

Return of Organization Exempt from Income Tax

2002

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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 beginning, 2002, and ending

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: ATLAS ECONOMIC RESEARCH FOUNDATION. D Employer Identification Number: 94-2763845. E Telephone number: (703) 934-6969. F Accounting method: Accrual.

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

G Web site:

J Organization type (check only one): 501(c) 3 (insert no.)

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: 2,222,952.

H and I are not applicable to section 527 organizations. H (a) Is this a group return for affiliates? No. H (b) If 'Yes,' enter number of affiliates. H (c) Are all affiliates included? No. H (d) Is this a separate return filed by an organization covered by a group ruling? No. I Enter 4-digit GEN. M Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

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

Table with columns for Revenue, Expenses, and Net Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less: rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less: cost or other basis and sales expenses; 8c Gain or (loss) (attach schedule); 8d Net gain or (loss); 9 Special events and activities; 9a Gross revenue (not including \$ of contributions reported on line 1a); 9b Less: direct expenses other than fundraising expenses; 9c Net income or (loss) from special events; 10a Gross sales of inventory, less returns and allowances; 10b Less: cost of goods sold; 10c Gross profit or (loss) from sales of inventory; 11 Other revenue (from Part VII, line 103); 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

| 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 (att sch) (cash \$ 1,234,464. non-cash \$) | 1,234,464. | 1,234,464. | | |
| 23 Specific assistance to individuals (att sch) | | | | |
| 24 Benefits paid to or for members (att sch) | | | | |
| 25 Compensation of officers, directors, etc | 222,916. | 139,270. | 25,778. | 57,868. |
| 26 Other salaries and wages | 277,455. | 146,113. | 121,292. | 10,050. |
| 27 Pension plan contributions | | | | |
| 28 Other employee benefits | 53,500. | 30,495. | 15,515. | 7,490. |
| 29 Payroll taxes | 37,162. | 21,182. | 10,777. | 5,203. |
| 30 Professional fundraising fees | | | | |
| 31 Accounting fees | | | | |
| 32 Legal fees | | | | |
| 33 Supplies | 14,873. | 14,777. | 83. | 13. |
| 34 Telephone | 19,891. | 18,847. | 1,044. | 0. |
| 35 Postage and shipping | 31,152. | 25,547. | 1,470. | 4,135. |
| 36 Occupancy | 105,312. | 101,312. | 4,000. | 0. |
| 37 Equipment rental and maintenance | | | | |
| 38 Printing and publications | 28,600. | 27,271. | 385. | 944. |
| 39 Travel | | | | |
| 40 Conferences, conventions, and meetings | 193,509. | 181,002. | 797. | 11,710. |
| 41 Interest | | | | |
| 42 Depreciation, depletion, etc (attach schedule) | 14,613. | 14,613. | 0. | 0. |
| 43 Other expenses not covered above (itemize): | | | | |
| a INSURANCE | 6,044. | 0. | 6,044. | 0. |
| b PROFESSIONAL FEES | 24,630. | 3,351. | 21,279. | 0. |
| c DUES & SUBSCRIPTIONS | 29,607. | 28,914. | 379. | 314. |
| d TAXES, LICENSES, PERMITS | 2,197. | 1,158. | 40. | 999. |
| e See Other Expenses Stmt | 102,951. | 102,486. | 430. | 35. |
| 44 Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15 | 2,398,876. | 2,090,802. | 209,313. | 98,761. |

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to program services \$ _____; (iii) the amount allocated to management and general \$ _____; and (iv) the amount allocated to fundraising \$ _____.

Part III Statement of Program Service Accomplishments

| What is the organization's primary exempt purpose? <u>EDUCATIONAL</u> 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) & (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others.) | Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.) |
|--|--|
| a GRANTS AND AWARDS - MANY INSTITUTES RECEIVED AWARDS AND GRANTS TO HELP DEVELOP WORLDWIDE INDEPENDENT RESEARCH INSTITUTES SPECIALIZING IN ANALYSIS OF CURRENT PUBLIC POLICY ISSUES. (Grants and allocations \$ 1,234,464.) | 2,005,035. |
| b WORKSHOPS - THESE WORKSHOPS FOCUSED ON PUBLIC POLICY ISSUES AFFECTING BIOTECHNOLOGY, INTERNATIONAL ENVIRONMENTALISM, NICHE MARKETING, FUNDRAISING AND INSTITUTE DEVELOPMENTS. (Grants and allocations \$ 0.) | 57,546. |
| c ADVISORY SERVICES - ATLAS ASSISTED PUBLIC POLICY RESEARCH INSTITUTES INTERNATIONALLY TO DEVELOP PROJECTS AND SOLVE MANAGEMENT PROBLEMS. (Grants and allocations \$ 0.) | 28,221. |
| d _____ (Grants and allocations \$) | |
| e Other program services (Grants and allocations \$) | |
| f Total of Program Service Expenses (should equal line 44, column (B), program services) | 2,090,802. |

Part IV Balance Sheets (See Instructions)

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 | -7,228. | 45 | 16,305. | |
| | 46 Savings and temporary cash investments | 1,682,837. | 46 | 1,647,964. | |
| | 47a Accounts receivable | 4,200. | | | |
| | b Less: allowance for doubtful accounts | | 47b | | |
| | | | 6,889. | 47c | 4,200. |
| | 48a Pledges receivable | 131,000. | | | |
| | b Less: allowance for doubtful accounts | | 48b | | |
| | | | 382,548. | 48c | 131,000. |
| | 49 Grants receivable | | | 49 | |
| | 50 Receivables from officers, directors, trustees, and key employees (attach schedule) | | | 50 | |
| | 51a Other notes & loans receivable (attach sch) | | | 51a | |
| | b Less: allowance for doubtful accounts | | | 51b | |
| | | | | 51c | |
| | 52 Inventories for sale or use | | | 52 | |
| | 53 Prepaid expenses and deferred charges | 3,443. | 53 | | 3,950. |
| | 54 Investments – securities (attach schedule) .L-54 Stmt <input type="checkbox"/> Cost <input type="checkbox"/> FMV | 283,305. | 54 | | 358,813. |
| | 55a Investments – land, buildings, & equipment: basis | | | 55a | |
| | b Less: accumulated depreciation (attach schedule) | | | 55b | |
| | | | | 55c | |
| 56 Investments – other (attach schedule) | | | 56 | | |
| 57a Land, buildings, and equipment: basis | 153,106. | | | | |
| b Less: accumulated depreciation (attach schedule) | | | 57b | | |
| | | 24,026. | 57c | 30,453. | |
| 58 Other assets (describe ► DEPOSITS) | 7,704. | 58 | | 7,759. | |
| 59 Total assets (add lines 45 through 58) (must equal line 74) | 2,383,524. | 59 | | 2,200,444. | |
| LIABILITIES | 60 Accounts payable and accrued expenses | 30,617. | 60 | 88,985. | |
| | 61 Grants payable | | 61 | | |
| | 62 Deferred revenue | | 62 | | |
| | 63 Loans from officers, directors, trustees, and key employees (attach schedule) | | 63 | | |
| | 64a Tax-exempt bond liabilities (attach schedule) | | 64a | | |
| | b Mortgages and other notes payable (attach schedule) | | 64b | | |
| | 65 Other liabilities (describe ► SECURITY DEPOSITS) | | 65 | | 100. |
| 66 Total liabilities (add lines 60 through 65) | 30,617. | 66 | | 89,085. | |
| NET ASSETS OR FUND BALANCES | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74. | | | | |
| | 67 Unrestricted | 1,167,296. | 67 | 1,633,438. | |
| | 68 Temporarily restricted | 1,185,611. | 68 | 477,921. | |
| | 69 Permanently restricted | | 69 | | |
| | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74. | | | | |
| | 70 Capital stock, trust principal, or current funds | | 70 | | |
| | 71 Paid-in or capital surplus, or land, building, and equipment fund | | 71 | | |
| | 72 Retained earnings, endowment, accumulated income, or other funds | | 72 | | |
| 73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) | 2,352,907. | 73 | | 2,111,359. | |
| 74 Total liabilities and net assets/fund balances (add lines 66 and 73) | 2,383,524. | 74 | | 2,200,444. | |

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.

BAA

Part IV Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

Part V Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

| | | | |
|-----|--|---|------------|
| a | Total revenue, gains, and other support per audited financial statements | a | 2,150,445. |
| b | Amounts included on line a but not on line 12, Form 990: | | |
| (1) | Net unrealized gains on investments | | |
| (2) | Donated services and use of facilities | | |
| (3) | Recoveries of prior year grants | | |
| (4) | Other (specify): | | |
| | Add amounts on lines (1) through (4) | b | |
| c | Line a minus line b | c | 2,150,445. |
| d | Amounts included on line 12, Form 990 but not on line a: | | |
| (1) | Investment expenses not included on line 6b, Form 990 | | |
| (2) | Other (specify): | | |
| | Add amounts on lines (1) and (2) | d | |
| e | Total revenue per line 12, Form 990 (line c plus line d) | e | 2,150,445. |

| | | | |
|-----|--|---|------------|
| a | Total expenses and losses per audited financial statements | a | 2,398,876. |
| b | Amounts included on line a but not on line 17, Form 990: | | |
| (1) | Donated services and use of facilities | | |
| (2) | Prior year adjustments reported on line 20, Form 990 | | |
| (3) | Losses reported on line 20, Form 990 | | |
| (4) | Other (specify): | | |
| | Add amounts on lines (1) through (4) | b | |
| c | Line a minus line b | c | 2,398,876. |
| d | Amounts included on line 17, Form 990 but not on line a: | | |
| (1) | Investment expenses not included on line 6b, Form 990 | | |
| (2) | Other (specify): | | |
| | Add amounts on lines (1) and (2) | d | |
| e | Total expenses per line 17, Form 990 (line c plus line d) | e | 2,398,876. |

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

| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (if not paid, enter -0-) | (D) Contributions to employee benefit plans and deferred compensation | (E) Expense account and other allowances |
|--|--|---|---|--|
| ALEJANDRO CHAFUEN FAIRFAX, VA | PRESIDENT, CEO 40 | 101,708. | 0. | 0. |
| BRADLEY LIPS FAIRFAX, VA | VP, COO 40 | 70,146. | 0. | 0. |
| JOHN BLUNDELL LONDON, ENGLAND | DIRECTOR 5 | 0. | 0. | 0. |
| TIMOTHY BROWNE HEALDSBURG, CA | DIRECTOR 4 | 0. | 0. | 0. |
| ALEJANDRO GARZA LAGUERA SAN PEDRO, MEXICO | DIRECTOR 2 | 0. | 0. | 0. |
| See List of Officers, Etc. Statement | | 51,062. | 0. | 0. |

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

Part VII Other Information (See instructions.)

| | | Yes | No |
|------------|--|-------------|----|
| 76 | Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity | | X |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes. | | X |
| 78a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | | X |
| 78b | 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 | | X |
| 80a | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization? | | X |
| 81 | If 'Yes,' enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt. | | |
| 81a | Enter direct or indirect political expenditures. See line 81 instructions | 81 a | 0. |
| 81b | Did the organization file Form 1120-POL for this year? | | X |
| 82a | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? | | X |
| 82b | If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) | 82 b | |
| 83a | Did the organization comply with the public inspection requirements for returns and exemption applications? | X | |
| 83b | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | X | |
| 84a | Did the organization solicit any contributions or gifts that were not tax deductible? | | X |
| 84b | 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? | 85 a | |
| 85b | 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. | 85 b | |
| 85c | Dues, assessments, and similar amounts from members | 85 c | |
| 85d | Section 162(e) lobbying and political expenditures | 85 d | |
| 85e | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices | 85 e | |
| 85f | Taxable amount of lobbying and political expenditures (line 85d less 85e) | 85 f | |
| 85g | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? | 85 g | |
| 85h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? | 85 h | |
| 86 | 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 | 86 a | |
| 86b | Gross receipts, included on line 12, for public use of club facilities | 86 b | |
| 87 | 501(c)(12) organizations. Enter: a Gross income from members or shareholders | 87 a | |
| 87b | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) | 87 b | |
| 88 | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX | 88 | X |
| 89a | 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0 | | |
| 89b | 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction | 89 b | X |
| 89c | Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 | | 0. |
| 89d | Enter: Amount of tax on line 89c, above, reimbursed by the organization | | |
| 90a | List the states with which a copy of this return is filed ▶ NONE | | |
| 90b | Number of employees employed in the pay period that includes March 12, 2002 (See instructions.) | 90 b | 11 |
| 91 | The books are in care of ▶ ALEX CHAFUEN Telephone number ▶ (703) 934-6969 Located at ▶ 4084 UNIVERSITY DRIVE, SUITE 103, FAIRFAX VA ZIP + 4 ▶ 22030-6812 | | |
| 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 | | |

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

Note: Enter gross amounts unless otherwise indicated.

| | Unrelated business income | | Excluded by section 512, 513, or 514 | | (E) Related or exempt function income |
|--|---------------------------|---------------|--------------------------------------|---------------|---|
| | (A) Business code | (B) Amount | (C) Exclusion code | (D) Amount | |
| 93 Program service revenue: | | | | | |
| a CONFERENCE FEES | | | | | 19,289. |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| f Medicare/Medicaid payments | | | | | |
| g Fees & contracts from government agencies | | | | | |
| 94 Membership dues and assessments | | | | | |
| 95 Interest on savings & temporary cash invmnts | | | 14 | 16,832. | |
| 96 Dividends & interest from securities | | | | | |
| 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 pers prop | | | | | |
| 99 Other investment income | | | | | |
| 100 Gain or (loss) from sales of assets other than inventory | | | | | |
| 101 Net income or (loss) from special events | | | | | |
| 102 Gross profit or (loss) from sales of inventory | | | | | |
| 103 Other revenue: a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 104 Subtotal (add columns (B), (D), and (E)) | | | | 16,832. | 19,289. |
| 105 Total (add line 104, columns (B), (D), and (E)) | | | | | 36,121. |

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

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

| Line No. | Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). |
|----------|---|
| 93a | FEES FROM PARTICIPANTS AND SPONSORS AT WORKSHOPS AND OTHER PROGRAMS FURTHER OUR EXEMPT PURPOSE. |

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.)

N/A

| (A) Name, address, and EIN of corporation, partnership, or disregarded entity | (B) Percentage of ownership interest | (C) Nature of activities | (D) Total income | (E) End-of-year assets |
|--|---|-----------------------------|---------------------|---------------------------|
| | % | | | |
| | % | | | |
| | % | | | |
| | % | | | |

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions.)

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

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).

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

Please Sign Here

Signature of officer: _____ Date: _____

Type or print name and title: _____

Paid Preparer's Use Only

Preparer's signature: Richard L. Hendershot, CPA Date: 4/11/03 Check if self-employed: Preparer's SSN or PTIN (see General instruction W): POD117363

Firm's name (or yours if self-employed) address, and ZIP + 4: RICHARD L. HENDERSHOT, CPA, PC
7525 PRESIDENTIAL LANE
MANASSAS VA 20109-2629 EIN: 54-1807239 Phone no.: (703) 361-1592

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under
Section 501(c)(3)

OMB No. 1545-0047

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

2002

Department of the Treasury
Internal Revenue Service

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

| | |
|---|---|
| Name of the organization ATLAS ECONOMIC RESEARCH FOUNDATION | Employer identification number 94-2763845 |
|---|---|

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 and deferred compensation | (e) Expense account and other allowances |
|---|--|------------------|---|--|
| NONE | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| Total number of other employees paid over \$50,000 ▶ | None | | | |

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 |
|---|---------------------|------------------|
| LEONARD LIGGIO | | |
| 10338 HAMPSHIRE GREEN AVE; FAIRFAX, VA 22032 | CONSULTING | 63,845. |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| Total number of others receiving over \$50,000 for professional services ▶ | None | |

Part III Statements About Activities (See instructions.)

| | Yes | No |
|---|-----|----|
| 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) | 1 | X |
| 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. | | |
| 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.) | | |
| a Sale, exchange, or leasing of property? | 2a | X |
| b Lending of money or other extension of credit? | 2b | X |
| c Furnishing of goods, services, or facilities? | 2c | X |
| d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? | 2d | X |
| e Transfer of any part of its income or assets? | 2e | X |
| 3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below.) | 3 | X |
| 4 Do you have a section 403(b) annuity plan for your employees? | 4 | X |
| Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs 'qualify' to receive payments. | | |

Part IV Reason for Non-Private Foundation Status (See instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** An organization that normally receives: **(1) more than 33-1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc, functions – subject to certain exceptions, and **(2) no more than 33-1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions.)

| (a) Name(s) of supported organization(s) | (b) Line number from above |
|--|----------------------------|
| | |
| | |
| | |

- 14** An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

Private School Questionnaire (See instructions.)
 (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.) ----- ----- | | |
| 34a | Does the organization receive any financial aid or assistance from a governmental agency? | | |
| | b Has the organization's right to such aid ever been revoked or suspended? | | |
| | If you answered 'Yes' to either 34a or b, please explain using an attached statement. | | |
| 35 | Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation. | | |

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked 'a' and 'limited control' provisions apply.

Limits on Lobbying Expenditures

(The term 'expenditures' means amounts paid or incurred.)

| | | (a) Affiliated group totals | (b) To be completed for ALL electing organizations |
|---|---|-----------------------------------|---|
| 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) | 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 | 41 | |
| 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 | | | | |
|---|--|-------------|-------------|-------------|--------------|
| | (a) 2002 | (b) 2001 | (c) 2000 | (d) 1999 | (e) Total |
| 45 Lobbying nontaxable amount | | | | | |
| 46 Lobbying ceiling amount (150% of line 45(e)) | | | | | |
| 47 Total lobbying expenditures | | | | | |
| 48 Grassroots non-taxable amount | | | | | |
| 49 Grassroots ceiling amount (150% of line 48(e)) | | | | | |
| 50 Grassroots lobbying expenditures | | | | | |

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

| | Yes | No | Amount |
|--|-----|----|--------|
| a Volunteers | | X | |
| b Paid staff or management (Include compensation in expenses reported on lines c through h .) | | X | |
| c Media advertisements | | X | |
| d Mailings to members, legislators, or the public | | X | |
| e Publications, or published or broadcast statements | | X | |
| f Grants to other organizations for lobbying purposes | | X | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body | | X | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means | | X | |
| i Total lobbying expenditures (add lines c through h .) | | | |

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

