

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2002
 Open to Public Inspection

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

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization CENTER FOR EQUAL OPPORTUNITY Number and street (or P O box if mail is not delivered to street address) Room/suite 14 PIDGEON HILL RD, SUITE 500 City or town, state or country, and ZIP + 4 STERLING, VA 20165-6155	D Employer identification number 52-1543156 E Telephone number 703-421-5443 F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and **I** are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? **N/A** Yes No (If "No" attach a list)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit GEN ▶

G Web site ▶ **N/A**

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527

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

L Gross receipts. Add lines 6b, 8b, 9b and 10b to line 12 ▶ **402,728.**

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

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

Revenue	1	Contributions, gifts, grants, and similar amounts received			
		a Direct public support	1a	366,843.	
		b Indirect public support	1b		
		c Government contributions (grants)	1c		
		d Total (add lines 1a through 1c) (cash \$ 366,843. noncash \$)	1d	366,843.	
		2 Program service revenue including government fees and contracts (from Part VII line 93)	2	10,289.	
		3 Membership dues and assessments	3		
		4 Interest on savings and temporary cash investments	4	5,698.	
		5 Dividends and interest from securities	5		
		6 a Gross rents	6a		
		b Less rental expenses	6b		
		c Net rental income or (loss) (subtract line 6b from line 6a)	6c		
	7 Other investment income (describe ▶)	7			
	8 a Gross amount from sale of assets other than inventory	(A) Securities	(B) Other		
		8a	19,898.		
	b Less cost or other basis and sales expenses	8b	19,898.		
	c Gain or (loss) (attach schedule)	8c			
	d Net gain or (loss) (combine line 8c columns (A) and (B))		STMT 2	8d	
	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 from special events (subtract line 9b from line 9a)	9c			
	10 a 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)		382,830.	12	
Expenses	13 Program services (from line 44 column (B))	13	412,676.	13	
	14 Management and general (from line 44 column (C))	14	102,917.	14	
	15 Fundraising (from line 44 column (D))	15	65,199.	15	
	16 Payments to affiliates (attach schedule)	16		16	
	17 Total expenses (add lines 16 and 44, column (A))	17	580,792.	17	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	<197,962.>	18	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	385,184.	19	
	20 Other changes in net assets or fund balances (attach explanation)	20	0.	20	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	187,222.	21	

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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 (attach schedule)				
	cash \$ _____ noncash \$ _____				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers directors etc	125,000.	96,062.	12,625.	16,313.
26	Other salaries and wages	239,124.	183,767.	24,152.	31,205.
27	Pension plan contributions				
28	Other employee benefits	35,559.	27,328.	3,591.	4,640.
29	Payroll taxes	24,532.	18,853.	2,478.	3,201.
30	Professional fundraising fees				
31	Accounting fees	5,971.		5,971.	
32	Legal fees	6,553.	2,830.	3,723.	
33	Supplies				
34	Telephone	11,693.	1,216.	10,228.	249.
35	Postage and shipping	2,600.	40.	2,560.	
36	Occupancy	39,809.	30,593.	4,021.	5,195.
37	Equipment rental and maintenance	7,942.	1,947.	5,345.	650.
38	Printing and publications	1,332.	1,305.	27.	
39	Travel	13,751.	8,215.	5,536.	
40	Conferences conventions and meetings				
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	9,665.	7,428.	976.	1,261.
43	Other expenses not covered above (itemize)				
a					
b					
c					
d					
e	SEE STATEMENT 3	57,261.	33,092.	21,684.	2,485.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	580,792.	412,676.	102,917.	65,199.

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? **SEE STATEMENT 4**

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.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts but optional for others)

a	SEE STATEMENT #1				
		(Grants and allocations \$ _____)			412,676.
b					
		(Grants and allocations \$ _____)			
c					
		(Grants and allocations \$ _____)			
d					
		(Grants and allocations \$ _____)			
e	Other program services (attach schedule)				
		(Grants and allocations \$ _____)			
f	Total of Program Service Expenses (should equal line 44, column (B) Program services)				412,676.

Part IV Balance Sheets

Note		(A) Beginning of year		(B) End of year	
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only					
Assets	45	Cash - non-interest-bearing	655.	45	655.
	46	Savings and temporary cash investments	85,842.	46	68,341.
	47 a	Accounts receivable		47a	
	b	Less allowance for doubtful accounts		47b	
	48 a	Pledges receivable		48a	
	b	Less allowance for doubtful accounts		48b	
	49	Grants receivable	90,000.	49	
	50	Receivables from officers, directors, trustees, and key employees		50	
	51 a	Other notes and loans receivable		51a	
	b	Less allowance for doubtful accounts		51b	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	3,315.	53	
	54	Investments - securities STMT 5 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	200,500.	54	98,365.
	55 a	Investments - land buildings and equipment basis		55a	
	b	Less accumulated depreciation		55b	
56	Investments - other		56		
57 a	Land, buildings and equipment basis	62,828.	57a		
b	Less accumulated depreciation STMT 6	43,010.	57b		
58	Other assets (describe DEPOSITS)	16,076.	58	19,818.	
59	Total assets (add lines 45 through 58) (must equal line 74)	4,789.	59	4,789.	
Liabilities	60	Accounts payable and accrued expenses	15,993.	60	4,746.
	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)	15,993.	66	4,746.	
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	295,184.	67	187,222.
	68	Temporarily restricted	90,000.	68	0.
	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)	385,184.	73	187,222.	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	401,177.	74	191,968.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	N/A
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	
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	

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

a	Total expenses and losses per audited financial statements	a	N/A
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	
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	

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
LINDA CHAVEZ 14 PIDGEON HILL RD, SUITE 500 STERLING, VA 20165-6155	PRESIDENT 40	125,000.	10,185.	0.
JOHN MILLER 14 PIDGEON HILL RD, SUITE 500 STERLING, VA 20165-6155	VICE PRESIDENT ASRQ	0.	0.	0.
ABIGAIL THERNSTROM 14 PIDGEON HILL RD, SUITE 500 STERLING, VA 20165-6155	DIRECTOR ASRQ	0.	0.	0.
ARCH PUDDINGTON 14 PIDGEON HILL RD, SUITE 500 STERLING, VA 20165-6155	DIRECTOR ASRQ	0.	0.	0.
ROSALIE PORTER 14 PIDGEON HILL RD, SUITE 500 STERLING, VA 20165-6155	DIRECTOR ASRQ	0.	0.	0.
TOM KLINGENSTEIN 14 PIDGEON HILL RD, SUITE 500 STERLING, VA 20165-6155	DIRECTOR ASRQ	0.	0.	0.

75 Did any officer, director, trustee or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations of which more than \$10,000 was provided by the related organizations? If "Yes" attach schedule Yes No Form 990 (2002)

Part VI Other Information

Table with columns for question number, question text, and Yes/No columns. Includes questions 76 through 92 regarding organizational activities, financials, and reporting.

Located at 14 PIDGEON HILL RD SUITE 500

ZIP + 4 20165

92 Section 4947(a)(1) nonexempt charitable 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

92 N/A

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

	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 PUBLICATION INCOME					3,475.
b OTHER INCOME					1,961.
c TRAVEL REIMBURSEMENT					4,853.
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			14	5,698.	
96 Dividends and 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 personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		5,698.	10,289.
105 Total (add line 104 columns (B), (D), and (E))					15,987.

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 page 32 of the 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)
7	SEE STATEMENT 7

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

(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
N/A	%			
	%			
	%			
	%			

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

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

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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

Signature of officer: *[Signature]* Date: 8/25/03
 Type or print name and title: Linda Chavez

Paid Preparer's Use Only: Preparer's signature: *[Signature]* Date: 7/20/03
 Check if self-employed: Preparer's SSN or PTIN: _____
 Firm's name (or yours if self-employed) address and ZIP + 4: RUBINO & MCGEEHIN, CHARTERED
 6905 ROCKLEDGE DRIVE, SUITE 700
 BETHESDA, MD 20817
 EIN: _____ Phone no: 301-564-3636

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

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization: **CENTER FOR EQUAL OPPORTUNITY**
Employer identification number: **52 1543156**

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ROGER B. CLEGG ----- 14 PIDGEON HILL RD STERLING, VA 20165	GEN. CNSEL 40	114,167.	9,098.	0.
DAVID GERSTEN ----- 14 PIDGEON HILL RD STERLING, VA 20165	VP DEV. 40	79,167.	8,978.	0.

Total number of other employees paid over \$50,000 ▶	0			

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -----		

Total number of others receiving over \$50,000 for professional services ▶	0	

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 ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)
 Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities
- 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?
 - b** Lending of money or other extension of credit?
 - c** Furnishing of goods services, or facilities?
 - d** Payment of compensation (or payment or reimbursement of expenses if more than \$1 000)? **SEE PART V, FORM 990**
 - 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?

	Yes	No
1		X
2a		X
2b		X
2c		X
2d	X	
2e		X
3		X
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 pages 3 through 5 of the instructions)

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

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

Provide the following information about the supported organizations (See page 5 of the instructions)

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

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting					
Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting					
Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	379,693.	1,099,524.	1,024,768.	940,532.	3,444,517.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed or furnishing of facilities in any activity that is related to the organization's charitable etc. purpose	21,561.	20,277.	7,159.	1,108.	50,105.
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	16,310.	23,917.	20,538.	23,872.	84,637.
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	417,564.	1,143,718.	1,052,465.	965,512.	3,579,259.
24 Line 23 minus line 17	396,003.	1,123,441.	1,045,306.	964,404.	3,529,154.
25 Enter 1% of line 23	4,176.	11,437.	10,525.	9,655.	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24 b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum of all these excess amounts. c Total support for section 509(a)(1) test. Enter line 24, column (e). d Add: Amounts from column (e) for lines 18 _____ 84,637. 19 _____ 22 _____ 26b 1,291,365. e Public support (line 26c minus line 26d total) f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26a 70,583. 26b 1,291,365. 26c 3,529,154. 26d 1,376,002. 26e 2,153,152. 26f 61.0104%
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) N/A (2000) (1999) (1998) b For any amount included in line 17 that was received from each person (other than "disqualified persons") prepare a list for your records to show the name of and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11 as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2001) (2000) (1999) (1998) c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ d Add: Line 27a total _____ and line 27b total _____ e Public support (line 27c total minus line 27d total) f Total support for section 509(a)(2) test. Enter amount on line 23, column (e): 27f N/A g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27c N/A 27d N/A 27e N/A 27g N/A % 27h N/A %

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.

NONE

Part V, Private School Questionnaire (See page 7 of the instructions)

N/A

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

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement.)		
<hr/>			
<hr/>			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	
<hr/>			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	
<hr/>			
<hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation.	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
		N/A													
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38	Total lobbying expenditures (add lines 36 and 37)	38													
39	Other exempt purpose expenditures	39													
40	Total exempt purpose expenditures (add lines 38 and 39)	40													
41	Lobbying nontaxable amount Enter the amount from the following table -														
	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">If the amount on line 40 is -</td> <td style="width: 50%;">The lobbying nontaxable amount is -</td> </tr> <tr> <td>Not over \$500 000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500 000 but not over \$1 000 000</td> <td>\$100 000 plus 15% of the excess over \$500 000</td> </tr> <tr> <td>Over \$1 000 000 but not over \$1,500 000</td> <td>\$175 000 plus 10% of the excess over \$1 000 000</td> </tr> <tr> <td>Over \$1,500 000 but not over \$17 000 000</td> <td>\$225 000 plus 5% of the excess over \$1 500 000</td> </tr> <tr> <td>Over \$17 000 000</td> <td>\$1 000 000</td> </tr> </table>	If the amount on line 40 is -	The lobbying nontaxable amount is -	Not over \$500 000	20% of the amount on line 40	Over \$500 000 but not over \$1 000 000	\$100 000 plus 15% of the excess over \$500 000	Over \$1 000 000 but not over \$1,500 000	\$175 000 plus 10% of the excess over \$1 000 000	Over \$1,500 000 but not over \$17 000 000	\$225 000 plus 5% of the excess over \$1 500 000	Over \$17 000 000	\$1 000 000	41	
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 on page 11 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

N/A

During the year did the organization attempt to influence national state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			Amount
	Yes	No	
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations seminars conventions, speeches lectures, or any other means			
i Total lobbying expenditures (Add lines c through h)			0.

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527 relating to political organizations?

- a** Transfers from the reporting organization to a noncharitable exempt organization of
 - (i) Cash
 - (ii) Other assets
- b** Other transactions
 - (i) Sales or exchanges of assets with a noncharitable exempt organization
 - (ii) Purchases of assets from a noncharitable exempt organization
 - (iii) Rental of facilities, equipment, or other assets
 - (iv) Reimbursement arrangements
 - (v) Loans or loan guarantees
 - (vi) Performance of services or membership or fundraising solicitations
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

N/A

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
ONE NATION INDIVISIBLE	501(C)4	DIRECTOR ON BOARDS OF BOTH ORGANIZATIONS

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	FURNITURE & EQUIPMENT	VARIABLES		7.00	16	20,847.			20,847.	17,113.		2,978.
2	COMPUTER SOFTWARE	VARIABLES		3.00	16	3,392.			3,392.	3,392.		0.
3	COMPUTER EQUIPMENT	VARIABLES		5.00	16	45,080.			45,080.	44,732.		348.
4	COMPUTER EQUIPMENT	VARIABLES		5.00	16	34,739.			34,739.			6,948.
	* TOTAL 990 PAGE 2					104,058.		0.	104,058.	65,237.	0.	10,274.
	DEPR											

FOOTNOTES

STATEMENT 1

AFFIRMATIVE ACTION AND HIGHER EDUCATION - TO ASSESS AFFIRMATIVE ACTION PROGRAMS IN PUBLIC COLLEGES AND UNIVERSITIES.	59,177.
BILINGUAL EDUCATION - TO RESEARCH AND ASSESS THE EFFECTIVENESS AND IMPLEMENTATION OF BILINGUAL POLICIES AT THE NATIONAL, STATE AND LOCAL LEVEL.	156,083.
CEO PUBLICATIONS - EOF PUBLISHES A SERIES OF POLICY BRIEFS THAT PROVIDE DETAILED AND WELL DOCUMENTED TREATMENTS OF MAJOR PUBLIC POLICY ISSUES. ALSO, CEO PUBLISHES MONOGRAPHS THAT COLLECT ESSAYS ON PUBLIC POLICY ISSUES.	5,626.
RESEARCH IN ENGLISH ACQUISITION AND DEVELOPMENT - REFORMING BILINGUAL EDUCATION PROGRAMS IN PUBLIC SCHOOL DISTRICTS IN THE U.S. BY CONSULTING PUBLIC SCHOOL DISTRICTS WITH INEFFECTIVE PROGRAMS, RESEARCHING THE EFFECTIVENESS OF BILINGUAL EDUCATION PROGRAMS TO TEACH ENGLISH AND PUBLISHING SCHOLARLY STUDIES ASSESSING BILINGUAL EDUCATION PROGRAMS.	24,795.
REGULATORY IMPACT OF CIVIL RIGHTS LAWS - RESEARCH AND ASSESS CIVIL RIGHTS ISSUES NOT INCLUDING AFFIRMATIVE ACTION IN HIGHER EDUCATION, WITH PARTICULAR EMPHASIS ON FEDERAL LAWS AFFECTING U.S. BUSINESSES.	51,703.
RESEARCH AND COMMUNICATIONS - THE OBJECTIVE IS TO PROVIDE REPORTERS AND EDITORS WITH A RELIABLE SOURCE OF EXPERT OPINION AND ANALYSIS ON RACE AND PUBLIC POLICY ISSUES.	115,292.
TOTAL PROGRAM SERVICE EXPENSES	412,676.

FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 2

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
COMPUTER EQUIPMENT	VARIOUS	VARIOUS	PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	19,898.	19,898.	0.	0.	0.
TO FM 990, PART I, LN 8	19,898.	19,898.	0.	0.	0.

FORM 990 OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
COMPANY FUNCTIONS	1,407.		1,407.	
COMPUTER SERVICES	10,122.	7,779.	1,022.	1,321.
CONSULTANTS	7,300.	7,300.		
COURIERS & DELIVERY	1,651.		1,651.	
DUES & SUBSCRIPTIONS	3,481.	2,438.	1,043.	
MEALS & ENTERTAINMENT	1,062.		1,062.	
OFFICE EXPENSE	6,441.		6,441.	
ON LINE SERVICES	10,418.	8,557.	1,861.	
RESEARCH MATERIALS	410.	164.	246.	
FEES-OTHER	50.		50.	
ADVERTISING	8,919.	6,854.	901.	1,164.
TEMPORARY LABOR	789.		789.	
BROKERAGE FEES	389.		389.	
MISCELLANEOUS	57.		57.	
PAYROLL SERVICES	1,604.		1,604.	
PROMOTIONAL MATERIALS	3,161.		3,161.	
TOTAL TO FM 990, LN 43	57,261.	33,092.	21,684.	2,485.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 4
PART III

EXPLANATION

TO DISSEMINATE INFORMATION ON THE ENFORCEMENT OF CIVIL RIGHTS LAWS. TO STUDY DISCRIMINATION ON THE BASIS OF RACE, SEX, NATIONAL ORIGIN AND RELIGION.

FORM 990

NON-GOVERNMENT SECURITIES

STATEMENT 5

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
SECURITIES				98,365.	98,365.
TO 990, LN 54 COL B				98,365.	98,365.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 6

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE & EQUIPMENT	20,847.	20,091.	756.
COMPUTER SOFTWARE	3,392.	3,392.	0.
COMPUTER EQUIPMENT	45,080.	45,080.	0.
COMPUTER EQUIPMENT	34,739.	6,948.	27,791.
TOTAL TO FORM 990, PART IV, LN 57	104,058.	75,511.	28,547.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO STATEMENT 7
ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

93A INCOME RECEIVED TO COVER SHIPPING AND HANDLING COSTS OF EDUCATIONAL
93A MATERIALS DISTRIBUTED TO THE PUBLIC.
93B OTHER INCOME RECEIVED IN SUPPORT OF THEIR PRIMARY EXEMPT PURPOSE
93C REIMBURSEMENTS FOR TRAVEL DONE BY OUTSIDE CONSULTANTS DISCUSSING THE
93C PROGRAMS THAT SUPPORT THEIR PRIMARY EXEMPT PURPOSE.

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Note Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only
 All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization CENTER FOR EQUAL OPPORTUNITY	Employer identification number 52-1543156
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P O box, see instructions 14 PIDGEON HILL RD, SUITE 500	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions STERLING, VA 20165-6155	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990 T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990 BL | <input type="checkbox"/> Form 990 T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990 PF | <input type="checkbox"/> Form 1041 A | <input type="checkbox"/> Form 8870 |

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group check this box If it is for part of the group check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until AUGUST 15, 2003 to file the exempt organization return for the organization named above. The extension is for the organization's return for
 ▶ calendar year 2002 or
 ▶ tax year beginning _____, and ending _____

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990 BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990 PF or 990 T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c Balance Due Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ *D. vi John* Title ▶ C.P.A. Date ▶ 5/6/03
 LHA For Paperwork Reduction Act Notice, see instruction Form 8868 (12-2000)