0
0
0 0
$\circ$
0
0 Director
Director
Director
Director
Director
Director
Director
Director
Director
(A)Name and address
(A)Name and address
Michael Geddes

Geddes and Cor
2930 E Camelback Road
Sulte 110
Phoenix, AZ
Phocnix, AZ 85016
Donald Golduater
4536 West Siesta Way
Laveen, AZ 85339
Michael Green
Fennemore Craig PC
3003 N Ceniral
Sutte 2600
Phoenıx, AZ 85012
Greg Hancock
Hancoch Communites LLC
1414 W Broadway, Ste 200 1414 W Broadway, Ste 200
Tempe, AZ 85282

Robert Hannay
4616E Whise Drive
Paradise Valley, AZ 85253
Sydney Hay
2927 N Second Street
Phoenıx, AZ 85012
James Herler
APCO Worldwide
224 W San Juan
Phoenix, AZ 85013
C A Howlelt
America West Arrlines
4000 E Sky Harbor Blvd
Phoenix, AZ 85034.3802
Leonard Huck
PO Box 71

[^0]
GOLDWATER INSTITUTE FOR PULIC POLICY
FORM 990, PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES
(B )Title and average
hours per week
devoted to position


[^1]| (C) Compensation | EIN 86-0597661 |  |
| :---: | :---: | :---: |
|  | (D) Contributions to employeo benefit plans \& deferred compensation | (E Expense account and other allowances |
| None | None | None |
| None | None | None |
| None | None | None |
| None | None | None |
| None | None | None |
| None | None | None |
| None | None | None |
| None | None | None |

GOLDWATER INSTITUTE FOR PULIC POLICY
FORM 990, PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES

## (B)Title and average hours per week devoted to position

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[^2]| GOLDWATER INSTITUTE FOR PULIC POLICY |  |  |
| :--- | :--- | :--- | :--- |
| FORM 990, PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES |  |  |

EIN 86-0597661


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GOLDWATER INSTITUTE FOR PULIC POLICY
FORM 990, PART V - LIST OF OFFICERS DIRECTORS, AND TRUSTEES (B)Title and average
hours per week devoted to position 0

0


Goldwater Institute Accomplishments Report
July 1, 2002— December 31, 2002

## STUDIES

- "Arizona's Antr-Tobacco Crusade Smoke Free or Free to Smoke?," Robert A Levy, Arizona Issue Analysıs \#176, October 8, 2002
- "Corporate Tax Reform How to Woo Business Without Spending a Dime," Stephen Shivinski, Arizona Issue Analysis \#175, September 16, 2002
- "Eminent Domain Abuse in Arizona The Giowing Threat to Private Property," Jordan R Rose, Arizona Issue Analysis \#174, August 16, 2002
- "The Arizona Scholarship Tax Credit A Model for Federal Reform," Dan Lips, Arizona Issue Analysis \#173, August 1, 2002


## EVENTS

- "Investıng in Children of Arızona Scholarshıp Fund Kıck-Off," December 12, 2002
- "Larry Elder," Goldwater Speaker Series, December 4, 2002
- "Final Four Gubernatorial Candıdate Forum - Phoenux," October 30, 2002
- "Final Four Gubernatorial Candidate Forum - Tucson," October 24, 2002
- "Sunset Sorree at Talıesın," October 19, 2002
- "An Afternoon with P J O'Rourke," Goldwater Speaker Series, September 5, 2002
- "Gubernatorial Candıdate Forum," August 20, 2002
- "Eminent Doman Abuse in Arizona," Goldwater Institute Study Release, August 16, 2002
Land
Building
Construction Costs
Construction Costs
Architectual Design
Architectual Design
Legal Costs
Site/Planning


| Equipment |  |  |  |
| :--- | ---: | ---: | :--- |
| Ofice Equpment | 1999 | 48,274 | SL' |
| Office Equipment | 2000 | 2,059 | SL |
| Goldwater Room | 1999 | 6,338 | SL |
| Computer Equipment | 1996 | 19,661 | SL |
| Computer Equipment | 1997 | 6,638 | SL |
| Computer Equipment | 1998 | 6,915 | SL |
| Computer Equipment | 1999 | 52,328 | SL |
| Computer Equipment | 2000 | 5,037 | SL |
| Computer Equipment | 2001 | 45,529 | SL |
| Computer Equipment | 2002 | 3,410 | SL |
| Prnter | 1999 | 400 | SL |
| Telephone System | 1996 | 1,570 | SL |
| Telephone System | 1997 | 739 | SL |
| Tetephone System | 1998 | 1,243 | SL |
| Telephone System | 1999 | 19,141 | SL |
| Telephone System | 2002 | 1,223 | SL |
| Securty System | 1999 | 1,660 | SL |


| 5 |  | 9,655 | 9,655 | 9,655 | 48275 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 5 |  |  | 412 | 412 | 206 |
| 5 |  | 1,268 | 1,268 | 1,268 | 634 |
| 5 | 3,618 | 3,932 | 3,932 | 0 | 0 |
| 5 | 1,328 | 1.328 | 1,328 | 1,328 | 0 |
| 5 |  | 1,383 | 1,383 | 1,383 | 6915 |
| 5 |  | 10.466 | 10.466 | 10,466 | 5233 |
| 5 | 40w |  | 564 | 1,007 | 5035 |
| 5 | M2 |  |  | 3,613 | 18065 |
| 5 |  |  |  |  |  |
| 5 |  | 80 | 80 | 80 | 40 |
| 5 | 314 | 314 | 314 | 0 | 0 |
| 5 | 148 | 148 | 148 | 148 | 0 |
| 5 | 249 | 249 | 249 | 249 | 1245 |
| 5 |  | 3,828 | 3,828 | 3,828 | 1914 |
| 5 |  |  |  |  |  |
| 5 |  | 332 | 332 | 332 | 166 |

Deprceciation Schedule
July 1, 2002 through December 31, 2002



[^0]:    Phoenix, AZ 85001

[^1]:    (A )Name and address
    

    Kevin Kinsall
    Phelps Dodge C
    Phelps Dodge Corporation
    2600 N Central Avenue
    Phoenix, AZ 85004
    Anne Kleındienst Fennemore Craig

    23 E San Miguel Ave
    Phoenix, AZ 85012
    

    Jon Kyd
    2200 E Camelback Rd, Ste 120 Phoenix, AZ 85016 James Lincicorire

    Motorola
    5850 N Echo Canyon Ln Phoenix, AZ 85018-1286

    Dodie Londen
    33 Biltmore Estates
    Phoenix, AZ 85016
    Jack Londen
    Londen Insurance Group
    4343 E Camelback Rd, 4th FI
    Phoenix, AZ 85018
    Eddie Lynch
    Westcor
    11411 N Tatum Blvd
    Phoenix AZ 85028
    John Mangum
    Law Offices of John K Mangum, PC
    340 E Palm Lane Ste 100
    Phoenix, AZ 85004-4529

[^2]:    (A)Name and address

    $$
    \begin{aligned}
    & \text { Robert Mathews } \\
    & \text { Bank One }
    \end{aligned}
    $$

    Robert Mathews

    PO Box 71
    AZI-1001
    Phoentx, AZ 85001
    Jerry Moyes
    Swifl Transportation
    Phoemx, AZ 85038-9243
    Todd Nelson
    Apollo Group
    4615 East Elwoo
    Bill O'Brien
    W H O Brien Co
    3104 E Camelback
    3104 E Camelback Rd Ste 520 Phoenix, AZ 85016-4502

    3158 E Rose Lane
    John Philips
    Bank of America
    201 E Washington Street
    Phoenix, AZ 85004
    Manlyn Quayle
    JD Ford
    c/o Laura Minler
    2425 E Camelback Rd, Ste 1080
    Phoemix, AZ 85016
    David E Reese ramily Foundation
    7350 E Evans Rd, Ste B103
    Scottsdale, AZ 85260

